Addiction as an Attachment Disorder

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A little bit about me...

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Objectives

- Integrate attachment perspectives with our current understanding of neurobiological mechanisms of addiction

- Understand elements in perpetuation of intergenerational attachment styles as it relates to addiction

- Make the case for attachment-based SUD treatment
Models of Addiction Etiology Abound

- Moral
- Agency/ Temperance
- Psychoanalytic
- MN Model
- Social Learning
- Medical/Disease
- Sociocultural
- Biopsychosocial
Which model best explains addiction?

- Does not fully consider relational dynamics
  - Interpersonal relationships seen as additive or decremental
  - Limited exploration of internal constructs

- Lacks support for healthy interpersonal development
Family Programming in Practice

- Psychoeducation heavy

- Does not include parental/caregiving education or support
  - Very limited inclusion of children (particularly young children)

- Little focus on interpersonal dynamics within families

- Skills developed focused is unidirectional
Families with Substance Use Disorders

- Adverse interpersonal traumatic experiences in childhood and adolescence (ACE’s) heighten risk for adult psychopathology\(^1\)
  - High co-occurrence of ACE’s with SUD\(^2\)

- Compromised core self-regulatory capacities in childhood leading to low threshold of experienced psychological distress\(^3\)

- Disturbances in individuals’ mentalizing abilities potentially increases vulnerability to SUD\(^4\)

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1 Heleniak, Jenness, Vander Stoep, McCauley, & McLaughlin (2016)
2 Strine et al. (2012)
3 Meaney & Ferguson-Smith (2010)
4 Allen, Lemma, & Fonagy (2012)
Attachment key to understanding SUD

- Attachment underpins interpersonal and neurobiological vulnerabilities
- Useful framework for understanding complex dynamics of SUD within families
- Decrease individual’s vulnerability to development of SUD and persistence of SUD symptoms
Attachment Overview

- Foundations in Psychodynamic Theories

- Draws from work of Bowlby & Ainsworth
  - Bartholomew & Horowitz (1991) further extended understanding of attachment close interpersonal relationships

- Impact of attachment style is broad and enduring
Psychodynamic Hypothesis of Addiction

- Underdeveloped ego-functions (i.e. executive functioning)\(^1\)
  - Reality testing
  - Stimulus barrier
  - Judgment
  - Impulse control
  - Synthetic-integrative function

- Immature defense mechanisms
  - Underdeveloped ego coupled with stressful or demanding environment hinders proper development of superego
  - Defense Mechanisms of denial, idealization, and projective identifications

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\(^1\) Zucker, Heitzeg, & Nigg (2011)
Object-Relations - Are you mine?

- Child’s internal world imbedded with mental representations or internal objects

- Addiction is consequence of poor object relations
  - The ”nameless dread”
  - External regulator (i.e. substance) to emulate southing qualities of “good object” and wall-off distressing “bad object”

1 Kernberg, Diamond, Yeomans, Clarkin, & Levy (2008)
Attachment Model of Addiction

- Internal working models of expectations and attributions about caregiver, child (self), and dyadic relationship

- Representations guide behaviors, attitudes, and expectations within caregiver-infant relationship

- Attachment representations continue to be revised and expanded to adapt to increasingly complex relationships, environments, and danger

1 Bowlby (1988)
2 Fonagy, Gergely, Jurist, & Target (2004)
Attachment Styles

- Secure Attachment
- Dismissive Avoidant
- Fearful Avoidant
- Anxious Preoccupied

Attachment styles underlie capacities for emotion regulation, coping skills, and interpersonal relationships.

Insecure attachment styles broadly contribute to SUD vulnerability.

1 Bartholomew & Horowitz (1991)
Is there more to this...?

- Externalizing behavior potentially associated with fearful-avoidant and preoccupied attachment styles\(^1\)
  - Possibly lead to more risk taking behavior with regard to substance use

- Internalizing behavior potentially associated with fearful and dismissive avoidant attachment style\(^2\)
  - Use of substances as a way of regulating negative emotions

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1 Zucker, Heitzeg, & Nigg (2011)
2 Hussong, Jones, Stein, Baucom, & Boeding (2011)
Neurobiology of Addiction and Attachment

- Addiction and Attachment have overlapping neural pathways\(^1\)
  - Mesocorticolimbic and Nigrostriatal dopaminergic systems (motivation and reward processing)
  - Oxytocinergic system (mood, self-regulation, and social behaviors important to attachment)

\(^1\) Buisman-iJilman et al. (2014)
Neurobiology of Addiction and Attachment

- Chronic drug use coopts the same neural reward pathways that are involved during parenting\(^1\)
  - Decreased salience and pleasure in caregiving
  - Increased stress activation (low threshold)
  - Leading to increased risk of relapse in the parenting role.

