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Development, Attachment and Relationship: New Psychoanalytic Concepts

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1. Introduction

In the last decade, the term "depth psychotherapy" has lost much of its fascination. This is reflected by its omission in the index of recent textbooks of psychoanalytic therapies (Thomä and Kächele 1987, 1991; Heigl-Evers et al. 1993). In therapeutic settings, the terms "psychodynamic" and "psychoanalytic psychotherapy" have won much ground, especially in the empirical world.

Three manuals published in 1984 (Luborsky 1984; Strupp and Binder 1984; Klerman et al. 1984) were all akin in different ways to the interpersonal and dynamic way of thinking. They demonstrated that it was obsolete to contrast psychodynamic procedures with procedures that were empirically supported.

The systematic pathology of conflict in Freud's paper (1917) characterised the scientific paradigm of psychoanalysis, which Freud summarised by stating:

"We seek not merely to describe and to classify phenomena, but to understand them as signs of an interplay of forces in the mind" (Freud 1917, pp.67).

A significant assumption of psychoanalytic theory is the role which conflict plays during the lifespan of a person - starting from birth, manifest in interpersonal contact and personal well-being. If the role that conflict plays in the emergence of a psychic or psychosomatic illness is considered purely as intrapsychic and not also as interpersonal, the implications of the theory, as well as the technique, would be limited. Psychoanalysis and both the Jungian and Adlerian schools are based on the concept of development. Traditional psychoanalytic understanding of a symptom almost requires a search of its origin in the life-history of the person. This genetic point of view is not incompatible with Kurt Lewin's belief that only forces and conditions which are present in the here and now can induce an effect in the here and now. He would say that much of what is "presently seen" in the individual (in the here and now) can only be identified by the genetic discovery of what came before (Rapaport 1960).

The main tool with which the developmental dimension is captured is reconstruction. Freud based his psychoanalytic theory on the treatment and observation of adults. It was only incidental that he also observed young children. One of these observations is the well-known so-called reel of string game, which can be found in Freud's *Beyond the Pleasure Principle* (1920). Here, Freud recounts how his 1½ year-old nephew comes to terms with the absence of his mother by playing with a reel of string. Emde (1992) sees this contribution as being ahead of its time. Freud attributes the small child with the ability to actively reduce tension by repeating his experience of separation and reunion in the game.

In contrast, in traditional psychoanalytically based developmental psychology, infants were seen as passive, undifferentiated beings who were governed by their instincts (Dornes 1993).

In the last 30 years, there has been a great change in the understanding of the various developmental processes that take place in early childhood. Empirically based research into the early mother--child relationship was initiated by Spitz. As early as 1935, he was able to observe hundreds of infants growing up in orphanages and described the "hospitalism" he saw, which he attributed to emotional deprivation. Research into the evolution of the mother-child relationship in the first year of life, as reported by Spitz (1965), provided the psychoanalytic world of the infant or child with new ideas, a world which until that point had largely been constructed or reconstructed. Mahler et al. (1975) followed the tradition of Spitz and developed his work further in her groundbreaking monograph entitled *The Psychological Birth of the Human Infant*.

In addition to observing psychotic children and working with them (Mahler 1958, 1969), she focused on the effect that being separated from the main caregiver had on children. Based on her work, Mahler conceptualised a developmental theory which was mainly pathomorphic. Bowlby (1969) was the first psychoanalyst of his generation to use ethological terms to describe the infant's biologically predisposed availability of attachment to a main caregiver. He saw relatedness in early childhood as a primary and independent developmental goal that is not subservient to a physiological need such as hunger (see also Künzler 1969). These theoretical developments perceive the infant more from an interactional point of view and also focus on relationship aspects. The concept of dyadic interplay replaces the drive-conflict model. A dynamic and conflict-oriented psychology which describes psychic processes has been extended by more current concepts of development, attachment and relationship. The new theories of child development have had two main effects. They have promoted an integration of ethology and of theories of communication and action and they have also had a marked impact on psychoanalysis and other psychodynamic schools (Stern 1995; Dornes 1997; Krause 1998). In the following chapter, these three concepts will be explored further in order to demonstrate the ways in which each has made a contribution to new psychoanalytic thought.

2 Development

The diversity of methods used to observe infants has contributed to a change in the perception of children's development and hence lead to an increased base of knowledge.

The function attributed by psychoanalysts to direct observation was initially to correct the retrospective information obtained in the therapeutic analyses. Today, psychoanalysts are required to also use empirical and experimental information gained from direct observation and to reflect on the consequences for clinical and retrospectively obtained knowledge. Daniel Stern (1985) captured this element of tension by talking about the "observed infant" and the "clinically reconstructed infant". His work criticises traditional psychoanalytic concepts such as "normal autism" (Mahler 1958), the process of splitting into "good" and "bad" (Klein, et al. 1952; Kernberg, 1968), orality, undifferentiatedness or "normal symbiosis" (Mahler 1969) and manages to demonstrate the absurdity of some of the clinical constructs. Lichtenberg (1983) sums up the infant's world in the first year of life: Firstly, infants are capable of

much more than was previously thought possible and secondly, they are not as able in some matters as had previously been assumed. They can master complex developmental steps when their activities are guided and enhanced by affect. However, the infant does not have or even need the ability to imagine symbolically.

Clinical reconstruction primarily focused on the revelation of subjective experience, but the interest in direct observation focuses on identifying what really does happen in childhood, in so far as it can be observed from the outside. However, therapists are always in danger of reifying experiences recounted by patients and of taking them as the real picture of the event. Freud took great pains with the retrospective attribution of meaning when it concerned the conception of psychological causality:

"I admit that this is the most delicate question in the whole domain of psycho-analysis. I did not require the contributions of Adler or Jung to induce me to consider the matter with a critical eye, and to bear in mind the possibility that what analysis puts forward as being forgotten experience of childhood (and of an improbably early childhood) may on the contrary be based upon fantasies created on occasions occurring late in life" (Freud 1918, pp. 137).

However, the path "inexorably led analysts to trace the etiological conditions of psychic and psychosomatic illnesses back to the first hour and even earlier" (Thomä and Kächele 1991, pp. 100). The analysis of pathological development provided the basis for an uncritical view of normal psychological development (Peterfreund 1978). This peculiarity of psychoanalytic theory formation so far is reflected by the fact that infants' characteristics are described as deficient modi of the adult world. In addition to this so-called adultomorphism, pathomorphism can also be found and is equally abundant. Here, the infant is described using pathological categories. This is based on the assumption that formative processes, that constitute development, can be derived from the observation of pathological states. The key to discovering early phases of psychic life lies in the data concerned with fixation and regression (e.g. Tustin 1994).

In the following sections, some concepts which have modified the psychoanalytic view of development from infancy to childhood will be described further.

2.1 Complex Abilities of the Infant

Freud's assumption that the tension/relief principle representing the pleasure/unpleasure principle is the basis of developmental processes can no longer be maintained.

Since the 1980s, developmental psychologists have emphasised that a newborn infant is provided with basic activity which has a tendency to stimulate the organism to increased psychological complexity (Brazelton et al. 1974; Stern 1974; Emde 1992). Newborns have a substantial repertoire of possible behaviours that prepare them for interactive relations in a care-taking environment.

