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# Treatment Together

WAYS ATTACHMENT BASED PARENTING CAN IMPROVE MOTHER  
AND CHILD OUTCOMES IN TREATMENT FOR SUBSTANCE USE  
DISORDERS

# ATTACHMENT THEORY

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- Originated from John Bowlby who worked with maladjusted and/or delinquent children
- Mary Ainsworth, observed and made connections between maternal behaviors and child behaviors and responses
- *Strange Situation Procedure*, a technique that continues to be widely used to classify behavior patterns in young children
- *The behavior patterns were broadly classified into one of two attachment styles: Secure or Insecure*
- A secure attachment allows the child to feel comfortable exploring the environment, which is critical for cognitive, social, and emotional development
- Young children tend to have one primary attachment figure, and that the degree of attachment security with that figure is often reflected in later relationships
- One of the most important predictors of healthy development in children is a secure attachment relationship between the child and primary caregiver

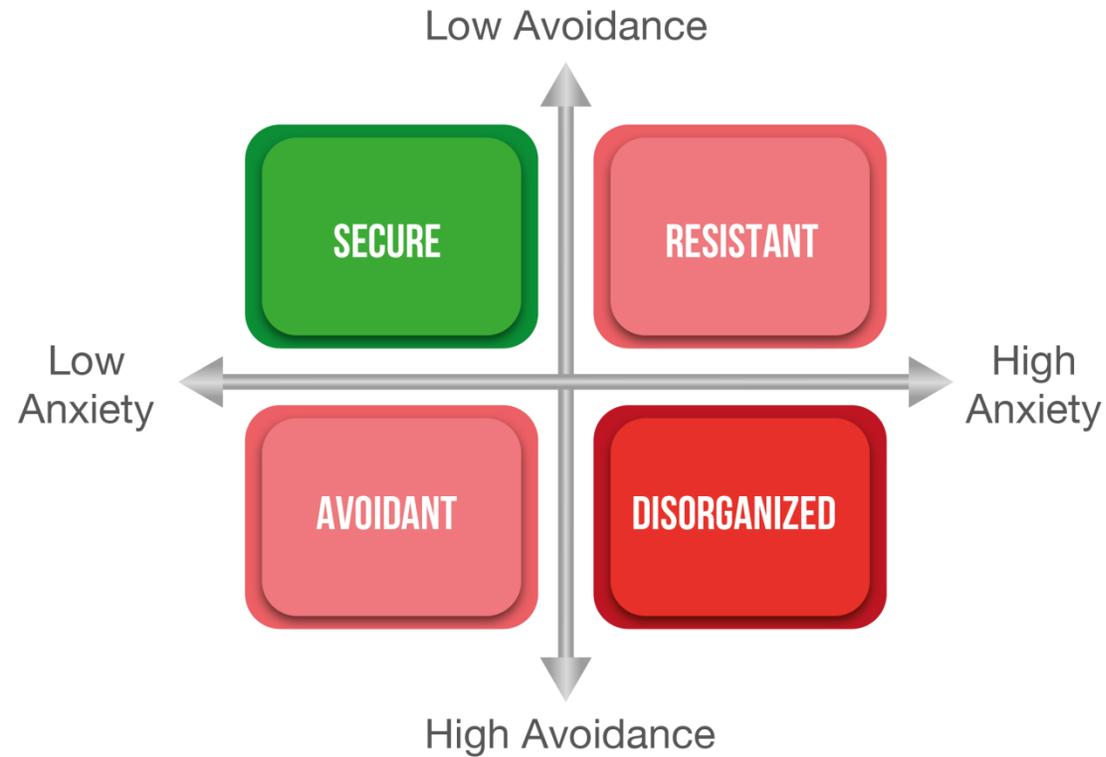
# UNDERSTANDING ATTACHMENT

- The connection between secure attachment as an infant and later outcomes, is one of the primary reasons that attachment theory is of great relevance to those who work with and treat those who have substance use disorders
- *Substance use is often a consequence of insecure attachment, in an effort to avoid and/or ease the psychological pain and discomfort*
- Internal Working Models (IWMs) are the mental filters through which the child views and interacts with the world
- According to attachment theory, the connections between early attachment style with a primary caregiver and longer term outcomes are explained by IWMs that children form based on repeated experiences with primary caregivers over time
- Securely-attached infants would develop a “secure base script” that explains how attachment-related events happen – for example: “When I am hurt, I go to my mother and receive comfort”
- Children with an insecure attachment and an IWM that says that the caregiver will be unavailable and/or rejecting when the child needs him/her may develop a chronic activation of the physiological stress-response system



