

The Handbook of Counselling Children and Young People

Edited by

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1

CHILD DEVELOPMENT AND ATTACHMENT

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This chapter will discuss:

- **The theoretical underpinnings and some conceptual frameworks of child development and attachment**
- **The centrality and importance of considering diversity**
- **Implications of child development and attachment for therapeutic practice when working with children and young people**
- **Case presentations of young people whose development and attachment is affected. These aid reflection on the key points**

INTRODUCTION

Theories on childhood development and attachment remain some of the most studied and central theories in helping us understand how as humans we develop physically and psychologically. There are numerous debates on attachment and development, which primarily hail from the nature–nurture question. In responding to these debates, I draw from research on epigenetics and environment interactions which states that it is not nature or nurture nor is it nature and nurture but that life emerges from the interaction between the two. That there are no genetic factors that can be studied independently of the environment, and there are no environmental factors that function independently of the genome (Meaney, 2001: 51; Meaney, 2010). Additionally, given the importance and centrality of diversity when exploring child development, in the context of counselling I also draw from cultural and relational neuroscience research that examines how psychological processes develop and are influenced and

shaped by the interplay between culture, biological and physiological factors, genetic influences, patterns of neural activation and environmental processes (Schoore, 1994; Siegel, 2010; Sasaki and Kim, 2017). Furthermore, I believe that human experience is organised physiologically, affectively, cognitively, biologically and experientially (Erskine and Moursund, 2011). Thus, whilst Bowlby and Ainsworth's attachment models, which primarily explain infant behaviour towards their attachment figure, will be explored, I will outline a wide range of other orientations in order to mirror the complexity of processes that make up child development and the plethora of theoretical perspectives that have already been published in the vast literature within developmental psychology, psychotherapy and counselling literature.

Given the magnitude of this subject area, it is impossible to cover any particular theories in enough depth to do them justice or to cover all theories that relate to attachment and child development. Thus, in order to contextualise, synthesise and integrate perspectives noted in this chapter, I will use a relational framework that asserts a range of considerations (see Erskine, 2015; Finlay, 2015; Paul and Charura, 2015). These include that what happens in the therapy room may well reflect developmental and phenomenological processes that are happening outside for the client. It also highlights the importance of the intersubjective space between two people, in the here-and-now, and the containing and psychologically holding presence of the therapist in a human-to-human, collaborative relationship within a safe space and working with whatever emerges (Erskine, 2015; Finlay, 2015; Paul and Charura, 2015). Hence past experiences that may have impacted the development, attachment and relational patterns of the child/young person require the therapist to be flexible enough to attune to each client's relational needs (Clarkson, 2003). Therefore, these relational principles will form the basis for the perspectives noted in this chapter, particularly when considering the implications for therapeutic practice on child development and attachment. To end the chapter a list of points for key learning is provided.

UNDERPINNING THEORETICAL AND THERAPEUTIC CONCEPTS – BEGINNINGS

Psychosexual development

Before focusing on attachment theory (Bowlby, 1969; 1988; Ainsworth et al., 1978), I will offer a few different theoretical perspectives of development in order to contextualise both the history and the diversity of thought within developmental and psychotherapy theory.

In this section I will offer a brief overview of the psychosexual stages, though it is impossible to do it justice in a few paragraphs, especially given that so much has been written about this in psychoanalytic literature. My intention, however, is to point to some of the theoretical conceptions around psychosexual development in children and young people in order to further the stimulus of practitioners' thinking and considerations on psychosexual

development theory as one of the pillars of psychological theories on child development. In Sigmund Freud's writing from 1905 onwards to other contemporary writing that has followed he depicted the emergence of human development through psychosexual stages.

It is worth highlighting at this early stage in this chapter the historical context of two distinct and often contradictory schools of thought found in Freud's classical psychoanalytic school of thought. Shuttleworth (1989) described these as Freud's *mechanistic* model of emotional life, which Freud (1911) postulated as that of an organism dealing with different quantities of excitation. In later writings this was interwoven with more psychological development concepts which were hypothesised as being concerned with the relationship between instincts and internal drives as well as the capacity for contact with reality and rational thought (Shuttleworth, 1989).

Thus as Freud's writing and clinical practice developed, he shifted his model of development and hypothesised that consequently the capacity in later life to process emotion and relate to others or psychopathological presentations could not be simply translated as being linked to childhood sexuality and the relationship with primary caregivers – the 'past causing the present' – but rather experience accumulates and develops in indirect and multifaceted ways (Freud, 1911; Shuttleworth, 1989).

In relation to Freud's contribution to development on psychosexual stages, he hypothesised that in developing from infancy to adolescence, the individual develops through psychosexual stages and activities that consist of contending with libidinal tensions and their accompanying anxieties (Freud, 1905; Shuttleworth, 1989). These stages are notably the oral, anal, phallic (which also constitutes the Oedipus complex), latency and genital stages, all of which have been written about extensively elsewhere and thus I will not focus on their descriptions in this chapter (see Freud, 1905; 1924; Freud et al., 1953; Garcia, 1995).

