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ATTACHMENT DEVELOPMENT IS "IN"

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Abstract: The current focus of research in the discipline of child and youth development is upon attachment development. In the fields of child and youth care practice, efforts are beginning to apply these recent findings to care approaches. In order to sustain the trend, this article outlines concretely, and step-by-step, a study of attachment development and, subsequently, the application of this knowledge to the day-by-day practice of the care of children and youth having to live away from their families.

ATTACHMENT DEVELOPMENT AS CURRENTLY CONCEIVED

Attachment formation as a linking together between child and parent or care receiver and caregiver has really always been recognized. It is envisaged as a basic human process; profound, powerful, yet so simple as it maps the development of children, youth, and adults whether they are at home or away (Maier,1990). Scientific studies of attachment development document actual accounts of almost fairy tale quality. In fact, you the readers no doubt can recall that your grandparents as well as you knew long ago about this almost mystical phenomenon of bonding and growth. Frequently, scientific breakthroughs have been established by folk wisdom and cultural practices far ahead of actual scientific "discovery." (Yes, folk wisdom is still so wise!)

Attachment theory is currently moving into the forefront (Rutter, 1979; Scarr & Eisenberg, 1993; VanderVen, 1992), replacing earlier preoccupations with psychoanalytic, ego psychology, behaviour modification, and cognitive formulations. Such a trend is in tune with present-day concerns about the quality of interactive processes for furthering satisfactory life experience (Corter, 1981). This paradigm is also consistent with the alteration of a prevailing preference toward contextual (non-linear) thinking as contrasted to a linear mode; that is, away from a preoccupation with the preceding formulations, characterized by "Why?"—to the "What?" (the circumstances associated with interactions within a situation). Recent scientific explorations have bolstered earlier intuitive know-how. To cite a few, in empirical research: Ainsworth,1982; Booth, Rose-Krasnor, and Rubin, 1991; Bretherton and Waters, 1985; Reite and Field, 1985; Rutter and Rutter, 1993; Weiss, 1982; and Werner and Smith, 1982; as well as powerful conceptual formulations by Ainsworth, 1985; Bowlby, 1982; Bronfenbrenner, 1979; Delancy, 1991; Maier, 1990; Rutter, 1979; Singer, 1992; and Werner and Smith, 1982. In addition, there is substantial ground-

ed-practice experience as models (Brazelton,1979; Curtis, 1991; Fahlberg, 1990, 1991; Hawkins, 1993; Krueger,1994; Maier,1991, 1992a; McElroy, 1988; VanderVen, 1992).

The following pages serve to familiarize ourselves step-by-step with this psycho-socio knowledge about attachment development. I will later include the application of this more recent comprehension of human development to the practice of care of children and youth within the family or alternate forms of care provision. Readers are alerted to the underlying assumption of attachment development: it relates to life development regardless of setting and social labelling. It is germane to initial as well as later life development along the spectrum from infancy through adult life. It is recognized as a pivotal but not the sole process of universal human development. It is basically sensitive to the diversity of human nature and experience and incorporates genetic, maturational, gender, experiential, and environmental phenomena (Ainsworth, 1985; Booth, Rose-Krasnor, & Rubin, 1991; Bowlby, 1982; Bronfenbrenner, 1979; Scharer, 1990; Sroufe, 1978).

A familiarity with the essence of attachment development is particularly crucial because it has been established that almost all youngsters presently living away from their birth families have inadequate or maladaptive attachments. They are usually acknowledged risk."Nevertheless, they have a good chance for a promising future, if they can find selected alternate persons who can stand by and care actively for them (Hirshon, 1987; Werner & Smith,1982). Such later positive attachment connections can be readily traced to the quality of care experience in foster care or other alternate forms of group living.

ATTACHMENT DEVELOPMENT DEFINED

Attachment development can be broadly defined as *lasting psychological connections between human beings as well as their anchorage in their ongoing community*. Although attachment is an abstract construct, it embodies powerful visible human connections reflecting an *interactive, reciprocal* process. Most important in the emotional bonds between care receivers and caregivers are feelings of attachment and mutual personal connectedness, goodwill, and a sense of a continuous presence between the attached persons even while they are physically apart. Here is the"heart" of genuine attachment. Attachment gives one the assurance of the other's continued presence and support, although they might not be in immediate touch with each other. Attachment continues to persist over space, time, and other ongoing associations, fostering independent autonomous existence and the slow emergence of a sense of self.

