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Security of attachment in young children with disabilities

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SECURITY OF ATTACHMENT IN YOUNG CHILDREN WITH DISABILITIES

A Thesis

Presented to

The Faculty of the Department of Special Education

San Jose State University

In Partial Fulfillment

of the Requirements for the Degree

Master of Arts

By

Jane Megan Seto

May 2002

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ABSTRACT

SECURITY OF ATTACHMENT IN YOUNG CHILDREN WITH DISABILITIES

By Jane M. Seto

The purpose of this study was to determine if there was a relation between the display of family affection and the security of attachment in young children with disabilities. Twenty families with preschoolers diagnosed with disabilities completed a questionnaire developed by the researcher. Results showed that there was no significant relation between the display of family affection and the level of security of attachment in young children with disabilities. However, the survey results indicated a positive relation between the family history of attachment and security of attachment in the young children with disabilities.

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In addition, I am extremely grateful for my parents, Eugene and Jan Seto, whom have loved me and provided so abundantly for me in so many ways. It is interesting that as I began this thesis, I felt an insecurity of attachment. Yet now that this thesis has been completed, I feel more *Security of Attachment* with my parents, and with my siblings (Bing Seto, Jerry Sue, Sharon S. Wong, and Ken Sue) and their families.

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Chapter I

Introduction

Security of infant-parent attachment in individuals can impact attachment across generations. A number of variables, such as culture, maternal sensitivity, eye gaze, and touch, can impact the development of a secure attachment (Lowinger, 1981). Moreover, patterns of attachment may continue through generations within a family (Posada et al., 1995).

Attachment in infancy has been studied in relation to a variety of later outcomes. These outcomes include parent-child interaction, peer relationships, behavior with unfamiliar adults, preschool and kindergarten competence, exploration and play, intelligence and language ability, ego resilience and ego control, frustration tolerance, curiosity, self-recognition, social cognition, behavioral problems, indicators of incipient psychopathology, and many other variables (Thompson, 1999).

Attachment is an integral part of development in young children. Problems in attachment can impact a child's emotional well being, as well as his or her performance in school. Insecurity of attachment can affect the child's ability to develop peer relationships not only in childhood, but also into adulthood. A variety of factors, such as environment, emotional states, and culture, can influence attachment. Cultural differences must be considered when making recommendations for improving attachment of families with young children.

Purpose of Study

The specific purpose of this project is to determine if there is a relation between family display of affection and security of attachment, and to generate recommendations for developing secure attachments in young children with special needs.

The research question is: Is there a relation between family display of affection and security of attachment in families with young children with special needs?

Definition of Terms

Attachment is described as an emotional tie or bond of affection between infant and parents, and includes many behaviors such as calling out for contact, clinging, crying, seeking eye contact, smiling, and touching (Mowder, 1997). Cassidy (1999) describes attachment behavior as behavior that promotes proximity to the attachment figure, and the attachment behavioral system as the organization of attachment behaviors within the individual. Ainsworth, Blehar, Waters, and Wall (1978) defined attachment security as the state of being secure or untroubled about the availability of the attachment figure.

Security of attachment is shown in children who respond positively to their mothers on reunion. For example, a child often greets, approaches, makes or accepts contact with, or receives comfort from mother, regardless of how that child reacted on separation. A main characteristic of securely attached children is their ability to use their mothers as secure bases from which to explore the world. These children constantly use their mothers as reference points while exploring their environment (Meins, 1997).

Family display of affection is defined as how affection is shown in a family. This usually refers to how often family members will hug and/or kiss other family members.

Lynch (1998) stated, "The amount and type of physical contact permissible is highly influenced by culture, but generalizations about cultures are confounded by differences in gender, age, religion, and personal preference" (p.71).

CHAPTER II

Literature Review

Attachment is a critical issue in early intervention programs contributing to the well-being of young children and families today. Families commonly continue to seek help to improve the quality of attachment between parent and child. This chapter will review the literature related to attachment theory, variables that influence security of attachment, and implications for early intervention.

