



Attachment patterns and emotion regulation strategies in the second year

Cristina Riva Crugnola^{a,*}, Renata Tambelli^b, Maria Spinelli^a,
Simona Gazzotti^a, Claudia Caprin^a, Alessandro Albizzati^c

^a Department of Psychology, State University of Milano-Bicocca, Milano, Italy

^b Department of Dynamic and Clinical Psychology, State University of Roma "La Sapienza", Roma, Italy

^c Infant Neuropsychiatry Unit, San Paolo Hospital of Milano and State University of Milano, Italy

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ABSTRACT

With the aim of studying the relationship between methods of emotion regulation and quality of attachment we examined 39 infants with different patterns of attachment, of whom 20 were classified as secure (B), 12 as avoidant (A) and 7 as resistant (C), assessing the regulatory strategies adopted by them during the Strange Situation at 13 months. Secure infants used strategies of positive social engagement more than insecure avoidant infants, while resistant infants displayed greater negative social engagement and less object orientation than the other two groups. Avoidant infants adopted positive and negative hetero-regulatory strategies less than the other groups, also differing from resistant infants in their greater use of object regulatory strategies. There were no significant differences as regards self-comforting regulation. Thus, the findings showed how the most significant differences to emerge between the groups concerned hetero-regulatory strategies, developed by the infant in interaction with attachment figures, and regulatory strategies oriented towards objects. Further analysis showed how the use by part of each attachment group of the emotion regulation strategies varies, differentiating the episodes of the SSP according to their level of stress.

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1. Introduction

It is well-known that emotion regulation is an important objective for the socio-emotional development of an infant (Bridges & Grolnick, 1995; Calkins, 1994; Sroufe, 1995; Tronick, 1989, 2007). Although conceptualizations of emotion regulation may differ (Campos, Frankel, & Camras, 2004; Cole, Martin, & Dennis, 2004; Eisenberg & Spinrad, 2004; Gross & Thompson, 2007; Thompson, 1994), many authors agree in considering it a mix of "physiological, behavioral and cognitive processes that enables individuals to modulate the experience and the expression of positive and negative emotions" (Bridges, Denham, & Ganiban, 2004, p. 340; Cole, Michel, & Teti, 1994). This skill allows an individual to adapt in interacting with the environment (Calkins & Hill, 2007; Campos et al., 2004) making it possible to maintain behavioral organization in the face of high levels of tension, not simply concerning the regulation of negative emotions, but leading more broadly to "initiation and maintenance of emotional states, both positive and negative" (Bridges et al., 2004, p. 344). As is well-known this regulatory capacity develops within the ambit of the attachment relations which the infant experiences in his first years

* Corresponding author: Department of Psychology, University of Milano-Bicocca, Piazza dell'Ateneo Nuovo, 1, 20126, Milano, Italy. Tel.: +39 02 5517929; fax: +39 64483706.

E-mail address: cristina.riva-crugnola@unimib.it (C. Riva Crugnola).

(Cassidy, 1994; Sroufe, 1995), as these relations can be considered specific methods of social regulation of the emotions (Coan, 2008).

1.1. Emotion regulation strategies in early infancy

A common approach to studies into emotion regulation in early infancy was to identify the behavioral strategies adopted by the infant to regulate his emotions. Various researchers (Braungart-Rieker, Garwood, Powers, & Wang, 1998; Buss & Goldsmith, 1998; Mangelsdorf, Shapiro, & Marzolf, 1995; Tronick, 1989) demonstrated the presence of regulatory strategies in the first year of life, subdivided into self-regulatory strategies, such as those centred on looking away and on self-comforting, and hetero-regulatory strategies, such as protesting, crying or attracting the attention of the adult with a look or a smile, aimed at mobilizing the regulatory intervention of the caregiver. Tronick, in studies conducted through the Still Face Paradigm (Cohn & Tronick, 1983; Gianino & Tronick, 1988), demonstrated that from the age of 3 months infants adopt early skills for self-regulation of the emotions when confronted by inexpressiveness of the mother's face. Of these, one of the earliest appears to be that of looking away from the stressful stimulus. Other early skills are those of self-comforting by sucking or manipulating parts of the body (e.g. finger and hand in the mouth, touching the hair, ears, etc.).