Given the infant's dependency on its primary caregivers, its interpersonal struggles and anxieties are thus made relational and are manifested through overindulgence and overfrustration. His conceptual framework of the psychosexual stages is not one that is a linear, or unidimensional staged process in its progression but rather it is less sequential and is an oscillating evolution of developmental patterns (Freud, 1933; Garcia, 1995). Freud used the term *polymorphously perverse* to mean that during the stages of development, which are manifested through undifferentiated impulses for sensual pleasure, because the child lacks knowledge that certain modes of gratification are forbidden, they seek gratification wherever it occurs. For example, in the earliest phase of life (the oral phase), the child forms a libidinal bond with the mother by gaining pleasure from (for example) sucking the breast. Thus, he argued that infantile development through the psychosexual stages is mostly in the form of perversion (*polymorphously perverse*), as they have not yet built up the capacity to focus their sexuality on their genitals, but they allow it to be experienced over the entire body. This means with the *pleasure principle* dominating, and without having matured to learn to constrain sexual drives to socially accepted norms, and without having yet matured to adult sexual behaviour/capacity that focuses on the genitals, and/or reproductive functions, the infant/child seeks pleasure in whatever form. This includes initially from their primary caregiver as well as gaining pleasurable stimulation from their own body. It is only through these developmental

stages that children learn to constrain sexual drives to socially accepted norms (Shuttleworth, 1989; Garcia, 1995).

Furthermore, apart from psychosexual development I would like to briefly make reference to the development of the psyche, which underpins and has influenced theories of interpersonal relationship, child development and early attachment (Klein, Winnicott and Bowlby), and latterly relational theory (Kohut).

The psyche, which is the basis of personality structure, is composed of the 'id', which is the home of our instinctual drives; the 'ego', which is the sense of our conscious (i.e. the 'I'), and it is the ego, according to this model, which regulates our inner drives and our social self; and the 'superego', which has a sort of parental quality and is concerned with how we behave in relation to social expectations (Freud, 1915).

Fig. 1.1 depicts the model of the psyche.

As can be seen in Fig. 1.1 the ego and superego are partly conscious and the id is wholly *unconscious* and below the surface of our awareness according to this model.

In relation to childhood development this model of the mind asserts that psychological problems emerge as a result of repressed childhood conflicts and the inadequate working through of developmental needs as the child grows (Freud, 1915; Paul and Charura, 2015). Thus, the importance and link to attachment is that a template is created based on early primary relationships that mould the capacity for future relational and cognitive patterns. If a child is raised in loving early relationships in which needs are met, a psychologically healthy development ensues. However, if the early relationships with primary caregivers are unfulfilling in a variety of ways this leads to unfulfillment and repression of experiences. If not worked

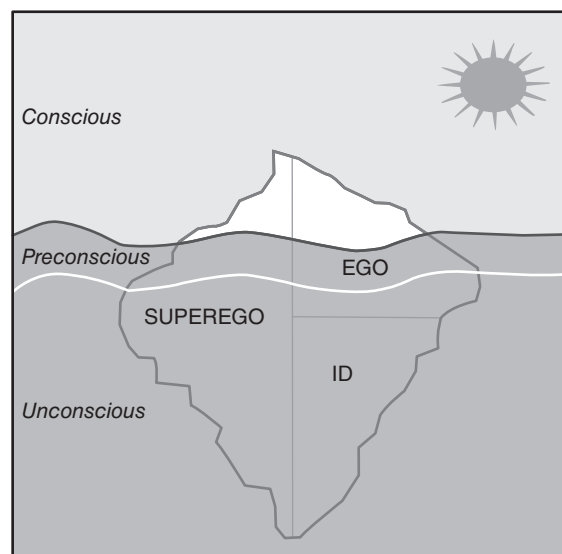


Figure 1.1 The Freudian model of the psyche

through as the young person develops into adulthood these experiences will be unresolved and contained in the unconscious, and will manifest through a range of psychopathological presentations. These could, for example, include difficulties in relational or attachment patterns in adulthood, or could manifest as behavioural, interpersonal or other psychological difficulties (Paul and Charura, 2015).

This contribution from the psychoanalytic/psychodynamic orientation and turn to focus more on the mind's experience of itself and of the world around it (phenomenological model of the mind) spurred further interest and development from others (Klein, Winnicott, Bion, etc.). They were interested in the interconnectedness of how we as humans experience the world and develop emotional states, as well as the capacity to relate to others, and think and generate meaning as we develop from infancy through to childhood and subsequently adulthood.

The evolution of this idea into object relations theory is based on the principle that infants primarily seek relationship, and that relationships with significant others are what is at the heart of personality development. This development of relational theory is a shift from one-person to two-person intersubjective psychology (Mitchell, 2000; Finlay, 2015).

An example can be given here of a contribution to the interconnection between development of the psyche, the nature of attachment in the primary relationship and developmental description of the origins of the self in the infant-caregiver relationship. In line with this, Winnicott (1953) argued that the initial building blocks of the ego were created through the child experiencing threats of annihilation that did not in reality lead to annihilation and from which, repeatedly, there was recovery. He stated that this was afforded by what he termed the *good-enough mother*, whose role he saw as that of allowing the child to project fears, anxieties, frustrations (bad objects) into her and then re-introject (the process by which the child unconsciously re-incorporates these project fears, anxieties, frustrations (bad objects) into his/her psyche) them when they can see how well she handles them (Winnicott, 1953). Thus, through the holding, caring and safe environment the child's fears and anxieties are contained, enabling the infant to have a personal existence, and consequently to build 'a continuity of being' (Winnicott, 1953; 1967). It is through this continuity of being that the ego develops and the individuality of the infant gradually develops. If, however, the child's care is not good enough then he hypothesised that there is no continuity of being and consequently personality development will be founded on reactions to environmental impingement and thus could result in a young person with psychological and relational difficulties (Winnicott, 1960).

Other contributions to child development from the object relations school include how societal and parental influences become internalised as the superego, which consequently imposes rules for living (Klein, 1975). Klein elaborated on the interplay between the conscious and unconscious (the psyche) of the infant and caregiver as well as with the environment. She asserted that the drive to be met and regulated by the other (primary caregiver), which is characterised as an 'object' emerges, and is relayed as love/hate and envy/gratitude (Klein, 1952). The relationship in which these emotions are regulated results in internalisation of the quality of the experience, thereby a healthy adult's internal objects are

balanced and integrated (whole objects and not part objects). This allows for optimal object relations, whether internally (within one's self) or with others (Klein, 1975).