Attachment Theory

Bowlby (1969, 1988) offered explanations for both attachment behavior and also the enduring attachments that children and other individuals make with significant others. The concept of the behavioral system accounts for the way an individual maintains his connection to his attachment figure within certain limits of distance or accessibility. Almost every child prefers an attachment figure and will go to that particular attachment figure when distressed. The attachment figure is often the biological mother of the child. When the attachment figure is absent, the child often will go to someone else who is very familiar. The child may show attachment shown to various individuals. However, an attachment bond, also known as an enduring attachment, is limited to very few individuals of significance.

Young children are equipped with a relatively stable behavioral system that promotes sufficient proximity to the principal caregiver (mother figure), facilitating parent protection. This system of attachment behavior supplements a complementary behavioral system in the adult (maternal behavior), that serves the same function. A

child's attachment behavior brings him in closer proximity with the specific individual responsible for his primary care. Some behavioral components of the attachment system for the child include signaling behaviors such as crying, calling, or smiling. These signals attract a caregiver to approach the child or compel the caregiver to remain in proximity once closeness has been achieved. When a child has acquired mobility, the child is able to seek proximity to his attachment figure(s) on his own (Ainsworth, Blehar, Waters, & Wall, 1978; Bowlby, 1958).

Protection is an essential theme in attachment theory. Crittendon and Claussen (2000) conceptualized attachment as a theory about protection from danger. Ainsworth et al. (1978) stated the following regarding Bowlby's study of attachment:

Bowlby (1969) proposed that the biological function of the attachment system is protection, suggesting that it was most specifically protection from predators in the environment of evolutionary adaptedness. Indeed, field studies of other species suggest that infants who get out of proximity to their mothers are likely to become victims of predators. He argued, however, that even in the present-day environment of Western Society, a child is much more vulnerable to disaster (for example, to becoming a victim of a traffic accident) if alone rather than accompanied by a responsible adult (Bowlby, 1973). Indeed, he noted that adults in any society are less vulnerable to mishap if with a companion than when alone. Therefore, he felt comfortable about specifying protection as continuing to be the biological function of attachment behavior and its reciprocal parental behavior. (pp. 8-9)

A fundamental premise of attachment theory is that all children during the first year of life (except those reared under the severest forms of isolation or neglect), will develop some level of secure-base behavior with one or more attachment figures (Bowlby, 1969).

Stages of Attachment

Bowlby (1969) described four phases of human attachment. The first phase involves orientation and signals towards others, which occurs from birth to 8 or 12 weeks. Typical infant behaviors in this stage include orienting towards a nearby person by tracking eye movements, grasping and reaching, smiling, and babbling. Often the baby will stop crying upon hearing a voice or seeing a face. Phase two involves the orientation and signaling towards particular people. This stage begins at 12 weeks, and typically continues through 6 months. The infant continues in the friendly behavior patterns of stage one, and performs these behaviors more noticeably toward mother figures than toward others. Phase three involves maintaining proximity with a discriminate person. In this stage, which begins at approximately 6 months and continues through 24 to 36 months, the child becomes more discriminating in the way he deals with others. The child follows the mother who is leaving, greets mother upon her return, and uses mother as a secure base from which to explore. The child becomes more cautious toward strangers. Eventually, strangers may evoke alarm and/or cause the child to withdraw. The attachment of infant to mother is obvious for all to see. The child selects certain other individuals to become secondary attachment figures. Phase four involves the formation of a partnership and begins somewhere between 2 and 3 years. In this stage, the child develops intuition regarding his mother's feelings and motives. The child's view of the world becomes more advanced, and behavior can be more flexible. The foundation is laid for the child and mother to develop an increasingly complex relationship with each other, a partnership.