The drive/discharge model viewed development through the eyes of the entropy model. However, today's developmental psychobiologists take into account the fact that the neurobiologically determined complexity, due to 10^{10} neurones with thousands of interconnections, leads to uncertainty and a limited ability to predict behaviour (Spitzer 1997). This degree of complexity guarantees

individuality and assures self-determination (Emde 1992). Complexity grows in the course of development. Humans are attributed with the ability to socialise themselves into the animate and inanimate world. Activity generated endogenously represents a fundamental principle and has taken the place of the drive/discharge hypothesis. Similarly, we should be critical of the perception that the infant is born as a psychological "blank slate" and is only formed by parental socialisation. Schaffer (1977) states that, from the beginning, a baby's behaviour shows organisation and order. It is only due to our inadequate recording methods that the small child seems as if it is in a state of bubbling confusion. The discovery of this complexity is attributable to the detailed work, that has been done on different types of behaviours, each demonstrating its own intricacy. Many microscopic interactions between mother and child may be subsumed under the terms synchrony and reciprocity (Jörg et al., 1994). Studies of mother-infant interaction have shown that mothers and their infants are both active partners who may each contribute to the course of the interaction (Cohn and Tronick 1988; Murray and Trevarthen 1985; Stern 1974). Typical mother-infant interactions may be characterised by a movement from coordinated states (synchronised) to uncoordinated states and back again (Tronick and Weinberg 1997).

Finally, the revolution seen in research into infancy was based on methodological innovations (Stern 1985). Today, we ask what reactions an infant shows that can be taken as an answer to the questions put by the researcher. It has been demonstrated that, from the beginning, infants are able to show a preference, habituate or let themselves be taken by surprise. These signs, which point to the complex abilities of infants, have led to the development of research paradigms.

Research has shown that infants have excellent olfactory abilities. They are able to distinguish their mother from others by their scent from the eighth day of life (Brazelton and Cramer 1991).

In addition the visual abilities of infants have long been underestimated. Experiments with intrauterine ultrasound have shown that the fetus turns towards a moderate source of light, but turns away if this source is intense (Brazelton 1981).

The postnatal auditory abilities of infants are also remarkable. Even during the first hours after birth, newborns are more likely to turn their head and eyes towards a tone, noise or a voice than away from it.

Infants also have a capacity for intersensory co-ordination or cross-modal perception. Hence, an infant is able to co-ordinate sensory perceptions with different sensory canals (seeing, hearing and touching). This incredibly complex ability has been investigated repeatedly (e.g. Meltzoff and Borton 1979). It can be concluded that infants perceive objects as a gestalt and do not live in a world of separate sensations (Dornes 1993). Psychoanalytically based developmental psychology assumes that, at the beginning, self and object perception is fragmented. However, the findings concerning cross-modal competence seem to show that from early on the separate aspects of sensory information are put in relation to each other. It is not the case that separate part objects are perceived next to each other.

Newborns are organised in such a way that, after birth, they can start interacting in a complex way with the animate and inanimate world. The regulation inherent in these interactions imprints the patterns of sleeping and waking cycles, feeding and social exchange. This regulation is established in the first two 2 months of life. It is manifest in various phases replacing one another,

such as alert attention, calm wakefulness, arousal, crying, rapid eye movement (REM) sleep, non-REM sleep and the infant's search for different stimuli (Greenspan 1989). The concept of self-regulation acts as a basic motive of development and is related to the organism's ability to smooth out deficits which arise out of challenges or disturbances (Clarke and Clarke 1976). Another strong motive in the developmental plan of the small child is the innate willingness to adapt socially. Surprising to some, research in developmental psychology has shown the great degree to which taking part in social interactions is pre-programmed. Many of these abilities are already present at birth and include a preference for eye contact or a state-dependent susceptibility for the activating and pacifying effect induced by being held and touched by one's mother.

Social pre-adaptation is manifest in a multitude of communicative channels. According to Papousek (1981), social pre-adaptation is based on an ability to discover and master contingencies in stimuli. This would imply a biological basis. In addition to children's behaviour as described above, parental response to children's communicative offers should also be mentioned, which Papousek and Papousek (1983) defined as "intuitive parenting". Such parental behaviour seems to be characteristic of the species, not conscious and not a product of individual experience.

The psychoanalytic pleasure/unpleasure principle has lost its economic quality. Today, it is conceived of as affective monitoring. This is a basic motivational system that evaluates affective experiences according to the quality of "pleasurable" or "unpleasurable" (Emde 1981). Infants do not divide the world into two, but instead abstract daily experiences into different levels of pleasurable and unpleasurable experiences. This will eventually lead to the formation of schemata as conceived by Piaget, where cognitive elements play as important a role as emotional quality. This principle will govern both the mother's and the child's actions. At the age of 3 months, a stable emotional organisation can already be seen that includes three dimensions, namely, hedonic quality, activation and internal/external orientation. Early coherent emotional experience forms the affective core of self (Emde 1983). This emphasises the significance attributed to the emotional attention provided by the caretaker in early childhood.

In this process of emotional exchange, attunement is attributed with a special meaning (Stern 1985). A series of dialogic sequences in different communicative channels provide this exchange, which is seen in the ninth month. Stern assumes that around this time the subjective self is formed and joint affective experience becomes prominent.

A mother interacts with an infant who is motorically active (e.g. kicking the legs rhythmically) by responding in the verbal channel (e.g. with "lalala"), hence she does not change the rhythm but adds variation by verbalising.

Kohut's term concept of mirroring (Kohut and Wolf 1978) comes closest to the process of attunement. In the clinical world the use of the term encompasses other different affective processes. Empathy is more closely linked to cognitive processes than the unconscious process of attunement (Moser and von Zeppelin 1991; Basch 1983). In all research approaches addressing early mother-child interaction, the processes of reciprocity, intersubjectivity, intentionality and a willingness to relate are emphasised. These represent signs of the early processes of communication.

From the beginning, children are equipped for social interaction. They partake in reciprocal exchange with the caretaker. We can not see our fellow man

as static targets of drive. From this point of view, terms such as object relationship are not suitable due to the implications they hold (Emde 1983).

2.2 Implications for the Psychoanalytic Understanding of Development

These developments caused the fundamental position of the drive theory in classical psychoanalysis to be given up. The psychoanalytic object psychology of Balint and Winnicott, for example, have prepared the way for this critique. The libido theory did not account for the process of affective reciprocity. Freud regarded the libidinous object from the point of view of the child (and his/ or her unconscious wishes) and not from the view of the reciprocal relationship between mother and child. This tradition was so deeply embedded that Kohut (1971) derived his "self-objects" from the hypothetical view and experience of the infant. Self-psychologists assume a significant phase of undifferentiation between the self and others (Stern 1985).

From today's point of view, the inner object is not seen as an isolated object, but rather as a memory framed by a context of activity. From birth, the object representations take place in a multiple context of acts of varying quality. By repeated communicative acts unconscious schemata are created which can become very stable.

Stern (1985) refers to this active process as the representations of interactions that have been generalised (RIG). He assumes that the infant divides the flow of an interaction into episodes (e.g. feeding), and from repeated similarities (invariances) a prototype or schemata is built and generalised. This schema guides expectations and behaviour in the interactional sequences. More recently, Stern has extended his theory of the representation of interaction by starting from the subjective perspective of the infant.

Stern (1996) conceived a model of infant representations not so much concerned with behaviours, but much more with feelings of the infants. He refers to the generalised representations of interactions as "schemas-of-being-with". However, in each interactive episode, different feelings are experienced (e.g. subjective feeling of hunger, negative affect, tactile contact with the mother, kicking). These feelings are stored in the form of protonarrative envelopes (series of events such as in a narrative). In summary, the infant experiences the world of interactive events as if they had the structure of a story.

The main difference between Stern's concepts and those of psychoanalysis are that, in traditional psychoanalysis, unconscious fantasies attributed to the infant originate in his or her instincts. Stern, on the other hand, assumes that the infant develops his or her representations from real interactions. These are not motivated by tension or a lack of it, but are created and processed continually (Dornes 1997).

It may be asked to what extent psychoanalytic clinical thought has changed theoretically and practically due to the rich data set on early parent-child interaction. It is feasible to maintain that these early processes are interesting, but do not have any significant influence on the complex process of symptom formation observed in neuroses and other disorders, as the psychological organisation of adults is fundamentally different. With the development of language and accompanying symbolic processes, early experiences would be transformed in such a way that the familiar ground of the psychotherapist would not be disturbed. Parallels can be drawn here with a phenomenon which is also familiar from developmental psychobiology. The developmental context of a

child permanently changes and transforms itself along a developmental pathway, and later behaviour can not be predicted from earlier events that have taken place at a predetermined sensitive phase.