Similarly, we can also draw on understanding development from self-psychology perspectives and, in particular, the work of Kohut, who linked the development of the internal world with the influence of the environment through his concept of the self. Kohut (1977) argued that what drives development in the human infant is the need to be met emotionally by others and to have the self reflected back via other/significant relationships (through what he termed twinship, mirroring and idealisation) and 'transmuting idealisations' (Kohut, 1977). These mirroring, idealising and twinship experiences enable the development of the self-structure as well as the ability to regulate the self in moments of bearable frustration. Kohut (1984) also offered insight into how psychopathology develops and argued that excessive admiration by parents, lack of realistic feedback from parents, or inconsistent or neglectful parental caregiving during development resulted in narcissism and other personality deficits.

It is from within this school of object relations that from the 1930s onwards, Bowlby (attachment theory) radically transformed psychoanalysis (Greenberg and Mitchell, 1983; Paul and Charura, 2015). Larsson (2012) noted how Bowlby's (1958) attachment theory served as a catalyst for the shift from theory on libidinal drives to focusing more on infants as relation seeking, and to adopting a lifespan approach to understanding the influence of relationships on personality, relational patterns, social development and psychopathology.

The quote that follows encapsulates John Bowlby and Mary Ainsworth's work as contributors to the perspective that an infant's innate tendency is to move towards the exploration of new things. However, when moving proximity from the primary caregiver, the infant may become scared and the primary caregiver will be the infant's secure protection base (Paul and Charura, 2015). Thus, the experiment that Ainsworth developed (the Strange Situation) enabled this innate tendency to be manifested and the responses of different children to the *strange situation* indicated the nature of their attachment pattern.

Observation of how a very young child behaves towards his mother, both in her presence and especially in her absence, can contribute greatly to our understanding of personality development. When removed from the mother by strangers, young children respond usually with great intensity: and after reunion with her, they show commonly either a heightened degree of separation anxiety or else an unusual detachment. (Bowlby, 1969: 3)

As so much has already been written in depth about attachment and attachment patterns hailing from the work of numerous researchers, with primarily John Bowlby and Mary Ainsworth, and later Mary Main, at the forefront (Bowlby 1969; 1988; 1973; 1980; Ainsworth, 1982; 1985; Ainsworth et al., 1978; Main et al., 1985), and also on child development and attachment (Gibbs et al., 2014), I will make only brief reference to the attachment patterns as identified by Ainsworth et al. (1970; 1978) as well as to other perspectives as noted by Bowlby (1969; 1988).

Attachment, as noted by Ainsworth (1963) is a 'secure base from which to explore', and this perspective and description continues to hold as a fundamental principle within attachment theory. Following from this Bowlby (1969) described attachment as a unique relationship between an infant and his caregiver and stated that it is this relationship and an attachment that is the foundation and basis for further healthy development.

Ainsworth et al. (1970; 1978) noted the following patterns:

- Secure attachment: In this style, the caregiver's qualities are usually hypothesised as affectionate, containing, loving and consistently providing care. In the Strange Situation, and when emotionally distressed, the infant thus seeks protection and comfort from the mother and is quick to settle to the mothers' comforting attempts.

Insecure attachments are briefly described as follows:

- Avoidant attachment: In this style of attachment, in the day-to-day relational encounter the mother is usually hypothesised as being rejecting of the child's attachment behaviour. In the Strange Situation, when united with the mother, the infant characteristically pulls away or ignores her.
- Resistant attachment style: In cases where the mother is hypothesised as being inconsistent in responding to the child's emotional needs and care, in the Strange Situation, the infant usually tends to stay close to their mother (Fraley and Spieker, 2003).
- Main and Solomon (1990) defined a fourth attachment style, which they termed the disorganised style. They hypothesised that this style of attachment had its roots in a primary caregiver who presented as emotionally erratic, or passive. Thus, in the Strange Situation the child was non-responsive.

One of the significant contributions to attachment theory is that of Bowlby (1988), who formulated the concept of an *internal working model* of self and relationships. He argued that this internal working model is a conceptual framework central to making sense of the world, self-appraisal and appraisal of others. It forms as a result of the nature of interaction between the child and the primary caregiver. It consequently foreshadows later psychological growth and governs how the child feels towards their parent/primary caregiver and towards their self, how the child expects to be treated, and is the prototype from which behaviour towards others and future relational patterns and choices emerge (Bowlby, 1969). It has been suggested that this development in infancy is placed within a matrix of two subjectivities, namely that of the caregiver and that of the infant, and thus a child becomes an independent subject only if they recognise the separateness and autonomy of their caregiver and this is what has been termed intersubjectivity (Finlay, 2015; Paul and Charura, 2015).

It is generally accepted that *good-enough* parenting (Winnicott, 1960) and consistent, positive attention from their caregiver are most likely to develop a positive internal working model. Elsewhere I have co-written examples of how an infant or young person who experiences

neglect and rejection may develop a negative internal working model that informs them ‘No-one cares about me’, or ‘I am unlovable’, or ‘I am not good enough’. If this ‘internal model’ of self and others remains unchanged through childhood development, low self-esteem, depression, being overly dependent or independent, and sabotage in relationships or jobs may ensue (Paul and Charura, 2015).

Attachment theories, however, are not without their criticisms. For example, critics argue that the correlation between parental sensitivity and the child’s attachment as hypothesised by Bowlby and Ainsworth and others is weak, and that it places too much emphasis on the mother/primary caregiver and is reductionist in its hypothesis (Belsky, 2002). Meaney (2010) offered arguments that highlight the importance of considering environment interactions and thus asserted the importance of taking into consideration the roles and interactions that both nature and nurture play in child development.