Cline (1992) explained that the cycle of bonding and attachment occurs in the first year of life. Stage one of the cycle is need. Infants are full of needs during their first year. If these early needs are not met, the infant will die. Stage two of the cycle is rage reaction, when infants express their need through reactions of rage. As hunger pains grow intolerable, the infant feels helplessness, hopelessness and anger, and expresses rage through loud crying. Stage three is gratification or satisfaction. The adequate satisfaction of needs occurs in a normally responsive environment and with a healthy child. Satisfaction of needs generally involves food, but also includes touch, eye contact, and the sight of a human face and a smile. If the environment is typically giving, and if infants are able to assimilate the environmental satisfactions, then they move onto stage four. In this final stage, a sense of basic trust develops.

Quality of Attachment

Lamb, Thompson, Gardner, and Charnov (1985), describe 13 patterns of interaction, which Ainsworth (1964) has labeled as attachment behaviors. These behaviors are crying, smiling, vocalizing, orienting using visual-motor skills, crying when the attachment figure leaves, following, scrambling, burying face in lap, exploring from a secure base, clinging, lifting arms in greeting, clapping hands in greeting, and approaching through locomotion. Each of these behaviors occurs specifically in response to the child's attachment figure.

Ainsworth (1964) focused on the strength and quality of the infant's attachment. This focus led her to establish criteria of attachment. Many of the standard attachment behaviors require more active, goal-corrected behavioral patterning than do the precursor

attachment behaviors, which involve crying, sucking, smiling, and grasping to maintain proximity to the attachment figure. These standard attachment behaviors reflect the quality of relationships already developed.

Ainsworth developed the Strange Situation procedure to assess the child's attachment security to his attachment figure. The initial emphasis focused on secure-base behavior because an important measure of a healthy attachment is the ability to use mother as a secure base for exploration (Ainsworth & Wittig, 1969). The procedure consists of eight episodes presented in standard order for all subjects, with the least stressful episodes occurring first. The episodes last a maximum of 3 minutes, and can be discontinued at any time. The sequence elicits expected behaviors and highlights individual differences in separation and reunion (Ainsworth et al., 1978).

Ainsworth et al. (1978) identified three patterns believed to reflect infants' coping responses to their caregivers' interactive styles. Type B is secure attachment, and types A and C are insecure attachments. Main and Solomon (1986) established a fourth category, D, of infants whose behavior did not fit into the original classification system. In category D infants, there is no obvious behavior pattern in these children's responses to their mothers on reunion. They appear disoriented and anxious, and their behavior is disorganized. Children who receive a primary classification of type D are also given a secondary classification using the three original attachment categories.

Secure Attachment

Securely attached children are able to use the mother as a secure base from which to explore the world. They are able to explore the environment while constantly using

their mothers as a reference point (Meins, 1997). Research has shown that mothers of securely attached children were more sensitive, accepting, cooperative, and accessible to their infants' requests (Ainsworth, Bell, & Stayton, 1971). These mothers of securely attached babies were more responsive to their infants' cries, were more positive about themselves and their babies, and were more skilled at feeding and playing (Egeland & Farber, 1984).

Secure behavior reflects the balance shown by infants between attachment and exploratory behaviors. Exploration should lead to developmentally appropriate play (with or without the involvement of the attachment figure), and attachment behaviors should be expressed without anxiety or ambivalence. If the child is in a more stressful situation, either from being ill or distressed, there will be a shift in the balance between the attachment and exploratory behaviors. The child's attachment system will be activated, and the child will seek out proximity to the attachment figure rather than engaging in exploratory behaviors (Seifer & Schiller, 1995).

The child's trust in his mother is critical to a secure attachment relationship. Trust is established throughout infancy. Securely attached children will not need to resort to defense strategies if their mothers leave them. These children know that, in the past, their mothers have provided a secure base and have been constant, stable, and consistent. A securely attached child may cry when his or her mother leaves, but the separation does not cause the child psychological trauma. The child's response to reunion, rather than separation, is the critical issue in attachment (Meins, 1997).