The consequence would be that infants should not be seen as "pseudo-adults" by ascribing to them the ability to symbolise in the first year of life (Lichtenberg 1983). However, the Kleinian notion of fantasy and/or the theory of splitting as an early form of defence would imply this.

These new insights make Kernberg's (1984) concept of splitting, questionable as an explanatory concept of early ontogeny. If infants split good and bad, they would be forced into "double bookkeeping" (Stern 1985), but this does not correspond to the infant's abilities at this developmental stage. Clinical use of the concept of splitting as a description of pathological states has also been affected by these research developments (Reich 1995). These states require a certain degree of symbolization, such as a labelling of memories and cognitive reorganisation. Hence the process of splitting is most probably found at a later developmental phase when symbolic transformation of experience is possible.

Similarly, it is difficult to justify the concept of an undifferentiated phase of the id and ego, in which the inner world of the infant consists of separate elements. This would equally be the case for Mahler's concepts of "normal autism" and "symbiosis" (Stern 1985; Lichtenberg 1983). Even though Mahler does not conceive of symbiosis as biological, research into the abilities of infants indicate that the term "symbiotic merging" as an appropriate category of early experience needs to be reviewed. Terms such as "primary narcissism" equally become set terms of what are most probably outdated theoretical positions (Eagle 1984).

Psychological research emphasises the characteristic of openness and also limited predictability from one developmental phase to the next as being important for healthy development. This is especially the case if we focus on individual behaviours. With the term "transference", Freud tried to capture pathological development which is formed in accordance with psychodynamic theory through established motivational and relationship-regulating structures (Thomä and Kächele 1987).

Instead of aetiological assumptions concerning which phase of development may be the origin of a specific disorder, it is possible to establish that the different developmental steps are linear, even though they continue to interact in parallel as functional contexts. Erikson's epigenetic model (1950) is relativised by Stern's concept of four senses of the self. Disorders may develop at any time of life in one of the four senses of self: the emergent self, the core self, the subjective self and the verbal self. The simplified link of severe disorders with early development is undone, something which has substantial therapeutic implications (Stern 1985). Instead of seeing the development of disorders fixed at critical phases, the whole chain of interacting influences should be taken into account. The focus should not only be on the first or the last link in the chain. The formation of psychopathology can thus only be understood as an accumulation of pathological patterns of interaction (Blatt 1990).

The value of this object psychology approach, which is also developmentally oriented, can be seen in the re-analysis of the Menniger and the National Institute of Mental Health (NIMH) depression project (Blatt 1992; Blatt et al. 1995). Here, a differential effect of therapies with regard to specific

developmental and psychoanalytic configurations (anaclitic vs. introjective) could be demonstrated.

2.3 Mother-Child Psychotherapy: A New Development in the Therapeutic World

The developmental theory of Sander assumes that, in the first 3 years of life, the mother-child system represents an interconnection of mutual regulation and self-regulation (Sander 1985). The negotiation of self-perception, self-determination and initiative are the core problems which an infant has to tackle with his or her caretaker. These configurations will become the enduring adaptive strategies of an individual (Quinton and Rutter 1988), the implications of which may be found in the transference patterns (Luborsky and Crits-Christoph 1990). This process of fitting and experience of what is possible in a relationship becomes clinically relevant when the caregiver introduces neurotic aspects into early interactions, leading to maladaptive interaction patterns.

Cramer (1991) describes the first attempts at mother-baby psychotherapy, where such disturbances may be therapeutically resolved. In his psychoanalytically oriented therapy, Cramer assumes that the mother has her own unresolved conflicts, which become reactivated through the birth and the child's behaviour. The unresolved conflicts are then projected onto the child and distort and burden the interaction.

In Stern's book *"The motherhood constellation"* (1995) he compares the different psychotherapeutic approaches in mother-child psychotherapy and critically discusses their theoretical foundation. He develops his own theoretical model of a so called motherhood constellation, which should be the starting point for an all-encompassing view of mother-child psychotherapy.

He defines this constellation as a mother's fundamental psychological organisation, which should be acknowledged in the therapeutic relationship. The central themes are as follows: Can this mother provide the nourishment and care this baby needs to survive? Can she have an emotional relationship, build-up a system of support and help the baby find his or her own identity? A new trilogy develops: the mother's mother, the mother herself and the baby. This motherhood trilogy is central in every therapeutic intervention. Stern pleads for a positive and supportive transference in mother-child psychotherapies to counteract any additional hurt and insecurity.

An all-encompassing concept of preventive intervention was conceptualised by us for parents of very premature infants. This intervention programme consists of four components (Brisch et al. 1996), which were conceived to help parents cope better with the accompanying insecurity and anxiety brought about by this situation. In addition, the intervention programme was designed to help establish a positive parent-child relationship.

Immediately after the birth, parents were offered individual attachment-focused therapy to enable reflection of reactivated experiences of loss and separation, as these could interfere in the establishment of close contact with the premature baby. The focus of a continual parent group was to provide the possibility for emotional exchange and support with other parents. Once the child had been discharged from the hospital, a home visit from the therapist and a neonatal nurse was offered who provided information of a medical nature. The final component of the intervention programme consists of a video training to improve a parent's sensitive handling of the child.

According to attachment theory, a sensitive parent-child interaction allows secure development on the part of the child. This significant direction of research will be explored in the following section.

3. Attachment

John Bowlby, a psychiatrist and psychoanalyst, formulated his attachment theory in the 1960s (Bowlby 1969, 1973). He turned away from the traditional psychoanalytic view of fantasy life during childhood and focused on the implication of actual real events such as separation and loss on the emotional development of a child. Hence Bowlby's theory has long been the topic of heated debate among psychoanalysts (Bretherton and Waters 1985; Bretherton 1995).

The independent motivational aspect of attachment has now been widely accepted, as safeguarding the establishment of social relationships which independent of hunger and sexuality safe-guards the establishment of social relationships. Freud's view that social relationships are primarily formed because of the need for nourishment would not find support by the researchers working in the field of attachment (Grossmann et al. 1989). The theory of attachment has taken up aspects of psychoanalytic theory and also developed some aspects further (Diamond and Blatt 1994). Contrary to the psychoanalytic theory of development, attachment theory has also managed to also establish itself empirically. Observation of important aspects of dyadic interactions (also prospective) are possible and are systematically described and operationalised.

3.1 Attachment theory, its Basic Concepts and Methods of Attachment Theory

Attachment theory sees the desire for close emotional relationships as specifically human. This desire, which is already present in the newborn, remains present until old age and is a basic element with a function for survival. In infancy and childhood, attachment to one's parents ensures shelter and care. Analogously, the task of the parents is to provide the sensitive care for their child. These two systems are in delicate balance and develop in a specific sequence.

In the middle of the first year of life, using his or her attachment behaviour and reactions of the attachment figures, the child develops an inner representation of attachment, a so-called inner working model (Bowlby 1969, 1973, 1979). The child's daily interactions with his or her attachment figures are the basis of the inner working models. The experiences gained from the interaction of the attachment figures are integrated into a whole. For the child, this model is a basic organisation of expectations and corresponding feelings which accompany his or her behaviour in different situations. This basic organisation remains the same even if the child changes his or her behaviour in different situations (Fremmer-Bombik 1995).

The inner working model is seen as a construction that becomes increasingly complex over a life time; however, the focus is exclusively on relationships to attachment figures. To assume an internalisation of relationship experiences shows a parallel to other psychoanalytic theories, especially the object-relations theory. The difference is one of specificity, as attachment theory only concerns itself with experiences of attachment to specific attachment figures and operationalises these.