The forces of development can probably be best, explained and understood by turning to our own experiences. If we were to select one person who gives particularly significant meaning to our own life, we would likely recall a parent, a partner, a close friend, or a counsellor. We could quickly recognize the strengthening power of such a person, even while apart from him or her. When we feel assured of the

person's closeness, we may notice that we remain open to learning, attending to an ongoing task, or risking new ventures. However, if a person should lack a steadfast attachment, one's openness to learning or ability to be fully engaged tends to be hampered and lacking in energy investment. In general, comfort with regard to one's attachment seems to spark our ongoing emotive-socio life experience.

AITACHMENT DEVELOPMENT THROUGH THE LIFE SPAN

From infancy on throughout life, attachment issues may reoccur in initial significant encounters between two persons. Unlike love, attachment cannot emerge or disappear instantly; it requires a process of reciprocal evolvement. For infants a caregiver (parent or alternate) tends to reach out, and most of the time the child independently demands proximity. Infants are born with a biological propensity to behave in ways that promote proximity and contact with their mother figure (Rutter, 1919). We can cite the infants' cries, presumed searching looks, and their very state of naked helplessness. It remains an open question who reaches out first in creating a mutual interactive process with roots in these initial encounters. Interestingly, it has been suggested that "a responsive infant can generate parental feelings of efficacy" (Werner & Smith, 1982, p. 57).

Most basic is the contention that humans as well as many mammals, e.g., monkeys (Rutter, 1979), have an innate tendency to remain close, near to the primary caretaker (Singer, 1992). These spontaneous thrusts for closeness are evidenced in the automatic clinging, cuddling, and repeated demands for immediate body contacts of the young beings. This need for closeness is also reflected during the formation of potential new attachments later on in the life span.

To emphasize that striving for proximity is a fundamental human quality, we need only to look at the ordinary requirement for infants and young children to be held or at least be very near to the caring adults. This need is manifested throughout life and proximity-seeking for nurturance, because finding direction and protection serves effectively as a means of survival for humans and other mammals (Delancy, 1991). The desire to hold on (literally or figuratively) is neither "good" nor "bad"; it is *human*.

Mutual involvement with a caring person becomes, for the infant after a few months, a cyclical experience. It is either encouraged or thwarted by the infants' reflexes and endowed alertness (Reite & Field,1985) as well as such environmental factors as nutrition, physical comfort, and the caregiver's own well-being and cultural attitudes toward her or his own course of child rearing (Werner & Smith, 1982). Inherent in those interactions is that a sensitive, caring person gives "the child the feeling of having control over her behavior [an awakening of self]. The child builds up expectations that the caregiver's behavior is predictable and can be influenced" (Singer, 1992, p. 124). These interactive childhood experiences are moderated by variance in child-adult interactions and ecological circumstances (Bronfenbrenner, 1979). Nevertheless, the commonality is that attachment development has its roots in genuine behavioural encounters, charged with the effect of sensitive emotional mutuality.

These processes combine social learning and emotional openness to the interactions. The early months of infancy can be conceptualized as the "pre-attachment" period. In everyday life any sensitive, sufficiently involved caregiver can assume these functions.

Early Childhood

By 6-12 months of age the quality and meaningfulness of the experience, especially conversational interactions, seem to be crucial rather than the sheer amount of stimulation per se (Rutter, 1979). An attachment to a specific person emerges. The infant becomes a "child" with discriminating favouritism for his or her caring attending person. This pattern turns separation into a complex issue. The experience of being left is intimately tied to the factor of continuance and "what comes next?" If alternate attachment prone persons are "on deck," transfer is less of a concern. Other attachments are apt to develop with the person who brings comfort to the care moments. Sensitive responses foster potentially secure personal bonding. A cyclic, goal-directed process and a regular feedback system make for a satisfactory ongoing process and for wider attachment formations. This phenomenon seems to occur more readily in large households and may stretch over several generations (Werner & Smith, 1982). In a like manner, potentially solid social contacts emerge within the contemporary social scene where we find, in addition to the immediate family, that other persons may serve as attachment figures: day care workers, teachers, counsellors, neighbours, older peers, and siblings, who take an active interest in the young child (Hawkins, 1993).

A curious contradiction to the innate demands for closeness emerges in infancy and becomes more pronounced in early childhood and subsequently throughout a person's whole life span. Humans manifest a tendency (a life force) "to counteract 'safe' proximity with an urge to explore, to discover through trial-and-error and through play what there is beyond their familiar nurturing experience" (Singer, 1992, p. 123). Around the age of three a child moves in an opposite direction with a strong pull toward independent actions of his or her making, if the child has the feeling of assurance of the safety of the caregiver's lap when needed. Naturally, the child is apt to test this "insurance policy" from time to time. In short, human beings proceed with two opposite pulls: (a) to maintain proximity to their nurturer, and (b) to strike out on their own, to explore, and to prove themselves beyond their known and predictable life spheres.