Atypical Attachment

Common characteristics associated with attachment disorders can be seen in five developmental domains: social skills, emotional regulation, behavior, cognition, and language. Indications of disorganized attachment may include manipulative personality, superficial engagement/charming personalities, and lack of eye contact. Other signs include poor peer relationships, inability to appropriately receive or give affection, and indiscriminate affection with strangers. Individuals with disorders of attachment also may exhibit the following behaviors: demanding of others, lack of empathy, control problems, defiance and anger, hyperactivity and impulsiveness, destructive tendencies, learning difficulties/delays, abnormal speech patterns, and lack of cause-and-effect thinking (Vacca, 2001).

Eberhart-Wright (as cited by Vacca, 2001) provided some indicators of disorganized attachment. These signs include multiple caregivers (i.e. divorce, foster care), undifferentiated attachment (no strong preference for someone), heightened reactions (prolonged, distressful reactions upon departure or arrival of parent), domestic issues, somatic complaints, visible signs of abuse or neglect, and difficulties in parenting practices.

Behaviors associated with an attachment disorder often resemble behaviors seen in other developmental disorders. The root cause of an attachment disorder is exclusively relationship-based. The origin of attachment disorder is not the result of developmental pathology as commonly found in children with clinical depression or children diagnosed with autism (Vacca, 2001).

Cultural Differences

Individuals from different cultures face different types of dangers. In cultures where the danger is minor and minimal limitations are placed on individuals, typical attachment patterns occur. In cultures where the danger is greater, the self becomes more focused and self-protection and therefore more distorted. At times, safety cannot be achieved with any strategy (Crittendon & Claussen, 2000).

In all cultures, parents hold the responsibility to care for and to culturally educate their children. They can recruit help to fulfill this responsibility. For example, as the child grows older, parents typically are assisted by others and institutions. Yet the parents retain the ultimate responsibility for their children's health and behavior. Enculturation means to prepare the child for socially accepted physical, economic, and psychological situations that are characteristic of the culture. The purpose of such education is to prepare children to be able to survive and to thrive within their culture (Levine, 1977).

Posada et al. (1995) conducted an exploratory analysis of specific behavioral domains of secure-base behavior. This analysis provided some indications of possible cultural differences in mothers' preferences. They discovered the following:

U.S. and Japanese mothers placed more emphasis than Israeli mothers on the child's readiness to interact with mother and his or her positive emotional tone during such interactions as well as on issues of compliance. More than mothers from any other country, Columbian mothers valued having children return to mother, check her location, and go back to her when upset, bored, or in need of help. German and Israeli mothers tended to emphasize more than Chinese mothers the child's enjoyment of physical contact and of the comfort derived from it. Lastly, Chinese and Japanese mothers preferred that children show readiness to interact, share, and participate in interactions with other adults, more than German and Israeli mothers. (pp. 46)

Research from Posada et al. (1995) supports the Bowlby/Ainsworth conjecture that secure-base behavior is a human characteristic. On average, children in all countries and contexts represented in this study were characterized as using their mothers as a secure base. This similarity does not imply that children in all cultures organize their secure-base behavior toward their mothers in the same manner. Great diversity was found in the extent to which these children's behaviors corresponded to the definition of the securely attached child.

Mothers' beliefs of ideal child behavior appear to be associated with behavior that characterizes the secure-base phenomenon. Mothers from various cultures ideally would like their children to use them as a secure base for exploration. The specific parent preferences may vary in different contexts. Posada et al. (1995) discussed that, across the seven countries studied, experts held similar opinions regarding optimal secure-base behavior. The definition of attachment security and of secure-base behavior did not vary as a function of nationality or of extent of familiarity for attachment theory.

Meins (1997) discussed early cross-cultural studies that suggested significant differences in the distribution of infants' attachment classifications between countries. These differences show that the Strange Situation procedure is not a culturally independent tool for assessing the quality of the attachment relationship. There are cultural differences in child-rearing practices that may lead to differences in distribution in non-American samples. Caution should be used in interpreting Strange Situation behaviors as indicative of security of attachment in other cultures. Grossman, Grossman, Spangler, Suess, and Unzer (1985) discussed the German tradition for attachment figures

to forcibly encourage their children to become more independent toward the end of the first year of life. The increased proportion of avoidant infants in the study by Grossmann, Grossman, Huber, and Wartner (1981), therefore, is related to German tradition rather than evidence for a generalized increase in the non-optimal attachment relationships in German infants. According to Meins (1997), in Japanese and Chinese families, infant and mother often experience continual bodily contact during the first year of life, as the infant typically is carried around in a sling and sleeps in the same room as the parents. Thus, many Japanese infants become extremely upset when separated from their mothers and cannot be comforted when they are reunited. Cultural differences in child-rearing practices can account for increased proportions of insecurity within other countries, rather than any specific ethnic characteristic.