Other studies have analyzed the development of regulatory strategies in the first years. Of these, that of Bridges and Grolnick (1995) shows how regulatory strategies centred on looking away and self-comforting are present from 2 to 4 months and then decrease at the end of the first year, a period in which hetero-regulatory strategies aimed at using the caregiver as a regulator become more important (Kopp, 1989). Such strategies, which some authors call parent-focused emotion regulation strategies (Diener, Mangelsdorf, McHale, & Frosch, 2002), manifest themselves through the emotional communication which the infant uses with the adult in order to mobilize a response with the aim of obtaining regulation of his/her emotional states. Of these Weinberg and Tronick (1994) distinguish strategies centred on positive social engagement in which the infant smiles, looks at the mother and makes positive vocalization and those centred on negative engagement, such as active protest, in which the infant cries, distances him/herself from the mother, exhibiting anger, and withdrawal, in which the infant appears sad and looks away from the mother, whining. Through such methods of communication, which are frequently expressed through a combination of facial expression, tone of voice, look and gestures (Weinberg & Tronick, 1994), the infant communicates his/her emotional state to the caregiver in order to obtain support in modulating his/her emotions. The caregiver responds by attuning to the infant and acting as regulator of such states. In the same period the strategies which the infant adopts to actively redirect (self-distraction) his/her attention to the environment and objects with respect to stressful stimuli (Kopp, 1989) become important in concomitance with the development of the system of executive attention (Sheese, Rothbart, Posner, White, & Fraundorf, 2008).

According to these studies during the second year the infant appears to have different emotion regulation strategies which may be sub-divided into three groups: the first group centred on physical self-comforting, the second on hetero-regulation through the adult, the third on self-distraction through orientation to the environment (Grolnick, Bridges, & Connell, 1996; Mangelsdorf et al., 1995). At the end of the second year such strategies become more complex thanks to the infant's increasing symbolic and cognitive skills. Of these, the significant skills are the use of the transitional object, symbolic play and self-talk, which the infant may use to calm himself, for example when the mother is absent (Feldman, 2007a). Regulatory strategies thus developed are organized in a hierarchical system in which the earliest regulatory behavior, such as self-comforting, already present in the first months, remains into adult life (Bridges & Grolnick, 1995). At the same time hetero-regulatory strategies used by the infant appear to remain important in the course of development, with the result that flexible alternating between self-regulation and dyadic co-regulation of the emotions, based on the use of the other (a friend, a partner, etc.) as a regulator, characterizes adulthood (Coan, 2008; Diamond & Aspinwall, 2003).

Many researchers agree that the development of emotion regulation depends both on the infant's individual, neurobiological and temperamental characteristics, and on his/her relational resources in the first years, as well as on the interaction of these variables (Calkins & Hill, 2007; Crockenberg & Leerkes, 2004; Kopp, 1989; Mangelsdorf et al., 1995; Propper & Moore, 2006; Rothbart, 1994; Schore, 2001; Thompson, 1994). The regulatory skills which he/she originally possesses must, in fact, interact with the regulatory functions which the parent is called on to perform in order to fully develop. On the basis of the communication of the infant, who requests help from the parent in modulating his/her emotion, the parent attunes to him and helps to regulate his/her emotional states, both positive and negative (Stern, 1999; Tronick, 2004). Thus, during the first 2 years, a system of dyadic regulation is created whose characteristics depend both on the infant's early regulatory skills and the scaffolding function effected by the caregiver, aimed at promoting in the infant the development of more mature regulatory skills through the internalization of the caregivers' regulation strategies (Sroufe, 1995; Tronick, 2007).

On the other hand dysregulation in the mother–infant system may be present early on, when excessive regulation on the part of the mother may lead to problems in the infant's development of his/her self-regulatory skills. Failure on the part of the mother to regulate may, on the other hand, promote in the infant excessive self-regulation to the detriment of hetero-regulation (Beebe et al., 2000). Furthermore the mother's inability to regulate the negative emotions of the infant and to help him maintain organization of positive emotions during the first year may be predictive of disorganized attachment on the part of the infant (Lyons-Ruth, 2003). The regulatory strategies which the infant develops in interaction with the mother appear in fact to influence his subsequent attachment patterns (Beebe et al., 2010; Evans & Porter, 2009; Feldman, 2007a, 2007b). The research of Braungart-Rieker (Braungart-Rieker, Garwood, Powers, & Wang, 2001) also shows how the various self- and hetero-regulatory strategies adopted by the infant during the Still Face Paradigm at 4 months are effective

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