There are also arguments which emphasise that there are other explanations which may offer responses to criticisms on attachment as a lens to view developmental perspectives. For example, Fox’s (1989) findings showed that infants with an ‘easy’ temperament (those who eat and sleep regularly and accept new experiences) are likely to develop secure attachments, whilst those with a ‘slow to warm up’ temperament (those whose development to get used to new experiences took time) are likely to have insecure-avoidant attachments. Furthermore, it was noted that babies with what Fox termed a ‘difficult’ temperament (those who eat and sleep irregularly and who reject new experiences) were likely to have insecure-ambivalent attachments (Fox, 1989). Thus, Fox concluded that an interactionist theory that factors in a combination of the child’s innate temperament and their parent’s sensitivity towards their needs offered an alternative perspective to attachment theory as proposed by Ainsworth et al. (1970; 1978) (Fox, 1989).

Another criticism of attachment models is that the conceptualisation of attachment behaviours is based on those that occur with the primary attachment figure, and typically the mother (Field, 1996). Furthermore, it has been argued that when considering the child’s or parental behaviours, there is a lack of consideration of other attachments, for example, with the father or sibling, or of the role of others in cultures/families where there are multiple people involved in the care of a child (Field, 1996).

Despite these criticisms, the potency of attachment theories and their contributions cannot be ignored. Pickover (2002), for example, argued that insecure attachment patterns could be linked to psychiatric disorders, to which a child becomes vulnerable following the loss of an attachment figure. Furthermore, children and young people with insecure attachment patterns struggle to form secure attachments and react in a manner that may be hostile, rejecting or devaluing of others within their environment (Pickover, 2002).

When children or young people with severe attachment disorders, or who have undergone loss or trauma, are offered a close and secure relationship, if they become close to the attachment figure, they will often then withdraw from that relationship before they can be rejected, or they will react in ways that reflect their innermost feelings of being unworthy of love, and fearful of loss and of investing in a secure attachment. Furthermore, other writing and

research has suggested that secure attachment is influential in supporting individuals through particularly major life stressors/traumas that may otherwise result in psychological distress (Paul and Charura, 2015).

Children with secure attachment patterns are capable of healthy relational patterns and can build other relationships whilst maintaining their primary relationship with their parents, not only in childhood and adolescence, but going into adulthood (Pickover, 2002).

Psychosocial Development

With the focus so far having been on the psychodynamic, object relations, intersubjectivity and attachment perspectives, a shift to the work of Erikson (1950/1963) offers a different eight-stage developmental theory, which shifted away from drive theory and thus may be used as a conceptual base for psychosocial developmental theory (Knight, 2017). Erikson's use of the word 'stage' refers to a period of life such as childhood or adulthood, and he outlined that in each of the eight developmental stages he proposed, there is a pair of opposing psychological tendencies that need to be balanced (Knight, 2017). Furthermore, he clarified that the transition between the stages is not clear cut, nor is it an achievement grading where the crisis stages can be resolved permanently, but rather it is interconnected and fluid. Erikson argued that development starts with the first stage, which is trust vs. mistrust, in which the infant learns to trust the primary caregiver to meet their basic needs and consequently this relationship and experience contributes to the infant's feelings of security at times of uncertainty. He stated that if the adaptive strength (*virtue*) of hope is not established, then fear and mistrust will be the predominant experience of the infant and consequently the development of the other seven psychosocial stages will be impacted. Table 1.1 outlines the eight stages as hypothesised by Erikson (1950/1963). The first stage of *basic trust versus mistrust* mirrors Bowlby's theory of infant attachment, where experience with caregivers is crucial. The second to fourth stages of Erikson's theory parallel the possible outcomes of development and relational attachment in children, and the developmental context in which there is expansion from family to school and other contexts outside the home (Knight, 2017). In relation to development, the child's engagement in the attachment relationships and wider contexts in the first four stages enable the child to develop their ego, further cognitive, motor skills and language, and to obtain achievements or accomplishments.

Furthermore, Erikson's first four stages correspond to the development phase in Bowlby's attachment theory during which the formulation of the internal working model occurs (Bowlby, 1973). Given that the focus of this chapter is on children and young people, this section offers only a brief overview as noted and Table 1.1 will not elaborate on the descriptions and critique of each stage (for more detail, please see Erikson (1950/1963) and Knight (2017)).

12 PART I – THEORY AND PRACTICE APPROACHES

Table 1.1 Erikson's eight stages of psychosocial development

Stages	Age in years	Stage description	Adaptive strength or virtue	Maldevelopment (maladaptive tendency/malignant tendency)
Infancy	Birth – 1½ years	Basic trust vs. mistrust	Hope	Sensory maladjustment/withdrawal
Early childhood	1½–3 years	Autonomy vs. shame and doubt	Will	Shameless wilfulness/compulsion
Play age	3–5 years	Initiative vs. guilt	Purpose	Ruthlessness/inhibition
School age	5–12 years	Industriousness vs. inferiority	Competence	Narrow virtuosity/inertia
Adolescence	12–18 years	Identity cohesion vs. role confusion	Fidelity	Fanaticism/repudiation
Young adulthood	18–40 years	Intimacy vs. isolation	Love	Promiscuity/exclusivity
Adulthood	40–65	Generativity vs. stagnation/self-absorbtion	Care	Over-extension/rejectivity
Old age wisdom	65+	Integrity vs. despair	Wisdom	Presumption/disdain

CONSIDERATION OF WIDER SYSTEMIC THEORY

Having considered object relations, attachment and psychosocial perspectives to development, the link can then be made here between humanistic and systemic perspectives. Different authors have written on the impact of the family system. Human development across the lifespan is created and re-created, variously within each interaction, in the family and wider systems (Roy-Chowdhury, 2010). In line with this, Burns et al. (2015) highlight the importance of considering ecological systems theory (EST) (Bronfenbrenner, 1986; Bronfenbrenner and Morris, 1998; Dallos and Draper, 2010), which states that to understand the child, the environment in which the child lives must be fully examined. Others, like Sumontha et al. (2017), research associations between children's gender and sexuality development and their parents' gender – attitudes and behaviours could be linked to the impact of not only the family system but also the wider system as hypothesised by Bronfenbrenner (1986).