Parenting practices differ not only among cultures, but also within individual cultures. Meins (1997) stated that it was common practice for Chinese infants to experience continual body contact during the first year of life. In contrast, E. S. Seto, who was raised in Southern China, said that in his village, mothers did not make it a common practice to have continual body contact with infants during the first year of life (personal communication, May 6, 2001).

Meins (1997) believes that both the cross-cultural issues and day care research support the conclusion that it is not wise to talk about the child and the attachment figure as universal concepts. Many factors can affect both the child and the mother as individuals and also can affect the type of relationship that mother and child form with one another.

Intergenerational Factors

Bretherton (1995) discussed the findings of Fonagy, Steele, and Steele (1991), which reported that Strange Situation classifications at one year of age could be predicted to a high degree of accuracy by prenatal assessments of mothers' reflections on their own childhood attachments. These findings indicate that responses from parents to infant signals tend to be filtered through existing concepts of attachment relationships and cultural prescriptions.

Ricks (1985) stated, "Prospective data on the influence of childhood relationships on eventual parental behavior – and hence on the quality of infant-parent attachment in the next generation are still lacking" (p. 226). Evidence indicates that the quality of a mother's care-giving behavior is strongly related to her memories of childhood relationships. Although a parent's memories of childhood may correspond to parental behavior, the memories may not resemble the actual childhood experience. Memory is reconstructive, mood-related, context-cued, and selective.

Findings from Frommer and Oshea (as cited by Ricks, 1985) indicate disruption as an important determinant of parental behavior in the next generation. They found that mothers from disrupted families of origin (due to divorce, death, or long-term separation from parents) were less likely to engage in close, stimulating, and contingent interaction with their infants at five months. They talked to, looked at, and touched the infants less. They tended to be less responsive to the infants' fretful and positive vocalizations. Mothers from disrupted families of origin spent more time in a different room than the baby. As preschoolers, children whose mothers came from disrupted families had

impoverished language skills when compared to children whose mothers had not experienced disruption of their own families. The disruption of early attachment relationships appeared to be associated with non-optimal care-taking.

Bretherton (1985) commented, “Studies reviewed by Ricks (1985) showed that parents who idealized their own rejecting parent were likely to have insecurely attached children. By contrast, parents who were able to forgive a rejecting parent and/or to speak coherently about an unhappy childhood tended to have securely attached children” (p. 109).

Maternal Contact

Lowinger, Dimitrovsky, Strauss, and Mogilner (1995), stated that “One of the most basic tenets of attachment theory, as postulated by Bowlby and by Ainsworth, is that maternal behavior toward the infant is the critical determinant of infant attachment” (p. 461). The Baltimore Study by Ainsworth showed evidence that security of attachment at 12 months of age was related significantly to previous maternal care (Ainsworth, Blehar, Waters, & Wall, 1978).

Maternal behaviors may be divided into physical and social contact areas (Call, 1975; Sander, 1975). Research by Lowinger (1981) revealed that maternal gaze, vocalization, and smile behaviors were correlated positively with one another, but correlated negatively with hold behavior. Ainsworth (1982) noted that different mothers prefer different kinds of interactions with their babies. These various types of interactions can be physical, visual (eye gaze), and auditory and vocal contact.