# ATTACHMENT STYLES

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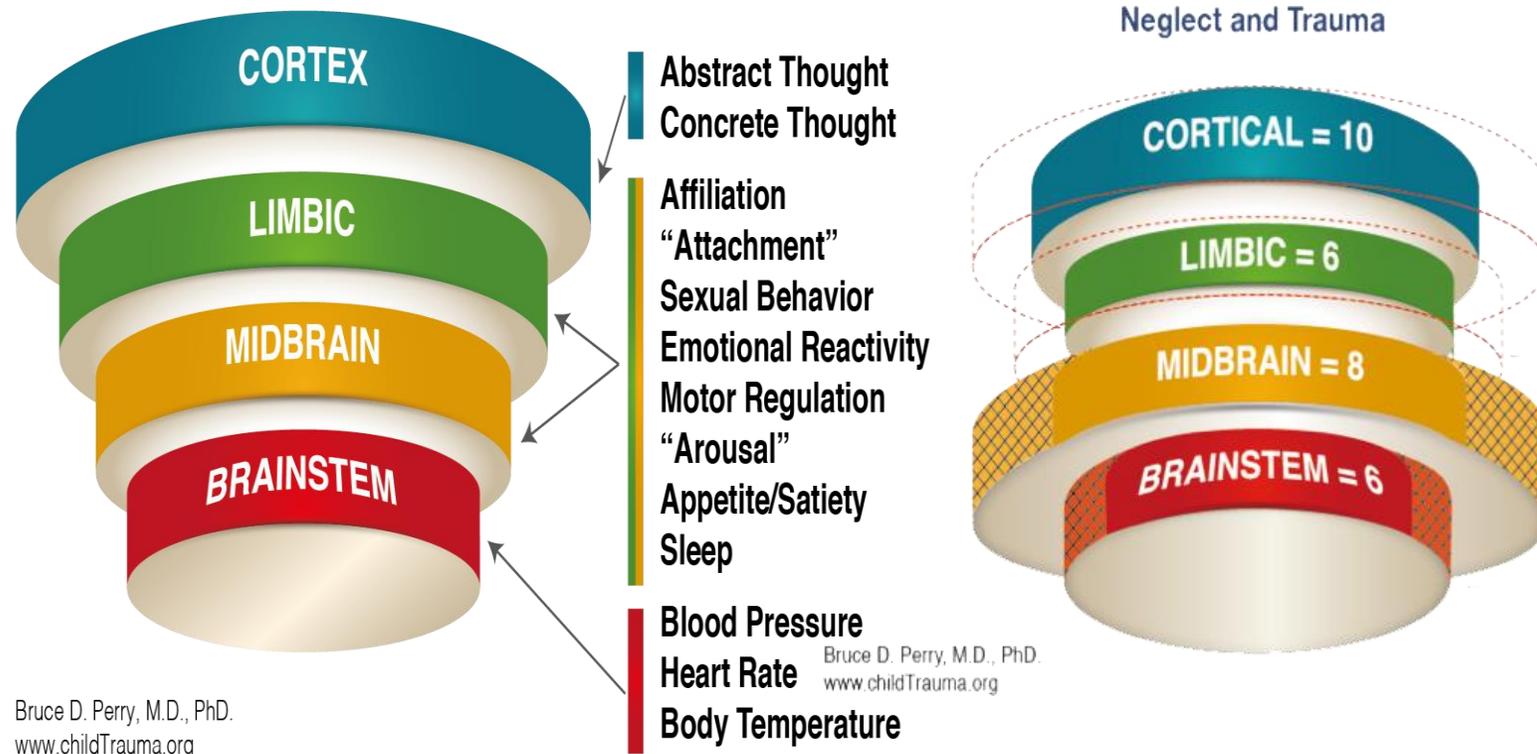
# RELATIONSHIP BETWEEN NON-SECURE ATTACHMENT AND SUBSTANCE USE

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- Having been abused as a child is an important risk factor for abuse of one's own children
- There is a high incidence of abuse during childhood among women in treatment for substance use disorders
- maternal substance abuse in particular is one of the most common factors associated with CM
- Mothers who have substance use disorders have higher incidences of hostile attributions and inappropriate expectations of child behavior as well as repeated disruptions in their parenting behaviors
- These disruptions can create a negative effect on the parent–child relationship, as evidenced in the increased rates of insecure attachment in children who have parents with substance use disorders

# TRAUMA AND THE BRAIN

- The brain has a “bottom-up” organization
- Neurons and connections change in an activity-dependent fashion
- This "use-dependent" development
- The brain is most plastic (receptive to environmental input) in early childhood
- With trauma and neglect, the midbrain is overactive and grows in size while the limbic and cortical structures are stunted in growth



# PARENTING INTERVENTIONS

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## Parenting Interventions: Common Characteristics of Effective Parenting Programs

Formal parenting interventions that are supported by research tend to have common characteristics, including:

- Behavioral parent training

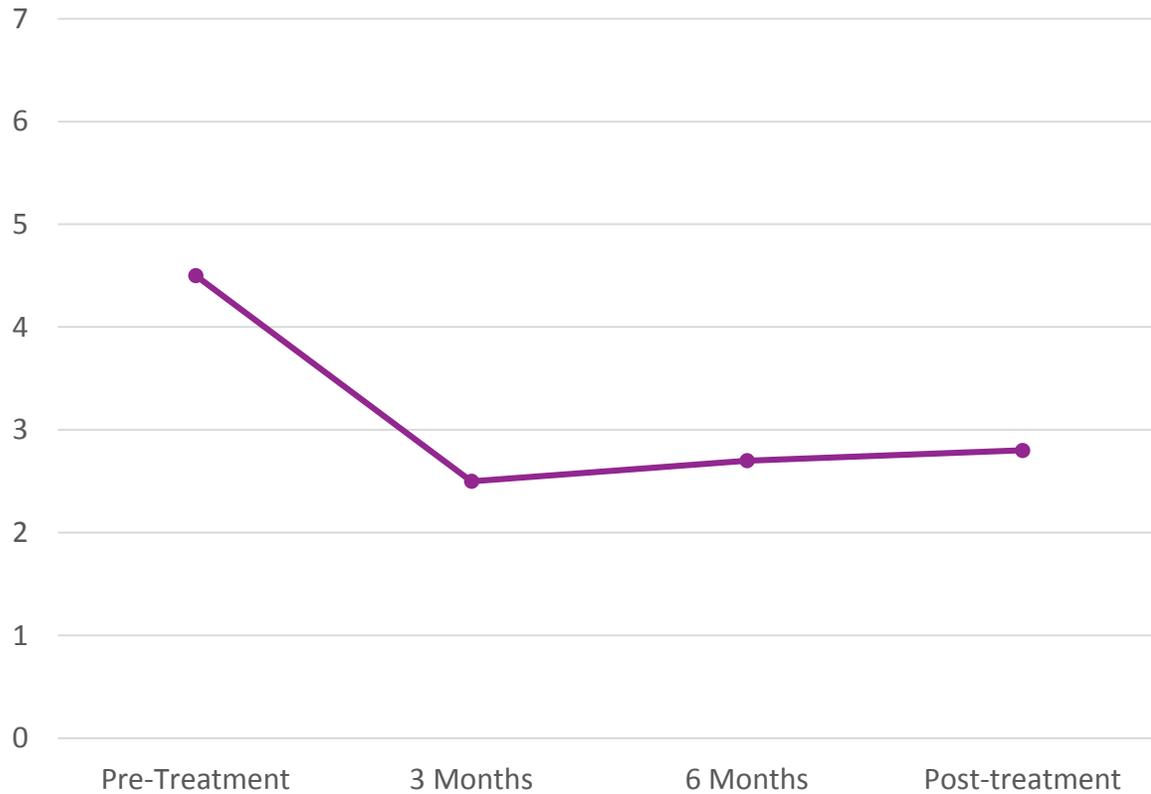
- Skills training

- Family therapy

- In-home family support

# OUTCOMES FROM UNC HORIZONS

Mean Total Score on Parenting Stress Scale  
N=57



## Child Protective Service Involvement:

- Outpatient women and children who complete the program: 75% of families had positive changes (e.g., closed cases, children reunited)
- Residential women and children who complete the program: 95% of families with cases had positive changes (regained custody, cases closed)

# IMPROVING ATTACHMENT TO BREAK THE CYCLE

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## Parenting Interventions

### 1) Triple P (Positive Parenting Program)

- Shown to work across cultures, socio-economic groups, and in all kinds of family structures

#### Triple P: Positive Parenting Program 5 Steps to Positive Parenting

- 1. Create a safe, interesting environment (keep children busy so that they do not misbehave; give them access to interesting, safe activities)**
- 2. Have a positive learning environment (praise children when they do things you like; be affectionate; speak nicely; share your experiences with them)**
- 3. Use assertive discipline (set clear rules, be consistent, and use age-appropriate consequences; praise good behavior).**
- 4. Have realistic expectations (don't expect more or less than your kids are capable of doing, and remember that everyone makes mistakes- no one is perfect).**
- 5. Take care of yourself as a parent (talk to other parents, exercise, take breaks, etc.)**

# FINAL THOUGHTS

- Without treatment, children who are maltreated are at an increased risk to become adult with numerous mental health issues, and at increased risk to perpetuate abuse on their own children.
- To address this paramount, intergenerational, public health issue, researchers and practitioners must continue to test parenting programs that address the parenting factors associated with abuse.
- Although the attachment field has made substantial progress over the past 20 years in developing and evaluating evidence-based attachment programs the availability of effective, group-based attachment programs has lagged.
- Given the well-documented importance of attachment security for healthy, long-term developmental outcomes for children, having attachment-based parenting programs that are manualized with easy-to-use formats is critical for broad dissemination.



# UNC Horizons

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