The term "working model" corresponds to the "basic assumptions" of Beck et al. (1979) and to the "representations of interactions that have been generalised (RIGs)" of Stern (1985), which are now referred to as "schemas-of-being-with" (Stern 1995, 1996), in addition to the "role relationship models" and "self-other- schemas" of Horowitz (1991).

Attachment quality between mother and child finds its expression in the second half of the first year of life. The child experiences whether the attachment figure responds sensitively to his or her signals and needs and whether availability is shown. A sensitive mother is alert and notices her child's signals; she interprets them correctly and reacts promptly and appropriately to the needs of her child (Ainsworth et al. 1974). This dialogue enables the child to have inner security, to show flexibility in situations of conflict and to have confidence in his or her continually expanding competence, emotional reactivity, sensitivity and also assertiveness (e.g. Grossmann et al. 1988).

The relationship between parental sensitivity and a secure attachment classification is moderate ($r=.32$; van IJzendoorn 1995). However, the relationship between parents' ability to reflect (see below) upon their own childhood and the development of secure attachment of by the child is much stronger ($r=.47$, $\kappa=.49$; Main et al. 1985; Grossmann et al. 1989; Fonagy et al. 1991a). A so-called transmission gap exists, which is the "gap" of knowledge concerning the interactive ways in which attachment experiences are passed on (van IJzendoorn 1995).

Ainsworth and her colleagues Witting (1969) developed the "strange situation", where the attachment quality of the child to the mother was operationalised. This standardised laboratory situation is made up of eight episodes, each lasting 3 minutes. The behaviour of 12- to 18-month-old children is observed while in contact with a "stranger", after two short separations from their attachment figure and reunions with this person. The episodes of separation were conceptualised to activate the attachment system and to trigger attachment behaviour (e.g. clinging, seeking proximity, crying etc.). Behaviours of attachment and exploration are the central paradigms of attachment research, which ideally should be balanced. How children react in the reunion episodes, enables a reliable assessment of the quality of their interactional life so far (for a see review, see Buchheim et al. 1998).

Four patterns of attachment have been identified to date, and data from other cultures have confirmed these.:

1. Securely attached (B pattern). These are children who have made reliable attachment experiences. In the separation episode, they can show their distress openly; the attachment figure is usually able to comfort them easily, and the children are able to return to play and exploration.
2. Insecure-avoidant (A pattern). These children have usually had predictable but rejecting experiences with their attachment figure, especially concerning the expression of negative feelings. They avoid this rejection by concentrating on play in a seemingly unaffected manner. When the attachment figure leaves or returns, they show no distress or need of proximity. Spangler and Schieche (1995) measured the children's cortisol level and found these children to be very stressed, thus indicating maladaptive avoidance strategies.
3. Insecure-ambivalent (C pattern). These children have had unpredictable experiences with their attachment figure, who is sometimes very sensitive in responding to their needs and sometimes not sensitive at all. Upon separation, insecure-ambivalent children cry a lot and are characteristically difficult to comfort. They show anger or passive despair as an expression of their ambivalence. Their attention is mostly focused on their attachment behaviour.
4. Disorganised/disoriented (D pattern). This group was described as such in the 1980s (Main and Solomon 1986) and is assessed separately from the other

classifications. After separation, the children have not developed an organised coping strategy. They are neither able to approach the attachment figure (as B or C does), nor can they distract themselves (avoid as A does). Upon reunion, they show unintegrated behaviours, such as stereotypic movements after seeking proximity, phases of rigidity, so-called "freezing" and an expression of fear towards their parent. This disorganised behaviour is especially seen in abused children (Carlson et al 1989), neglected children (Lyons-Ruth et al. 1993) or children whose parents have not worked through their own process of grieving (Main and Hesse 1990). Internationally, the distribution of attachment patterns has been shown to be 66% for the B pattern (secure), 20% for the A pattern (avoidant) and 12% for the C pattern (ambivalent) (e.g. Baltimore study, Ainsworth et al. 1978). In non-clinical samples, the proportion of the D pattern can be assumed to range from 15% to 35% (Main 1995). In clinical populations of abused children, the frequency of the D pattern is 80% (Main 1995).

So far, the results confirm a stability of the attachment quality of children from 1-10 years of age (Grossmann and Grossmann 1991). The prognostic value of attachment experiences or attachment deficits is high for the later social development of the child, his or her self-image, self-esteem, social competence and cognitive ability (Grossmann and Grossmann 1991).

An early secure attachment relationship can be a protective factor in the development of psychological disorders (Bowlby 1988, 1995). However, early avoidant or ambivalent attachment relationships may start negative mechanisms, which can establish themselves in inappropriate psychic structures (Fonagy 1993). At the same time, early experiences may be changed by subsequent stress. A straightforward stability of attachment security cannot be assumed. Bowlby never took a deterministic view of early attachment experiences. He saw the developmental path of attachment organisation as flexible and would not subscribe to the view that once an attachment relationship was secure it would always be secure (Bowlby 1988, 1995). Extreme emotional experiences due to separation or loss may change attachment quality and may lead to a change in self-esteem (Zimmermann et al. 1995). Similarly, it may be assumed that the inner working model of an early insecure attachment experience may be reorganised. This might be the case after a new positive experience with a partner or psychoanalytic therapy (Fonagy et al. 1995).

The systematic description of childhood relationship experiences enables construction of an attachment theory with a life-cycle perspective (e.g. Ainsworth and Bowlby 1991). Since early relationship experiences seem to influence adult relationships, there has been a growing interest in the attachment representations of adults¹. An essential step in this development was the so-called "move to the level of representation", which was taken by Main et al. (1985). She assessed the attachment representations of 6-year-olds (Strage and Main 1985; Main and Cassidy 1988; Grossmann and Grossmann 1991) and of adults (Main et al. 1985) by using language. The Adult Attachment Interview" (AAI) (George et al., unpublished 1985) was developed to capture the attachment representations in adults.

The themes touched upon in the interview correspond to Bowlby's trilogy of relationship, separation and loss.

The semi-structured AAI assesses current attachment experiences with respect to the past and the present using 18 questions. The scoring method focuses not so much on the content of the narrative, but on the ways and means of

linguistic organisation. The coherence of the discourse in the linguistic sense is essential (see Grice 1975).

Parental attachment representations have also been classified into four groups (Main et al. 1985; Main 1991; Grossmann et al. 1988; Ainsworth and Eichberg 1991) and correspond conceptually and empirically to the attachment qualities of children:.

1. Autonomous secure adults recount their childhood memories/experiences in an open and coherent fashion. They provide positive and negative examples, can reflect on them and are able to integrate them into an appreciating whole.
2. Dismissing adults provide incomplete, incoherent examples and often have blanks, especially when concrete examples are required. Attachment figures are either idealised or devalued in order to avoid painful memories.
3. Preoccupied adults relate in an angry and never-ending way about the conflicts they experienced with their caregiver. They are entangled and give the impression that their experiences were very recent. These adults characteristically oscillate between positive and negative value judgements without being aware of the contradiction.
4. Specific passages in the AAI may show unresolved grief. These passages are rated separately and relate to traumatic events (loss or abuse) which have not been resolved. The linguistic presentation seems disorganised (confusing senses of time and space, long silences, unusual details), incoherent and at times irrational.

Longitudinal results show the clear relationship between a mother's attachment representations and the observable attachment quality of her child (Main 1991; Fonagy et al. 1991a). Hence the transgenerational aspect of attachment has been confirmed.

The statistical proof of the transmission of attachment experiences is satisfactory. Agreement between the category of attachment representation in adults and the quality of attachment of their children was examined in 18 studies (854 dyads) (van IJzendoorn 1995). The agreement (secure vs. versus insecure) is 75% ($\kappa=.49$) (Main 1995). In a study by Fonagy et al. (1991b), the predictive validity of the AAI is clearly shown. The attachment quality of the child could be predicted from the attachment representations obtained during an interview conducted while the mothers ($n=100$) were pregnant ($\kappa=.44$; (69%). These results have been replicated in several studies (Benoit and Parker 1994; Ward and Carlson 1995).