Research by Tracy and Ainsworth (1981) indicated that mothers of securely attached children were more likely to show affection by hugging or cuddling their children rather than kissing or stroking their children. Meins (1997) stated that,

Tracy and Ainsworth used this anomaly in these mothers' behaviour to explain their insecure-avoidant infants' reactions in the strange situation: even though the attachment system is activated, resulting in a need for bodily contact, previous disappointments upon being rejected seem to prevent these children from seeking comfort in this way." (p. 24)

Implications for Early Intervention

The determination of an attachment disorder requires careful and systematic planning and observation on the part of the early interventionist. If issues of attachment are suspected, the early interventionist should seek the consultation of a qualified mental health provider who has experience working with children with attachment difficulties. The role of the early interventionist is critical, since behaviors associated with attachment disorders often resemble those seen in other developmental disorders. The early interventionist should receive training to differentiate between behaviors associated with atypical attachment and behaviors that are more specifically associated with developmental delays. A trained interventionist then would be able to provide appropriate educational and therapeutic interventions to families with children who have attachment disorders. Early interventionists provide service to many families of diverse backgrounds, and should be sensitive to child-rearing practices of various cultures (Vacca, 2001).

Summary

Based on the aforementioned research (Bowlby, 1958,1969; Cline 1992; Ainsworth et al. 1978; Crittendon & Claussen, 2000), protection and trust are critical components of attachment. Various factors such as culture and intergenerational history may impact patterns of attachment. Therefore it is essential that early interventionists be able to provide appropriate recommendations to families with young children with attachment disorders. These recommendations also should be designed to reflect sensitivity for the cultural background of each individual family. The objective would be to foster the growth of trust and protection within these families, and subsequently, to influence positively their attachment patterns.

Many factors influence the development of attachment between infant and mother (primary caregiver). The following research question has been identified for this research project: Is there a relation between family attitudes towards affection and security of attachment in young children with disabilities?

Chapter III

Methods

The purpose of this study is to determine if there is a relation between the display of family affection and security of attachment in young children diagnosed with special needs. Families with preschoolers with special needs in the Franklin-McKinley School District, San Jose, California, were asked to complete parent surveys for this research project.

Participants

The survey was sent to parents of preschoolers with special needs in the Franklin-McKinley School District. Surveys were sent out to 40 families, and 57% of the surveys were returned. Of the respondents, 78% were female, and 17% were male, and 5% declined to state the gender. Forty-three percent of the families were Hispanic/Latino, 39% were Asian, 9% were Caucasian, 5% were African-American, and 4% declined to state ethnicity. The majority of the students who attend the Franklin-McKinley School District are from low socio-economic backgrounds.

Survey Design

The researcher gathered information from the Strange Situation Assessment developed by Ainsworth and Wittig (1969), and also the Attachment Q-Set Text (Waters 1994), to develop the parent survey. The survey was developed in a simple Likert format, to enable participants' ease in completing the survey.

The survey was composed of four sections. Section one contained four items, which covered general background information questions. Section two included seven

items related to display of family affection. Section three consisted of ten items; five items related to security of attachment in children from birth to two years, and five items related to security of attachment in children three to five years old. The final section included five items related to family history of attachment based upon the respondent's memory of his or her childhood. Survey items in sections two, three, and four were based on a scale of 1 to 4, whereby 1 indicated less affection/secure, and 4 indicated more affection/secure.

Procedure

The surveys were given to families of preschoolers with disabilities in the Franklin-McKinley School District. Parents were asked to complete and return the anonymous survey at the earliest convenience. Ratings were averaged for each of the sections (two, three, and four), and then the Kendall's coefficient of concordance and the Spearman rank correlation coefficient were utilized to analyze parent survey data.

Chapter IV

Results

The purpose of this project was to determine if there was a relation between family display of affection and security of attachment of young children with disabilities. Information gathered from this research was intended to enable the researcher to provide suggestions related to improvement of security of attachment in young children with disabilities and their families.

Kendall's coefficient of concordance showed significant results, $\tau(23) = +.32$, $p < .05$, between the family history of security of attachment and the security of attachment in young children with disabilities. Results were not significant between family affection and security of attachment. Table 1 shows the statistical analyses using Kendall's coefficient of concordance, from the data gathered from the parent surveys.