As noted in Fig. 1.2, Tudge et al. (2009) highlighted the wider systems as microsystem, mesosystem, exosystem and macrosystem frameworks, and stated that these proximal processes are a contemporary aspect of Bronfenbrenner's theory. Furthermore, they added that it is essential to consider them when conceptualising human development.

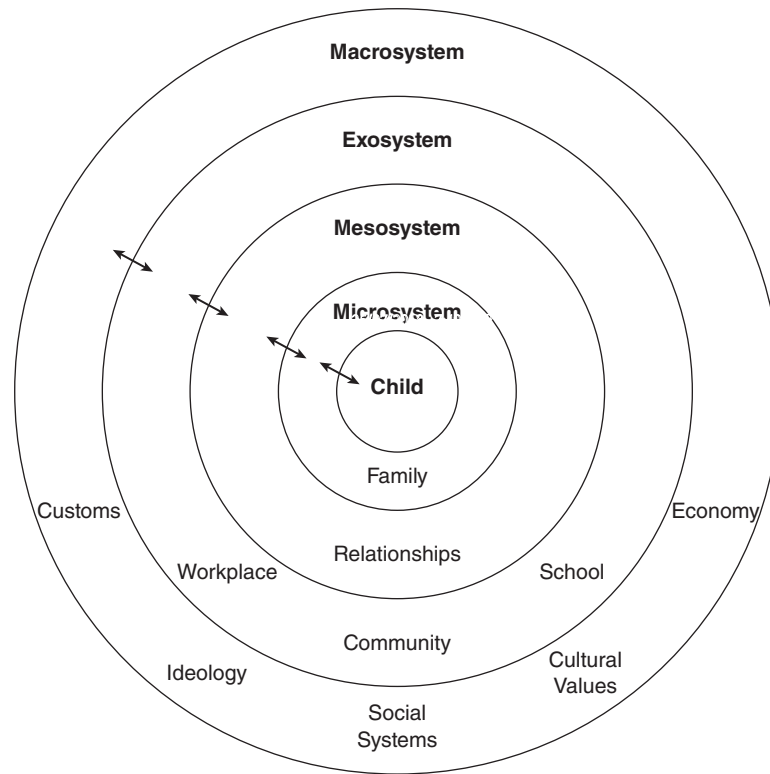


Figure 1.2 The context of human development – Bronfenbrenner's (1977) bio-ecological systems theory

Importance of play

There have been numerous contributors who have highlighted the importance and centrality of play in child development (Klein, 1924; Rogers, 1939; Vygotsky, 1966; Else, 2009; Hughes, 2010). Furthermore, the importance of play has been identified as instrumental to physical, psychological, cognitive and social development by theorists of different orientations (Brown, 2014).

Vygotsky (1966) similarly highlighted how play contributes to mental development, and stated that in play a child deals with objects as having meaning and could, for example, take a stick to be horse. He argued that in play a child unconsciously and spontaneously makes use of the fact that meaning can be separated from an object without the cognitive recognition that this is happening and, thus, although superficially play bears little resemblance to what it leads to, profound internal analysis or examination of what presents makes it possible to determine its course of movement and its role. Thus, Vygotsky's arguments here highlighted that from the point of view of development, the creation of an imaginary situation is not a fortuitous

fact in a child's life but can be regarded as a means of developing abstract thought and is the first step to a child's emancipation from situational constraints (Vygotsky, 1966). In other words, the ability to create imaginary situations and to use objects creatively enables freedom to explore unconscious and conscious material in relation to or in reaction to experiences.

More recently, Brown (2014) also identified how play contributes to development. He suggested that playing contributes to the ability to experience pleasure through fun, an experience of freedom gained through assessing risk and testing boundaries; flexibility through, for example, experimenting with possibilities and developing combinatorial thinking; that play helps to develop social interaction, and capacity for socialisation as well as creativity, problem-solving, self-discovery and so on. He further suggested that play contributes to muscular-skeletal development as some play utilises fine motor skills, gross motor skills and hand-eye coordination. With Brown's assertion of play contributing to psychological development, it is evident that it is therefore important that therapists working with children and young people be open to engaging with play within the therapy room and understand the essential contributions it offers to development.

Neurological development, survival, and the centrality of love and attachment

I have co-written elsewhere about the centrality of love and attachment in development (please see Charura and Paul, 2015). However, there are many other sources and colleagues who have written on the importance of love and attachment, and how neurological development, experiencing love and secure attachments are all intricately interconnected to development and survival itself (please see Joseph, 1999; Fisher, 2004; Cozolino, 2010; Gerhardt, 2015).