Research has taught us that "attachment frees" (Maier, 1987, p. 121). Children's solid experience of dependency upon the central adults in their lives assures them of these persons' lasting interest and support while away from them. Their attachment persons are in a sense with them even while not present. These children can be left without much fuss and additionally they themselves find it safe to leave temporarily and venture out, exploring and risking new situations, just as Beatrix Potter's Peter Rabbit once felt sufficiently attached to leave his mother for Mr. McGregor's garden (Potter, 1982).

This newly acquired urge to move from the known to unknown is a familiar pattern seen in behaviour such as testing TV buttons, tasting fluffs of dust, reaching up to grasp, and validating new experiences (including adult reactions to new ventures). The assurance of a sound, mutually satisfying, anticipated "togetherness" combined with the caring person's message, "You can try on your own even with natural setbacks," evidences the position of the caring adult as a person of trust for safe dependency, a source for control and direction when needed (Curtis, 1991). Toward the end of the first year, trust for care and trust for control emerge. By trying out their own actions, children subsequently begin to locate and discover their own autonomy, building an early trust of self, including a budding conscience.

However, we need to keep in mind that development never occurs in a straight line (Bronfenbrenner, 1979). At times of stress, at unexpected turns of events, or when merely fatigued, the person representing attachment is much in demand. We note that anxiety and other forms of distress intensify the quest for attachment reassurance, temporarily diminishing play behaviour and repressing openness for learning (Rutter, 1979). Nurturing, especially physical incorporation (embrace, hand-holding, or full cuddling), may be urgently needed "medicine." In such instances the attached person may think that the child has slipped back months in their joint development. No danger! The more readily that calm emergency aid is applied, the quicker the youngster will be off on her or his own again. It is like shifting the car gear to a lower one in order that the car can master a sharp incline, with a reliance upon a different level of functioning. In human response, it is not regression when nurturing is sought. That very act of support provides hurdling help toward more adequate functioning.

In the development of attachment there is a transferable quality of the attachment experience. This experience of making connections opens or hampers opportunities for close contacts evolving toward broader social engagement (Fahlberg, 1990). The quality of attachment formation can be directly assessed by the strength a youngster senses that he or she has in the relationship with the chosen protector and ally. In actuality, it is the experience, the nature of their mutual interactions, that is paramount rather than the care person's repertoire of therapeutic or social skills.

Mid-childhood

During mid-childhood, roughly 5 to 12 years of age, secure attachment becomes particularly important. During those years the youngster becomes more and more involved in life experiences beyond home. It has been established that attachments lends greater freedom to progress apart from the immediate protective attachment person. Ordinary experience in school, with peers, on excursions, and a multitude of activities in the community build the readiness to transfer and relate to newly selected connections. All these build upon former foundations of attachment formation (Fahlberg, 1991; Sroufe, 1978).

In the foregoing, attention has been directed to an understanding that, in the course of attachment development, dependency is an essential ingredient. In fact, dependency is a natural, human, and desirable process. Dependency upon selected individuals early in life and on others (chosen as well as designated) later in life universally forms the "micro-network of our existence" (Sroufe, 1978, p. 50). Independent functioning is embedded in secure dependency during mid-childhood.

Adolescence

In adolescence, personal attachment striving tends to move from those who protect to those who are better in-the-know and perform more expertly among peers and adults in selected circumscribed areas. Attachments seem to cluster around two sources. The first is connections in terms of special personal relationships that assure life's demands as outlined thus far. Second, there is a thrust toward attachment to a communal base in order to attain social membership in one's immediate society. Personal closeness and community rootedness are at stake. Research reveals that youth and adults demand sustained secure personal connections and dependable community affiliation as a means of avoiding social isolation or loneliness (Weiss, 1982).

Adulthood

Much of what has been outlined thus far relates as well to attachment development in adulthood. The story is much the same at any point in one's life when there is occasion for new attachment formation or re-establishing earlier alignments. We need to be mindful that, initially, attachment formation was rooted in ordinary mutual behavioral experiences of engagement in an event of common interest. Casual encounters can blossom as personal emotional energy is invested. It is not too distant from a smile response from a caregiver to the infant's grimace as it struggles with stomach gas. An adult's sensitive response to another person as they encounter a joint dilemma may widen their mutual path. A developmental progression occurs from pre-attachment to a budding alliance when a chance acquaintance becomes a preferred friend.