Table 1: Statistical Analysis using Kendall's Coefficient of Concordance

Variables		Security Attachment	Security Attachment History
Family Affection	Correlation Coefficient	-.021	-.021
	Sig. (2-tailed)	.894	.894
	N	23	23
Security Attachment	Correlation Coefficient	1.00	.320*
	Sig. (2-tailed)	.	.042
	N	23	23

* Correlation is significant at the .05 level (2-tailed).

The data from statistical analysis using the Spearman rank correlation coefficient provided similar results, $r(23) = +.421$, $p \leq .05$, showing a positive relation between family history of security of attachment and security of attachment in young children

with disabilities. Again, no significant relation was found between family affection and security of attachment. Statistical analysis using the Spearman rank correlation coefficient is shown in Table 2.

Table 2 Statistical Analysis using Spearman Rank Correlation Coefficient

Variables		Security Attachment	Security Attachment History
Family Affection	Correlation Coefficient	-.033	-.002
	Sig. (2-tailed)	.880	.993
	N	23	23
Security Attachment	Correlation Coefficient	1.000	.421*
	Sig. (2-tailed)	.	.045
	N	23	23

* Correlation is significant at the .05 level (2-tailed)

Chapter V

Discussion

The purpose of this study was to determine the existence of a relation between family display of affection and the security of attachment in young children with disabilities. The results of this study showed no relation between the display of family affection and the security of attachment in young children with disabilities.

These findings may have been affected by a number of variables related to the development of security of attachment. For example, some cultural groups are more affectionate than others. In addition, ethnic differences may influence how families develop attachment with their young children.

Ainsworth (1982) observed that different mothers prefer different kinds of interactions with their babies. These types of interactions can include physical, visual (eye gaze), and auditory or vocal interaction. Research from Fonagy, Steele, and Steele (1991) indicated that parent responses to infant signals tend to be filtered through existing concepts of attachment relationships and cultural prescriptions. Posada et al. (1995) observed that children in different cultures organize their secure-base behavior towards their mothers in different ways. Much diversity was found in the manner in which these children's behaviors related to the definition of the securely attached child.

An earlier study by Tracy and Ainsworth (1981) found a difference in attachment based on the type of affection shown to young children. This research indicated that children of mothers who hugged and cuddled were more attached than children of

mothers who kissed and stroked. These specific types of affection were not isolated in this research project.

There was a relation shown between the variables of family history of security of attachment and security of attachment in young children with disabilities. Fonagy, Steele, and Steele (1991) reported that Strange Situation classifications at one year of age can be predicted from prenatal assessments of mothers' assessments of their own childhood attachments. Evidence strongly indicates that the quality of a mother's caregiving behavior is related strongly to her memories of childhood relationships (Ricks 1985). Thus, this particular project also supported these studies.

Limitations

This study was dependent upon the accurate reporting from participants and their memories. Therefore more accurate and reliable data could have been gathered from multiple measures such as a survey and an observation of family interaction. Additionally, the survey was created in a brief and simple manner for ease of completion. Therefore, some of the variables may not have been fully addressed. Finally, the number of surveys returned was limited to a small population sample, therefore this research project could have benefited from a larger sample of participants.

Suggestions for Further Research

This research involved families with young children with disabilities. A comparison study of families with young children without disabilities would be recommended to investigate both families with young children with disabilities and families with young children without disabilities.

Further research is recommended to study the influence of culture upon security of attachment. Since culture affects parenting style, it would be beneficial to identify culture-specific parenting behaviors that could increase development of security of attachment in young children with disabilities. This information may provide discernment for providing culturally appropriate training for families of young children who come from various ethnic backgrounds.

Additionally, further research should be made in the area of family history of security attachment and its influence on future generations. This research could lead to more studies of the development of security of attachment in families where there is a historical pattern of insecurity of attachment.

Summary

This study showed that there was no relation between the display of family affection and the security of attachment in young children with disabilities. These findings may be due to various cultural differences within families from diverse backgrounds. However, there was a significant relation between the family history of security of attachment and security of attachment in young children with disabilities.