3.2 Clinical Relevance of Adult Attachment Research

It has also proved useful to apply the AAI adult attachment interview clinically. Van IJzendoorn and Bakermans-Kranenburg (1996) demonstrated a higher distribution of insecure representations of attachment in clinical than in non-clinical samples. Hence a distinction of clinical and non-clinical groups could be made using the AAI, even though a differentiated assignment of insecure attachment and psychopathology is not yet possible. The coding system of the AAI takes into account the extent to which attachment relevant information has been processed. The way the information is presented, especially regarding linguistic aspects, is central to the AAI, and the coding system therefore also incorporates defensive processes. This semi-structured interview can "surprise"

the unconscious, and there have been discussions on whether to include the systematic application of this instrument in clinical training.

Psychoanalytic research into borderline personality has already profited from the results of attachment research (Clarkin et al. 1992). A lack of sympathetic understanding, being untouched by the feelings of others and an inability to have relationships are all phenomenological characteristics of the dissociated and narcissistic personality disorder and of a borderline personality type. Among other factors, a pathological component of this disorder is discussed, where from the perspective of object psychology disorders of "containments" (Bion 1962) are assumed.

People with borderline disorders have a greater preponderance to have had unresolved traumatic experiences and have an attachment classification of "entangled" when compared to a control group (Patrick et al. 1994). They also seem to have an inadequate meta-cognitive ability for self-reflection (self-reflective function; Fonagy et al 1991b, 1995). Successful psychoanalytic therapy is able to improve the ability to self-reflect, i.e. to be able to identify with another person's state of mind. Patients are able to obtain an adequate representation of themselves and others through the continual and repeated evaluation of the therapist's and patient's consciousness in the transference (Fonagy et al. 1995). The following section will deal with the core concept of transference from an interpersonal perspective, also presenting methods of operationalisation.

4 Interpersonal Relationship Pattern

From the beginning of the 1970s, the "shibboleth" of psychoanalysis, namely transference, has been investigated theoretically and empirically in a differentiated manner. A multitude of different methods have been developed to capture this interactive process of regulation.

The methodology of structural analysis of social behaviour (SASB; Benjamin 1993, Tress et al. 1990), in which each speech act of a therapeutic interaction becomes the object of analysis, is distinct from the approaches that draw systematic information from verbal exchange about subjectively relevant structures. Examples of the latter approaches are the Central Conflict of Relationship Theme (CCRT; e.g. Luborsky and Crits-Christoph 1990), the methods of cyclic maladaptive pattern (Strupp and Binder 1984), plan diagnosis (Weiss and Sampson 1986), Dahl's FRAME method (Dahl 1988) and the role-relationship-conflict constellation (Horowitz 1991). The observation focuses on identifying functional and dysfunctional, observable or experienced interactions which may be influenced therapeutically. Microanalytic investigations of individual speech acts (SASB) are found at one end of the spectrum, and the global instruments which capture complex psychological processes of conflict (e.g. plan diagnosis, FRAME) at the other. The description of individual components of the interaction (CCRT) to different, partly parallel intrapsychic and interpersonal schemata may be seen as situated somewhere in between the two.

These procedures of interactional analyses with which interpersonal relationship patterns were established correspond to biographical methods which have experienced a revival over the last decade (Jüttemann and Thomae 1987). The SASB is based on the interpersonal circumplex model. This enables the analysis of connections between interpersonal and intrapsychic processes through the introduction of three levels of foci: the transitive (active: cause something to

happen in others), intransitive (reactive: tell others about oneself) and introjective (focused on the self) (Benjamin 1974). The systematic application of the SASB model for psychiatric diagnosis and classification (Benjamin 1993) shows the influence of the approach. Other approaches use narrative material.

Luborsky developed the best-known approach for the systematic analysis of individual transference disposition, the Central Conflict of Relationship Theme (CCRT) (Luborsky and Kächele 1988). This procedure is based on the assumption that the narrative of the patient transports and condenses "clotted", subjectively meaningful interpersonal relationship experiences. Poignant subject-object behavioural relations such as burnt-in clichés are made visible by this method.

This instrument, which judges a relationship event that is experienced, prepares narrative material so that the imprinted internalised relationship structures that can be seen in individual behaviour become transparent. The relationship world of an individual is represented with a type of enduring life-history "motto", "chiffre" or "schema". Even more differentiated insights into the "macromolecular" relationship structures can be obtained from a further development of the Central Relationship Pattern (CRP) method (Dahlbender et al. 1998). This method demonstrates the variable organisation with different objects, contexts, it shows a lifetime regulation and manages to demonstrate a change in therapy.

So-called relationship episodes are filtered from accounts of interactions from which three components are extracted. These are presented as sequential schemas.

The subject's wish for something from an object leads to a satisfactory or unsatisfactory reaction from the object, which is subsequently followed by a corresponding reaction from the subject. We can remain at the idiographic level, so that the patient's formulations are in speech form, or the statements can be transformed into an abstract categorical level.

One remarkable result obtained in this area of research is that the more relationship episodes with a variety of objects are recounted from the past and present, the clearer the differentiated patterns of clotted relationship experiences are (Luborsky and Crits-Christoph 1990). Research into convergent and discriminant validity of therapy transcripts confirm the value of analysing interpersonal relationship patterns and allows consideration of clinical progress and diagnosis (Luborsky and Barber 1995; Kächele and Dahlbender 1993).

In addition, self-rating methods were developed which assess interpersonal behaviour and experience, such as the Inventory of Interpersonal Problems (IIP) presented by Horowitz et al. (1988). This instrument is theoretically based on Sullivan's interpersonal theories (1953) from which the circumplex models of interpersonal behaviour were derived.

The circumplex model is based on the assumption that all interpersonal behaviours can be represented using two orthogonal and bipolar dimensions. The dimension of control ranges from dominant/controlling to submissive behaviour, and the dimension of affiliation ranges from affectionate/oriented towards to hostile/distanced behaviour. In Leary's model (1957), 16 interpersonal categories or segments were defined which are arranged around two orthogonal dimensions. Starting from this model, different groups of researchers have developed other models for the taxonomy of interpersonal behaviour, that partly differ from one another by in the number of segments they use (e.g. Wiggins 1982; Kiesler 1983).

Empirical relationships of the attachment style and people schemata underline the interconnection of constructs based on two different theoretical traditions (Horowitz 1994; Strauß and Schmidt 1997).

5 Implications

Psychoanalytic therapies have been influenced by the concepts of development, attachment and relationship. It has been shown that psychopathology can begin anywhere on the developmental path (Stern 1985). Modern psychoanalysis takes account of the environmental aspect. Instead of the pleasure/unpleasure principle, the principle of safety is a prime regulating mechanism using such concepts as mirroring, communication, affective exchange and bodily contact. Research into pathological development supports these new concepts with impressive evidence. The results of attachment research show the overriding significance of attachment needs for personality development.

Even though stringent empirical confirmation has is yet to be delivered, knowledge of the patterns of attachment imply differentiated therapeutic strategies. It is reasonable to assume that the development of disorder-specific, axis II-oriented therapies would prove useful.

Knowing the implication of loss and the influence of death on the development of children is helpful for the therapeutic process (Köhler 1995). Diffuse associations made by the patient when touching upon such a topic should not be interpreted as a defence, but are developmentally based deficits of attention and concentration.

The therapist should not treat his or her patients as infants and should not mother them. However, it can be an advantage if the process of understanding the patient's childhood is enriched by images provided by new developmental psychology. The current interaction during therapy can be understood with as much differentiation as the mother-child relationship has illustrated. This leads to a multitude of communicative and interactive processes which enrich clinical conceptualisation (Emde 1991).