I would like to make reference here to the brain's innate capacity for *neuroplasticity* (the ability to develop new neural pathways in line with what is stimulating in their environment); *neurogenesis*, which refers to the brain's capacity to generate new neurones; and, lastly, the importance of *neurotransmitters*, which are chemicals that are exchanged between neurones and carry messages that stimulate biological reactions in different parts of the brain (Siegel, 1999; Paul and Charura, 2015). Relational research and writing drawing from neuroscience have shown the positive effects of love and good early attachments, as well as the environmental influences on neuroplasticity and neurogenesis, social, emotional and relational development (Joseph, 1999; Fisher, 2004; Cozolino, 2010). Conversely, a lack of love, trauma, neglectful or abusive care have a negative effect on the development of the limbic system, and on the growth and survival of neurones in many other parts of the brain and the body, all of which severely impacts on all aspects of social and emotional functioning (Hughes, 2010; Charura and Paul, 2015; Gerhardt, 2015). Specific reference has been made to how the human baby without love experiences nuclei in the limbic system atrophying (weakening), or neurological/neurochemical impairment, or formation of abnormal neural interconnections,

all of which consequently results in an inability to form normal emotional attachments, social/relational withdrawal and inability to interact appropriately (after Joseph, 1999; Cozolino, 2010; Gerhardt, 2015). Thus, in relation to the importance of love, attachment and neurone development, it has been continually asserted that they are important pinnacles as they can affect physical growth, attachment/relational patterns, play behaviour, and psycho-sexual and cognitive stages of development (Cozolino, 2010; Charura and Paul, 2015; Gerhardt, 2015). At worst neurological impairment, lack of growth and even death can result from neglect and a lack of love. For example, the work of Brown and Webb (2003), colleagues who worked with Romanian orphans rescued from what, in some cases, were called death rooms, who were tied in cots all day without much human love, describes how they started to develop and thrive as they were given positive care and love.

Piaget's (1971) theory on developmental stages and developmental processes stressed the innateness of equilibration about the world and consequent adaptation (harmony of organism and world). He also highlighted the importance of organisation (harmony within the organism). In order for adaptation to occur in development, he suggested that the child uses cognitive-affective structures (schemata). These are understood to be patterns of physical or mental action that underlie specific acts of intelligence and memory functions (Piaget, 1971). He then asserted that assimilation and accommodation were representations of maintenance and modification of these cognitive schemata (Piaget, 1971). Thus, it could be argued that in considering sensory and cognitive development, Piaget's postulation that cognitive development consists of a constant endeavour to adapt to the environment links well with attachment theory and neurobiological perspectives, as it highlights the importance of the primary caregiver providing a loving, safe and secure environment. This will provide the optimum conditions for sensory, neurological and cognitive development. However, a critical perspective on Piaget's developmental models is provided by the critique from Thelen and Smith, who argued that cognition is but one aspect of the entire developmental dynamic system (Thelen and Smith, 1994: 337). It is through this critique that we can link attachment and some humanistic perspectives. To mature and grow entails more than the need for homeostasis, but rather growth in a positive direction influenced by the innate actualising tendency (Rogers, 1959). If nurtured under the right conditions, then positive growth and authenticity ensue. If the conditions are not favourable, however, although the organism's/individual's actualising tendency still strives to grow towards a positive direction, incongruence and psychological maladjustment ensue (Rogers, 1959; Lago and Charura, 2016). Figure 1.3 that follows outlines a summary of some of the theoretical concepts discussed in this chapter so far.

CENTRALITY OF DIVERSITY

With Ainsworth having conducted studies in Uganda, she and Bowlby contributed to the centrality of attachment theory and its utility in cross-cultural research and practice (Ainsworth, 1967). Competent practice in working with children, young people and their