- System adaptations resulting from prolonged substance use leads to impaired executive functioning and skewed reward processing
  - Deterioration in capabilities for regulating difficult emotional states \(^2\)

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\(^1\) Jones (2008) ; Rutherford & Mayes (2017)  
\(^2\) Seelye (2015)
Addiction seen as impairments of executive functioning that thwart effective self-regulation in face of internal or external stressors\(^1\)

- Compromised neural activity
- Underdeveloped ego-functions and defense mechanisms\(^2\)

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1 Volkow et al. (2011)
2 Kernberg et al. (2008)
Intersection of Neuroscience and Attachment Theory

- Motivation to persist in substance use associated with aberrant reward-processing \(^1\)
  - Compromised neural activities involving reward processing
  - Pleasure principle overriding reality principle

\(^1\) Loose (2002)
Intersection of Neuroscience and Attachment Theory

- Both stress importance of internal subjective processes\(^1\)
  - Associative learning
  - Mental representations of “good” and “bad”

\(^1\) Waska (2006)
SUD Diagnostic Presentation

- Tolerance (increased amounts or diminished effect)
- Craving, urges, strong desire to use
- Withdrawal (characteristic w/d or w/d avoidance)

- Substance taken in larger amounts or for longer duration than intended
- Ongoing desire or unsuccessful desire to cut down
- A great deal of time spent seeking, using, or recovering from substance
- Failure to fulfill obligations (e.g. work, school, home)
- Ongoing social or interpersonal problems
- Giving up social, occupational, or recreational activities
- Use in physically dangerous situations
- Use despite ongoing knowledge of physical or psychological problems

1 American Psychiatric Association (2013)
Intergenerational Transmission of Attachment

- Attachment representations determine inter- and intra-personal conceptualization of relationships, environment, and danger or adversity

  - Transition to parenthood/caregiving is period of reorganization of self

  - Trigger memories and experiences associated with childhood adversity

1 Zucker, Heitzeg, & Nigg (2011)
Intergenerational Transmission of Attachment

Pervasiveness and persistence of these representations permeates caregiver-child interactions foreshadowing intergenerational transmission of attachment styles

- Hypothesized to correlate with familial SUD vulnerability
- Attuned parenting is essential for healthy development of infant brain and biological system\(^1\)

\(^1\) Zucker, Heitzeg, & Nigg (2011)
Development of Secure Attachment

- Secure attachment requires sensitive caregiving
  - Capacity for sensitive caregiving potential predictor of relapse for mothers engaged in addiction treatment.

- Understanding child’s state of mind leads to responsive care¹
  - Attend to needs
  - Appropriate response to affective states
  - Construct child’s mentalizing capabilities

- Caregiver mental representation of current caregiving experience²
  - Parental capacity to attune to themselves and caregiving
  - Differentiate between their own affective states and those of the child’s
  - Greater caregiving flexibility and accommodation

¹ Bost et al. (2006)
² Sokolowski et al. (2007)
Components of Sensitive Caregiving

- Mental representations
- Mentalizing Abilities
- Reflective Functioning
Mental Representations

- Internal working models or dynamic systems of expectation and attributions about the environment, the self, and others

- Impacts caregiving behaviors and sensitivity (attunement)

1 Alvarez-Monjaras, McMahon, & Suchman (2019)
Mentalizing Abilities

- Parental self-mentalizing enables the parent to recognize, understand and thereby regulate her own mental and emotional distress and its potential impact on the child (i.e. self-focused mentalizing)

- Leads to co-construction of child’s mental representations

1 Alvarez-Monjaras, McMahon, & Suchman (2019)
Reflective Functioning

- Caregiver ability to understand a child’s mind is vehicle whereby their attachment organization becomes highly relevant to child’s sense of self and of his relationship to others\(^1\)

- Observable and measurable manifestation of mentalization

- Reflective functioning ability may predict success in transition to parenthood

\(^1\) Alvarez-Monjaras, McMahon, & Suchman (2019)
attachment-based interventions premise that, as the quality of parental self-focused RF, child-focused RF, and mental representations of caregiving improves, improvement in maternal caregiving sensitivity and child attachment security will follow.

Suchman et al. (2017)
Attachment for Recovery

- Primary caregiver with SUD poses threat to quality of sensitive caregiving

- Insecure attachment styles increases vulnerability to emotional dysregulation and relapse

- Recovery resilience possibly improved from increasing reflective functioning, mentalizing capabilities, and moderating mental representations
Implications for Treatment

- Increase client’s capacity for sensitive caregiving through therapeutic relationship
- Exploring client’s attachment styles as it relates to their SUD
- Supporting transition to parenthood
Thank You!