The process of empathic agreement takes shape through preverbal processes which are manifest in eye contact, position of the body and verbal adjustment. The saying that with our own unconscious we decode the unconscious of the patient, would not be much more than an empty metaphor without these microstructural processes of exchange (Krause 1998). We may assume that the empathic understanding and intuitive grasp of the therapist are based on consciously or subconsciously perceived affective and motor patterns. These may be rooted in the early mother-child, father-child and sibling-child interactions (Lichtenberg et al. 1992).

The great progress made in infant research demonstrates the necessity to decode the grammar of non-verbal interactions (Krause 1990). The results focus on the importance of situational factors that play a part in both dyadic and group therapeutic situations.

In order to attain a helpful relationship, which is a prerequisite for a good therapy, many different verbal and non-verbal communicative part-subprocesses may be seen as important. Their significance has already been demonstrated in the mother-child relationship, and parallels may be drawn with the therapeutic relationship. Therapy research has shown (Henry et al. 1994) that mutual esteem is an important ingredient in a helpful therapeutic relationship.

To summarise the significance of new insights in early development, attachment and relationship, the following may be said: They provide us with relevant facts and plausible models that allow us to create and enrich (Bornstein and Masling 1998) a current relationship, while having access to the so-called present unconscious and the past unconscious (Sandler and Sandler 1984).

6 References

- Ainsworth M, Bowlby J (1991) An ethological approach to personality development. *American Psychologist* 46:333--341
- Ainsworth MDS, Eichberg CG (1991) Effects on infant-mother attachment of mother's unresolved loss of an attachment figure, or other traumatic experience. In: Parkes CM, Stevenson-Hinde J, Marris P (eds) *Attachment across life cycle*. Tavistock/Routledge, London, pp 160--183
- Ainsworth MDS, Witting B (1969) Attachment and the exploratory behavior of one-years-olds in a strange situation. In: Foss BM (eds) *Determinants of infant behavior*. Basic Books, New York, pp 113--136
- Ainsworth MDS, Bell SM, Stayton DJ (1974) Infant-mother attachment and social development: 'socialisation' as a product of reciprocal responsiveness to signals. In: Richards MPM (eds) *The integration of a child into a social world*. Cambridge University Press, New York, pp 99--135
- Ainsworth MDS, Blehar MC, Waters E, Wall S (1978) *Patterns of attachment. A psychological study of the strange situation*. Erlbaum, Hillsdale New Jersey
- Basch MF (1983) Empathic understanding. *J Am Psychoanal Assoc* 31:101--126
- Beck AT, Rush JA, Shaw BF, Emery G (1979) *Cognitive therapy of depression*. Guilford, New York
- Benjamin LS (1974) Structural analyses of social behavior (SASB). *Psychol Rev* 81:392--425
- Benjamin LS (1993) *Interpersonal diagnosis and treatment: the SASB approach*. Guilford, New York
- Benoit D, Parker KHC (1994) Stability and transmission of attachment across three generations. *Child Dev* 65:1444--1456
- Bion WR (1962) *Learning from experience*. Heinemann, London
- Blatt S (1990) Interpersonal relatedness and self-definition. In: Singer J (ed) *Repression and dissociation: implications for personality theory, psychopathology and health*. University of Chicago Press, Chicago
- Blatt S (1992) The differential effect of psychotherapy and psychoanalysis with anacletic and introjective patients: the Menninger Psychotherapy Research Project revisited. *J Am Psychoanal Assoc* 40:691--724
- Blatt S, Quinlan D, Pilkonis P, Shea MT (1995) Impact of perfectionism and need for approval on the brief treatment of depression: the NIMH treatment of Depression Collaborative Research Program revisited. *J Consult Clin Psychol* 63:125--132
- Bornstein RF, Masling M (1998) *Empirical perspectives on the psychoanalytic unconscious*. American Psychological Association, Washington DC
- Bowlby J (1969) *Attachment and loss*. 1. Attachment. Basic, New York
- Bowlby J (1973) *Attachment and Loss*. 2. Separation. Anxiety and anger. Basic, New York
- Bowlby J (1979) *The making and breaking of affectional bonds*. Tavistock, London
- Bowlby J (1988) *A secure base: parent-child attachment and healthy human development*. Basic, London
- Bowlby J (1995) Bindung: Historische Wurzeln, theoretische Konzepte und klinische Relevanz. In: Spangler G, Zimmermann P (eds) *Die Bindungstheorie. Grundlagen, Forschung und Anwendung*. Klett-Cotta, Stuttgart, Spp 17--29

- Brazelton TB (1981) Precursors for the development of emotions in early infancy. In: Plutchik R, Kellerman H (eds) *Emotion, theory, research and experience*. Academic, New York
- Brazelton TB, Cramer B (1991) *Les Premiers Liens*. Calman-Levy, Paris
- Brazelton TB, Koslowski B, Main M (1974) The origins of reciprocity: the early mother-infant interaction. In: Lewis M, Rosenblum LA (eds) *The effect of the infant on it's caregiver*, vol. Bd 4. Wiley, New York, pp 49--76
- Bretherton I (1995) Die Geschichte der Bindungstheorie. In: Spangler G, Zimmermann P (eds) *Die Bindungstheorie. Grundlagen, Forschung und Anwendung*. Kett-Cotta, Stuttgart, pp 27--49
- Bretherton I, Waters E (1985) (eds) *Growing points of attachment theory and research*. *Monogr Soc Res Child Dev* 50:3--35
- Brisch KH, Buchheim A, Köhntop B, Kunzke D, Schmücker G, Kächele H, Pohlandt F (1996) Early preventive psychotherapeutic intervention program for parents after the delivery of a very small premature infant: the Ulm Study. *Infant Behav Dev* (special issue) 19:356
- Buchheim A, Brisch KH, Kächele H (1998) Einführung in die Bindungstheorie und ihre Bedeutung für die Psychotherapie. *Psychotherapie Psychosomatik Medizinische Psychologie PPMp* 48:128--138
- Carlson V, Cicchetti D, Barnett D, Braunwald KG (1989) Finding order in disorganization: lessons from research on maltreated infants' attachments to their caregivers. In: Cicchetti D, Carlson V (eds) *Child maltreatment*. Cambridge University Press, Cambridge MA, pp 494--528
- Clarke AM, Clarke ADB (1976) *Early experience, myth and evidence*. Free Press, New York
- Clarkin J, Marziali E, Monroe-Blum H (eds) (1992) *Borderline personality disorder: clinical and empirical perspectives*. Guilford, New York
- Cohn J, Tronick E (1988) Mother-infant face-to-face interaction: Influence is bidirectional and unrelated to periodic cycles in either partner's behaviour. *Developmental Psychology* 24:386--392
- Cramer B (1991) *Frühe Erwartungen. Unsichtbare Bindungen zwischen Mutter und Kind*. Kösel, Munich
- Crowell J, Treboux D (1995) A review of adult attachment measures: implications for theory and research. *Soc Dev* 4:294--327
- Dahl H (1988) Frames of mind. In: Dahl H, Kächele H, Thomä H (eds) *Psychoanalytic process research strategies*. Springer, Berlin Heidelberg New York, pp 51--66
- Dahlbender RW, Albani C, Pokorny D, Kächele H (1998) Central connected relationship themes CCRT: a structural version of the CCRT. *Psychother Res* 8:408--425
- Diamond D, Blatt SJ (1994) Internal working models and the representational world in attachment and psychoanalytic theories. In: Sperling MB, Berman WH (eds) *Attachment in adults. Clinical and developmental perspectives*. Guilford, New York, pp 72--97
- Dornes M (1993) *Der kompetente Säugling*. Fischer, Frankfurt am Main
- Dornes M (1997) *Die frühe Kindheit: Entwicklungspsychologie der ersten Lebensjahre*. Fischer, Frankfurt am Main
- Eagle M (1984) *Recent developments in psychoanalysis. A critical evaluation*. McGraw-Hill, New York