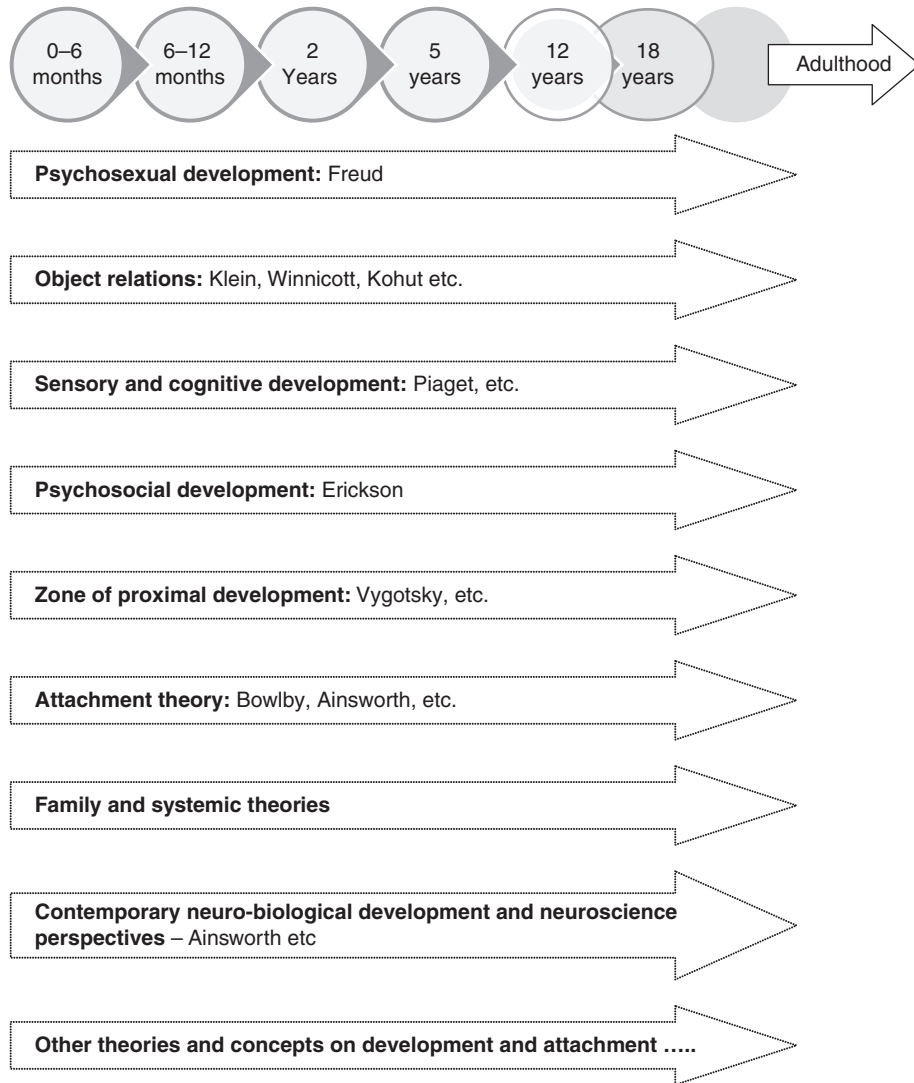


Figure 1.3 Theoretical concepts on development and attachment

Note: The arrows signify that each theory asserts development to a particular age stage: identify the accurate age stages for each and critique each one.

families can be informed by adhering to current local legislation (e.g. in the UK the Equality Act (2010), which promotes equality amongst protected characteristics of age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex and sexual orientation). In line with this thinking about development amongst young people, the therapeutic approach of

systemic therapy developed what is referred to as the social GRRACCES (an acronym for gender, race, religion, age, abilities, culture, class, ethnicity and sexual orientation), and enables the therapist to take account of their own and the client's experiences of challenges from these perspectives (Burnham, 1992). Moodley's (2005) inclusive definition, which extends difference and diversity to seven major categories of race, gender, class, sexual orientation, disability, religion and age, also contributes to the dynamics of the relational encounter when considering working with difference and diversity with children and young people. Awareness of potentially marginalised children and young people and of difference in relation to attachment patterns and development therefore enables practitioners to explore not only their position but also those of the clients and colleagues with whom they work.

IMPLICATIONS FOR PRACTICE

This chapter has contributed a wide range of perspectives that relate to attachment, multi-theoretical and intersubjective perspectives. I will now outline briefly how relational principles (Paul and Charura, 2015; Finlay, 2015) can enable therapists to draw parallels in practice from the integration of knowledge of child development in order to enhance and improve their work. Thus:

- A parallel can be drawn between the importance of love, care and secure attachment and the importance of a therapeutic relationship that offers the right conditions and environment for healing and transformation for the child or young person (through empathy, warmth, congruence and acceptance of the child or young person as hypothesised by Rogers (1959)).
- From a relational and developmental perspective, therapy can offer a relationship that helps to work through the attachment difficulties and experience the child or young person has in relation to the therapist (Erskine, 2015; Finlay, 2015; Paul and Charura, 2015). Working through the attachment difficulties or developmental problems with the child/young person or their parents/caregivers in the here-and-now could take different forms: dialogue, creative media or play, for example. This enables the child/young person to develop insight into the attachment difficulties or developmental impairment as well as enabling exploration of new and growthful ways of relating.
- Working with difference and diversity means to be open to encountering and working with the known as well as the unexpected. In many cases of working with diversity the therapist is open to working with issues of development, meeting the child or young person at whatever stage they are at and working with difference in race, identity, class, disability, religion, age and so on (Burnham, 1992; Moodley, 2005).
- The theoretical concepts of holding and containing, which in therapeutic process align with the parallel of how a mother allows a child to express emotion whilst keeping them safe. In therapeutic practice, the therapist thus provides a similar function in working with the child or young person's projections of painful, angry, unbearable feelings or experiencing, and returning them to the child in a modified, contained way. Through this way of working, the

client learns to think through and understand their feelings and emotional experience as well as learning to contain their own emotions (Finlay, 2015). The concepts of *holding* (Winnicott, 1953; 1971) and *containment* (Bion 1959; 1962) thus have immense value in relational work with children and young people, not only in providing a space where the individual can learn to emotionally regulate, but also in providing a reparative and facilitative environment.

- The section on love and neurological development aims to further the understanding of the link between neuroscience, neurobiology, child development and developing appropriate therapeutic interventions that facilitate therapeutic growth. In line with this it can be concluded that as a good loving relational attachment with primary caregivers can contribute to positive neurological development, therapy can also contribute to neurological development and change in the client and therapist (Joseph, 1999; Cozolino, 2010; Gerhardt, 2015; Paul and Charura, 2015).
- The importance of play and creativity is highly valued in considering the development of children and young people; thus, is to be also highly valued in therapeutic practice. For example, as drawn from the assertions of Klein, who postulated the importance of play in symbol formation in the development of the ego (Klein, 1930); or the arguments of Vygotsky (1966), which highlighted that from the point of view of development, the creation of an imaginary situation can be regarded as a means of developing abstract thought and is the first step to a child's ability to use objects creatively, thus enabling freedom to explore unconscious and conscious material in relation to or in reaction to experiences.

In considering the perspectives I have covered in this chapter, it is evident that the relationships between attachment experiences, intersubjectivity and development are incredibly complex, and warrant further exploration.

Case Studies



Bella is a 15-year-old who presents referred from her class teacher. She is reported to be quiet, withdrawn and recently tearful when asked how she is. She has lost a lot of weight and states she feels she is 'fat and just doesn't feel hungry'. In the most recent contact she has had with the teacher, the teacher noticed some superficial scratches on her skin, which Bella stated she did with a pencil sharpener blade a few days ago. She stated she does 'not have a good relationship' with her mother, and her father, whom she has contact with, left when she was 3 years old.