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APPENDIX

Parent Survey
Family Display of Affection and Perceived Security of Attachment

Sponsored by:
San Jose State University
Early Childhood Special Education
Master's Degree Student, Jane Seto
Telephone 408-361-3913; Email: belovedj@hotmail.com

This survey is for parents of young children (ages birth through five years). The survey asks specific questions regarding family display of affection and security of parent-young child attachment.

Section 1: Please check the background questions that apply to you.

1. Gender:

- ☐ Male
- ☐ Female

2. Ethnicity

- ☐ African American
- ☐ Asian
- ☐ European American
- ☐ Hispanic/Latino
- ☐ Native American
- ☐ Mixed Race/Ethnicity
- ☐ Other _____

3. Age

- ☐ Under 20
- ☐ 20 – 30
- ☐ 30 – 40
- ☐ 40 – 50
- ☐ over 50

4. Gender and Ages of children – Please list:

Section 2:**Directions:**

Below is a list of questions related to family display of affection. On a scale of 1 – 4, please circle the answer that best describes the level of display of affection in your family.

Key:

1. **Never** do this
2. Do this **Sometimes**.
3. Do this **Most of the time**.
4. Do this **All** the time
- DK/NA – Don't Know, or Not Applicable

1. Do you hug a family member every day?

1 2 3 4 DK/NA

2. Is affection displayed when strangers are present?

1 2 3 4 DK/NA

3. Do you display affection with your spouse?

1 2 3 4 DK/NA

4. Do you hug or carry your children?

1 2 3 4 DK/NA

5. Do you tell your children that you love them?

1 2 3 4 DK/NA

6. Did your parents hug or kiss you when you were a child?

1 2 3 4 DK/NA

7. Did your parents tell you that they loved you?

1 2 3 4 DK/NA

Section 3:**Directions:**

Below is a list of questions related to security of attachment of young children. On a scale of 1 – 4, please circle the answer that best describes the security of attachment of your children at each of the ages (birth to two years, and three to five years).

Key:

1. Extremely uncomfortable
2. Sometimes uncomfortable
3. Sometimes comfortable
4. Extremely comfortable
- DK/NA - Don't Know or Not Applicable

Children ages Birth to 2 years:

1. How comfortable is your child in the presence of familiar adults (not family)?

1 2 3 4 DK/NA

2. How comfortable is your child in the presence of unfamiliar adults?

1 2 3 4 DK/NA

3. How comfortable is your child with babysitters or daycare providers?

1 2 3 4 DK/NA

4. How comfortable is your child with other children?

1 2 3 4 DK/NA

5. How comfortable are you when you are not with your child?

1 2 3 4 DK/NA

Children Ages 3 to 5 years:

1. How comfortable is your child in the presence of familiar adults (not family)?

1 2 3 4 DK/NA

2. How comfortable is your child in the presence of unfamiliar adults?

1 2 3 4 DK/NA

3. How comfortable is your child with babysitters or daycare providers?

1 2 3 4 DK/NA

4. How comfortable is your child with other children?

1 2 3 4 DK/NA

5. How comfortable are you when you are not with your child?

1 2 3 4 DK/NA

Section 4:

Directions:

Below is a list of questions related to your family history of security attachment when you were a child. Please answer these questions according to the memory of your childhood.

Key:

- 1. Extremely uncomfortable
- 2. Sometimes uncomfortable
- 3. Sometimes comfortable
- 4. Always comfortable
- DK/NA - Don't Know or Not Applicable

1. How comfortable were you when you were not with your parents?

1 2 3 4 DK/NA

2. How comfortable were you talking with family members other than your parents?

1 2 3 4 DK/NA

3. How comfortable were you making conversation with others unknown to you?

1 2 3 4 DK/NA

4. How comfortable were you being with friends?

1 2 3 4 DK/NA

5. How comfortable were you making new friends?

1 2 3 4 DK/NA

Thank you for your time.