- Emde RN (1981) Changing models of infancy and the nature of early development. *Remodeling the foundation*. J Am Psychoanal Assoc 29:179--219
- Emde RN (1983) The prerepresentational self and its affective core. *Psychoanal Study Child* 38:165--192
- Emde RN (1991) Positive emotions for psychoanalytic theory: surprises from infancy research and new directions. J Am Psychoanal Assoc 39:5--44
- Emde RN (1992) Individual meaning and increasing complexity: contributions of Sigmund Freud and Rene Spitz to developmental psychology. *Dev Psychol* 28:347--359
- Erikson EH (1950) *Childhood and society*. Norton, New York
- Fonagy P (1993) Psychoanalytic and empirical approaches to developmental psychopathology: an object-relations perspective. In: Shapiro T, Emde R (eds) *Research in psychoanalysis: process, development, outcome*. International Universities Press, New York, pp 245--260
- Fonagy P, Steele H, Steele M (1991a) Maternal representations of attachment during pregnancy predict the organization of infant-mother attachment at one year of age. *Child Dev* 62:891--905
- Fonagy P, Steele M, Steele H, Moran GS, Higgitt AC (1991b) The capacity for understanding mental states: the reflective self in parent and child and its significance for security of attachment. *Infant Mental Health J* 12:201--218
- Fonagy P, Steele M, Steele H, Leigh T, Kennedy R, Mattoon G, Target M (1995) Attachment, the reflective self, and borderline states: the predictive specificity of the Adult Attachment Interview and pathological emotional development. In: Goldberg S, Muir S, Kerr J (eds) 1995. *Attachment theory: social, developmental, and clinical perspectives*. Analytic Press, Hillsdale, pp 233--278
- Fremmer-Bombik E (1995) Innere Arbeitsmodelle von Bindung. In: Spangler G, Zimmermann P (eds) *Die Bindungstheorie. Grundlagen, Forschung und Anwendung*. Stuttgart, Klett-Cotta, pp 109--119
- Freud S (1917) Introductory lectures on psychoanalysis. SE 15/16
- Freud S (1918) From the history of an infantile neurosis. SE 17:1--122
- Freud S (1920) Beyond the pleasure principle. SE 18:1--64
- George C, Kaplan N, Main M (1985) *The Adult Attachment Interview*. Unveröffentlichtes Manuskript. Department of Psychology, University of California, Berkeley (third edition),
- Greenspan SI (1989) *The development of the ego: implications for personality theory, and the psychotherapeutic process*. International Universities Press, Madison
- Grice H-P (1975) Logic and conversation. In: Cole P, Morgan J (eds) *Syntax and semantics. Speech acts*, vol 3. Academic, New York, pp 41--58
- Grossmann K, Grossmann K (1991) Attachment quality as an organizer of emotional and behavioral responses in a longitudinal perspective. In: Parkes CM, Stevenson-Hinde J, Marris P (eds) *Attachment across the life cycle*. Tavistock/Routledge, London, pp 93--114
- Grossmann K, Fremmer-Bombik E, Rudolph J, Grossmann, KE (1988) Maternal attachment representations as related to child-mother attachment patterns and maternal sensitivity and acceptance of her infant. In: Hinde RA, Stevenson-Hinde J (eds) *Relations within families*. Oxford University Press, Oxford, pp 241--260

- Grossmann K, August P, Fremmer E et al. et al. (1989) Die Bindungstheorie: Modell und entwicklungspsychologische Forschung. In: Keller H (ed) Handbuch der Kleinkindforschung. Springer, Berlin Heidelberg New York, pp 31--55
- Heigl-Evers A, Heigl F, Ott J (eds) (1993) Lehrbuch der Psychotherapie. Fischer, Stuttgart
- Henry W, Strupp HH, Schacht TE, Gaston L (1994) Psychodynamic approaches. In: Bergin AE, Garfield SL (eds) Handbook of psychotherapy and behavior change. Wiley, New York
- Horowitz MJ (1991) Person schemas. In: Horowitz MJ (ed) Person schemas and maladaptive interpersonal patterns. University of Chicago Press, Chicago, pp 13--31
- Horowitz LM (1994) Personenschemata, Psychopathologie und Psychotherapieforschung. Psychotherapeut 39:61--72
- Horowitz LM, Rosenberg SE, Baer AE, Ureno G, Villasenor VS (1988) Inventory of interpersonal problems: psychometric properties and clinical applications. J Consult Clin Psychol 56:885--892
- Horowitz LM, Strauß B, Kordy H (1994) Manual zum Inventar zur Erfassung interpersonaler Probleme (IIP-D). Beltz-Test-Gesellschaft, Weinheim
- Jörg M, Dinter R, Rose F, Villalba-Yantorno P, Esser G, Schmidt M, Laucht M (1994) Kategoriensystem zur Mikroanalyse der frühen Mutter-Kind-Interaktion. Z Kinder Jugendpsychiatrie 22:97-106
- Jüttemann G, Thomae H (eds) (1987) Biographie und Psychologie. Springer, Berlin Heidelberg New York
- Kächele H, Dahlbender R (1993) Übertragung und zentrale Beziehungsmuster. In: Buchheim P, Cierpka M, Seifert Th (eds) Lindauer Texte. Springer, Berlin Heidelberg New York
- Kernberg O (1968) The treatment of patients with borderline personality organization. Int J Psychoanal 49:600--619
- Kernberg OF (1984) Severe personality disorders. Psychotherapeutic strategies. Yale University Press, New Haven
- Kiesler DJ (1983) The 1982 interpersonal circle: a taxonomy for complementarity in human transactions. Psychol Rev 90:185--214
- Klein M, Heimann P, Isaacs S, Riviere J (1952) Developments in psychoanalysis. Hogarth, London
- Klermann GL, Weissman MM, Rounsaville BJ (1984) Interpersonal psychotherapy of depression. Basic, New York
- Köhler L (1995) Bindungsforschung und Bindungstheorie aus der Sicht der Psychoanalyse. In: Spangler G, Zimmermann P (eds) Die Bindungstheorie: Grundlagen, Forschung und Anwendung. Klett-Cotta, Stuttgart, pp 67--85
- Kohut H (1971) The analysis of the self. A systematic approach to the psychoanalytic treatment of narcissistic personality disorders. International Universities Press, New York
- Kohut H, Wolf ES (1978) The disorders of the self and their treatment: an outline. Int J Psychoanal 59:413--425
- Krause R (1990) Psychodynamik der Emotionsstörungen. In: Scherer K (ed) Psychologie der Emotion. Enzyklopädie der Psychologie. Hogrefe, Göttingen, pp 630--705
- Krause R (1998) Allgemeine Psychoanalytische Krankheitslehre. 2. Modelle. Kohlhammer, Stuttgart