James presents to your consulting room following a referral from the head teacher. He has recently transferred from a local school to the grammar school following being awarded a scholarship. He states that he has been bullied and feels different, saying his 'parents are working class and [my] upbringing is very different from all the other children's upbringing' in his class. He states that he has a very good relationship with his mother and father. He also explains that he is worried that his parents and others may not accept him because he feels that he is 'a girl in a boy's body'.

Ibrahim and Ashna present with their 7-year-old daughter Yana for therapy. They state that they arrived from Syria 2 years ago and were granted refugee status in the UK. It emerges that they adopted Yana when she was 4 years old. They explain that when they adopted her she had been in an orphanage, having lost both parents 'in the war'. They describe that at the time she was much smaller than the other children and she used to 'make strange shouting noises'. They also said that they believed that she had epilepsy, but recently having started having more seizures, she has been given a diagnosis of non-epileptic seizures, which the consultant believes are stress-induced.

Key Learning



- Different theoretical and conceptual perspectives on child development and attachment have been presented.
- The impact and influence of attachment on physical, neurological, cognitive, behavioural, psychological, social, relational or emotional growth.
- The importance of attachment and its impact on development of an internal working model and capacity for relational patterns not just in childhood and adolescence but later in life.
- The importance and consideration of diversity.
- The parallels and learning that can be drawn between the child–primary caregiver relationship and the necessary conditions for development and the implications for the therapist–client relationship in practice.

Summary



How a practitioner works therapeutically with children and young people whose life experience has impacted on their development or attachment patterns will depend upon their professional setting and theoretical orientation (see Chapters 2–8 in this handbook). In this chapter I have thus:

- Summarised how the traditional psychodynamic and humanistic approaches conceptualise the person as coming into the world prewired, with a predetermined instinctual nature. The individual then encounters an environment that might encourage, facilitate, suppress, repress or distort this innate drive. In these traditional approaches there is the assumption that the individuals' development is driven by, and is a response to, intra-psychic, innate

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tendencies and environmental needs. However, within a relational and attachment approach it is accepted that there is still an inner drive but this drive is more focused towards fulfillment in relation to others (Erskine, 2015; Finlay, 2015; Paul and Charura, 2015).

- Primary attachment experiences are central to the development of internal security and influence the development of an internal model, personality, sense of self, the capacity to relate to others and identity development. Thus, it is generally accepted from a relational perspective that as humans we are motivated by a need to relate. From the moment we are born our phenomenological (subjective) worldview and sense of self are grounded in and developed through our relationship with others. This can be illustrated in relational psychoanalytic, intersubjective, object relations, cognitive, humanistic, existential, gestalt and transpersonal perspectives on human development.

Furthermore genetic dispositions and the socio-cultural environment in which we live influence further how we develop (Meaney, 2010). Thus, in relation to implications of attachment and development for therapeutic practice I note that:

- For those working with individual children/young persons or parents and family systems, understanding more about developmental concepts, attachment theory, the importance of love and diversity enables a number of things to occur. It enables them to explore how the family system or parent–child relationship could have contributed to psychological and emotional vulnerabilities the child or young person is presenting with. It also allows for curiosity and exploration of how the family and parent–child dynamics may be unintentionally supporting or maintaining the developmental, emotional or relational presenting difficulties. This will enable us as practitioners to be more competent in our work, thus minimising possibilities of unintentionally missing presentations that may require safeguarding protocols to be activated.

In addition:

- Understanding the centrality of attachment theory, developmental concepts and the importance of love in working with children and young people has further implications for practice. It opens therapists and practitioners up to an appreciation of how counselling and psychotherapy can offer a reparative space and process for working with often very distressed individuals.
- It can be difficult to witness pain and hear the experiences of children and young people who have been neglected, abused or traumatised, or whose life experiences have resulted in disrupted childhoods. Thus, it is important to ensure that when working with this client group we make sure we engage in support for ourselves, self-care and access regular good supervision.
- It is also important to ensure that we are aware of developmental and attachment impairments when working therapeutically with vulnerable children and young people. These may present in cognitive, behavioural, psychological, social, relational or emotional problems.

Discussion Questions



Some of these discussion questions, as with all personal development work, may be upsetting, so make sure you are well supported if you choose to answer them.

1. Think about your own childhood experience; write down or reflect on your own account of your development. How would you describe your own attachment pattern?
2. How well do the descriptions of how development and attachment is conceptualised in the different theories noted in this chapter fit with your own experience? What is your critique?
3. Can you reflect on the case studies presented and explore your thoughts in relation to development and attachment? What feelings emerge in you? What were the challenges? What can the therapeutic relationship offer? Consider issues of difference and diversity.
4. What support do you have in working with children whose developmental process and attachment have been disrupted?

Develop Your Skills



1. Write down your understanding of child development from the viewpoints of a couple of theoretical concepts different from your own orientation of practice/training.
2. When do you think it would be appropriate to refer a child or young person to a specialist service different from your own, or when is it not appropriate to offer a therapeutic intervention?

Further Reading



Gerhardt, S. (2015) *Why Love Matters: How Affection Shapes a Baby's Brain* (2nd edn). London: Routledge.

Now in its second edition, this well written book is an accessible read and focuses on the power of love and attachment.

Charura, D. and Paul, S. (2015) *Love and Therapy: In Relationship*. London: Karnac.

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This text, with contributions from a wide range of contributors interested in love and attachment, addresses critical themes of love, attachment and therapeutic process.

Cozolino, L. (2010) *The Neuroscience of Psychotherapy: Building and Rebuilding the Brain*. New York: W.W. Norton.

A useful text for learning more about the neurological impact of attachment as well exploring perspectives on the reparative power of psychotherapy.

Online Resource

BACP website: www.bacp.co.uk, especially the BACP Children and Young People.

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