- Künzler E (1969) Zwei Hypothesen über die Natur der frühkindlichen Sozialbeziehungen. *Psyche* 23:25--57
- Leary T (1957) *Interpersonal diagnosis of personality*. Ronald, Chicago
- Lichtenberg J (1983) *Psychoanalysis and infant research*. Analytic Press, Hillsdale
- Lichtenberg J, Lachmann F, Fosshage J (1992) *Self and motivation systems*. Analytic Press, Hillsdale
- Luborsky L (1984) *Principles of psychoanalytic psychotherapy. A manual for supportive-expressive treatment*. Basic, New York
- Luborsky L, Barber J (1995) Perspectives on seven transference-related measures applied to the interview with Mr. Smithfield. *Psychother Res* 4:152--155
- Luborsky L, Crits-Christoph P (1990) *Understanding transference*, 2nd edn. Basic, New York
- Luborsky L, Kächele H (1988) *Der zentrale Beziehungskonflikt*. PSZ-Verlag, Ulm
- Luborsky L, Luborsky E, Diguer L, Emde R (1998) Is there a core relationship pattern at age three, and does it remains at age five? In: Noam G, Fisher K (eds) *Development and vulnerability in close relationships*. Erlbaum, Hillsdale
- Lyons-Ruth K, Alpern L, Repacholi B (1993) Disorganized infant attachment classification and maternal psychosocial problems as predictors of hostile-aggressive-behavior in pre-school classroom. *Child Dev* 64:572--585
- Mahler M (1958) Autism and psychosis: two extreme disturbances of identity. In: Mahler M (ed) *The selected papers of Magret Mahler. Infantile psychoses and early contributions*, vol 1. Aronson, New York, pp 169--181
- Mahler MS (1969) *On human symbiosis and the vicissitudes of individuation*. Hogarth, London
- Mahler M, Pine F, Bergmann A (1975) *The psychological birth of the human infant*. Basic, New York
- Main M (1991) Metacognitive knowledge, metacognitive monitoring, and singular (coherent) vs. multiple (incoherent) model of attachment: findings and directions for future research. In: Parkes CM, Stevenson-Hinde J, Marris P (eds) *Attachment across the life cycle*. Routledge, London, pp 127--159
- Main M (1995) Recent studies in attachment: overview with selected implications for clinical work. In: Goldberg S, Muir R, Kerr J (eds) *Attachment theory: social developmental and clinical perspectives*. Erlbaum, New Jersey, pp 407--474
- Main M, Cassidy J (1988) Categories of response to reunion with the parent at age six: predicted from attachment classifications and stable over a one-month period. *Dev Psychol* 24:425--426
- Main M, Hesse E (1990) Parents' unresolved traumatic experiences are related to disorganized attachment status: is frightened and/or frightening parental behavior the linking mechanism? In: Greenberg MT, Cicchetti D, Cummings EM (eds) *Attachment in the preschool years*. University of Chicago Press, Chicago, pp 161--182
- Main M, Solomon J (1986) Discovery of an insecure disorganized/disoriented attachment pattern: procedures, findings and implications for the classification of behavior. In: Brazelton TB, Yogman M (eds) *Affective development in infancy*. Ablex, Norwood, pp 95--124
- Main M, Kaplan N, Cassidy J (1985) Security in infancy, childhood, and adulthood: a move to the level of representation. In: Bretherton I, Waters E

- (eds) Growing points in attachment theory and research. Monogr Soc Res Child Dev 50:66--106
- Meltzoff A, Borton R (1979) Intermodal matching by human neonates. *Nature* 282:403--404
- Moser U, von Zeppelin I (1991) Cognitive-affective processes. Springer, Berlin Heidelberg New York
- Murray L, Trevarthen C (1985) Emotional regulation of interaction between two month olds and their mothers. In: Field T, Fox N (eds) Social perception in infants Norwood NJ: Ablex
- Papousek H (1981) The common in the uncommon child: comments on the child's integrative capacities and on parenting. In: Lewis M, Rosenblum LA (eds) The uncommon child. Plenum, New York, pp 317--328
- Papousek H, Papousek M (1983) Interactional failures. Their origins and significance in infant psychiatry. In: Call JD, Galenson E, Tyson RL (eds) Frontiers of infant psychiatry. Basic, New York, pp 31--37
- Patrick M, Hobson RP, Maughan B (1994) Personality disorder and the mental representation of early social experience. *Dev Psychopathol* 6:375--388
- Peterfreund E (1978) Some critical comments on psychoanalytic conceptualizations of infancy. *Int J Psychoanal* 59:427--441
- Quinton D, Rutter M (1988) Parenting breakdown: the making and breaking of intergenerational links. Gower, Brookfield
- Rapaport D (1960) The structure of psychoanalytic theory. A systematizing attempt. International Universities Press, New York
- Reich G (1995) Eine Kritik des Konzeptes der "primitiven Abwehr" am Begriff der Spaltung. *Forum Psychoanal* 11:99--118
- Sander J (1985) Toward a logic of organization in psychobiological development. In: Klar K, Siever L (eds) Biologic response styles: clinical implications
- Sandler J, Sandler AM (1984) The past unconscious, the present unconscious and interpretation of the transference. *Psychoanal Inquiry* 4:367--399
- Schaffer R (1977) Mothering. Fontana. London
- Spangler G, Schieche M (1995) Psychobiologie der Bindung. In: Spangler G, Zimmermann P (eds) Die Bindungstheorie. Grundlagen, Forschung und Anwendung. Klett-Cotta, Stuttgart, pp 297-310
- Spitz R (1965) The first year of life. A psychoanalytical study of normal and deviant development of object relations. International Universities Press, New York
- Spitzer M (1997) Geist im Netz. Spektrum der Wissenschaften, Heidelberg
- Stern DN (1974) Mother and infant at play: the dyadic interaction involving facial, vocal, and gaze behaviors. In: Lewis M, Rosenblum LA (eds) The effect of the infant on its caregiver, vol 4. Wiley, New York, pp 187--213
- Stern DN (1985) The interpersonal world of the infant. Basic, New York dt. (1992) Die Lebenserfahrung des Säuglings. Klett-Cotta, Stuttgart
- Stern D (1995) The motherhood constellation. Basic, New York
- Stern DN (1996) Ein Modell der Säuglingsrepräsentation. *Forum Psychoanal* 12:187--203
- Strage M, Main M (1985) Attachment and parent-child discourse patterns. Paper Presented at the Biennial meeting of the Society for Research in Child Development, Toronto
- Strauß B, Schmidt S (1997) Die Bindungstheorie und ihre Relevanz für die Psychotherapie. *Psychotherapeut* 42:1--16

- Strupp HH, Binder J (1984) *Psychotherapy in a new key. A guide to time-limited dynamic psychotherapy*. Basic, New York
- Sullivan HS (1953) *The interpersonal theory of psychiatry*. Norton, New York
- Thomä H, Kächele H (1987) *Psychoanalytic practice*. 1. Principles. Springer, Berlin Heidelberg New York
- Thomä H, Kächele H (1991) *Psychoanalytic Practice*. 2. Clinical studies. Springer, Berlin Heidelberg New York
- Tress W, Henry P, Strupp H, Reister G, Junkert B (1990) Die strukturelle Analyse sozialen Verhaltens (SASB) in Ausbildung und Forschung. Ein Beitrag zur "funktionellen Histologie" des psychotherapeutischen Prozesses. *Z Psychosom Med Psychoanal* 36:240--257
- Tronick E, Weinberg M (1997) Depressed mothers and infants: Failure to form dyadic states of consciousness. In Murray L, Cooper P (eds) *Postpartum Depression and child development*. Guildford, New York, pp 54--81
- Tustin F (1994) The perpetuation of an error. *J Child Psychother* 20:3--23
- van IJzendoorn MH (1995) Adult attachment representations, parental responsiveness and infant attachment: a meta-analysis on the predictive validity of the Adult Attachment Interview. *Psychol Bull* 117:387--403
- van IJzendoorn MH, Bakermans-Kranenburg MJ (1996) Attachment representations in mothers, fathers, adolescents and clinical groups: a meta-analytic search for normative data. *J Consult Clin Psychol* 64:8--21
- Ward MJ, Carlson EA (1995) Associations among adult attachment representations, maternal sensitivity, and infant-mother attachment in a sample of adolescent mothers. *Child Dev* 66:69--79
- Weiss J, Sampson H (1986) *The psychoanalytic process: theory, clinical observation, and empirical research*. Guilford, New York
- Wiggins JS (1982) Circumplex models of interpersonal behavior in clinical psychology. In: Kendall PC, Butcher JN (eds) *Handbook of research methods in clinical psychology*. Wiley, New York
- Zimmermann P, Spangler G, Schieche M, Becker-Stoll F (1995) Bindung im Lebenslauf: Determinanten, Kontinuität, Konsequenzen und künftige Perspektiven. In: Spangler G, Zimmermann P (eds) *Die Bindungstheorie: Grundlagen, Forschung und Anwendung*. Klett-Cotta, Stuttgart, pp 311--334

ⁱ A critical review of alternative methods to assess adults' attachment representations can be found in Crowell and Treboux (1995) and Buchheim et al. (1998)