As in the regular developmental progression, the strength of attachment is influenced by ongoing circumstances. In adulthood, moments of crises, fluctuations in health, or societal events may daunt or spurn the growth or development of new attachment relationships. "The actual thrust for dependent attachment is behavioural in the interest of safety and surviving [for child, youth or adult], and in this regard can never be outgrown" (Golden, 1980, p. 101). Through adulthood, attachment assurance provides the balance that allows the individual to be autonomous and self-reliant on the one hand, and dependent and trustful on the other (Fahlberg, 1990).

ATTACHMENT DEVELOPMENT REQUISITES-ATTACHMENT BEHAVIOURS

Attachment Development Requisites

As in the true fairy tale where the good fairy is always readily at hand with a welcome assist, so too in today's childhood: attachment is clearly anchored in the caring person's availability when needed. This readily-at-hand care person typically is there with a warm guiding hand, or a firm unconditional "no", or an attentive ear. Such assured readiness conveys a sense of worthiness and a trust that the individual doesn't have to go it alone. Most important in understanding and supporting attachment formation is that the process evolves out of small, often trivial, minute interactions. There are no grand behavioural schemes nor are there emotional ground rules; instead, connections emerge from such apparently inconsequential moments such as a spontaneous pat or wink of an eye, a casual embrace, a readiness to engage spontaneously, inclusion in joint planned fun activities, or finding pleasure in hanging out.

Rhythmicity, the force of joining together as in a dance, constitutes a powerful process for furthering mutuality and potential attachment opportunities. In this way, persons are linked together. This phenomenon may occur while marching for a cause, listening jointly to favourite music, throwing a frisbee from one to another, or feeling in sync while nodding silently to each other (Maier, 1992b). Such moments of togetherness provide occasions for both parties to learn from each other in casual exchanges with possibilities for eventual valuable bonding.

Attachment Behaviour

An essential component of "attachment theory" is the repertoire of behaviours associated with attachment formation. These are actions that enhance the striving for more personal connections between the persons involved rather than merely accounting for behavioural accomplishments (Ainsworth, 1982). In the literature they have become recognized as *proximity-seeking* and *distancing* behaviour. Although they are starkly different, each set serves to nurture attachment. Thus far no definitive research has been undertaken to discern the use of one as distinguished from the other. Proximity-seeking behaviours efforts recognizable for their mode of outreach. Illustrations include: holding on with eye contact, a welcoming posture, physical contacts, initiating conversation, and gift giving. Gifts can be akin to transitional objects (Maier, 1987). These proximity-enhancing efforts represent outreach from one person to the other, conveying, "You are worthwhile for me." And commonly there is a reciprocal response with an implied message, "And so are you for me."

Distancing behaviours such as turning away or walking or running away may be significant for denying the presence of the other. This series of behaviours may camouflage or deny connections and thereby negate the other's outreach; the in-

dividual may actually be unable to express a hidden desire for closeness. One vivid example comes to mind. At a junior high school dance teenagers often gather at opposite ends of the hall, eyeing the others but feigning indifference.

Interestingly, at moments of separation and leave-taking, proximity seeking behaviours are particularly acute and obvious. We often discern practices like intense embraces, handshakes, hand-waving, or extended goodbyes over the phone. These latter processes become particularly pronounced when an attachment appears either shaky or in a phase of early formation.

At moments of reuniting after long or even brief absences from each other, attachment behaviours become operative. They are significant for mutual assurance of a meaningful bond. Usually the attached persons need a "dose" of proximating behaviours, especially physical demonstration of caring such as a squeeze or other symbolic reassurance that each is again "at hand."

Attachment formation requires a full utilization of connecting behaviours because they provide the building blocks for attachment development. These instances become especially important when attachment is in a crucial formative state or is perceived as endangered. We note that a caregiver's ready response to an infant's hunger cry is instrumental to a sense of eventual bonding for both. Other subtle activities like the experience of being emotional, consumed by listening to music together, sharing a mourning period, or being mutually engaged in the cheering section form core experiences.

VARIATIONS IN THE QUALITY OF ATTACHMENT

We have just learned that attachment behaviours, especially the range of proximity-seeking ones, enhance closer bonding. Careful observations of the constellations of these behaviours may reveal their nature and quality. Variations in attachment behaviours might alert us to the fact that attachment formation is in process but continuously varying rather than being constant. Even in the case of the most solid attachment developments, in moments of change such as temporary parting or some minor circumstance (e.g., unwanted news from a landlord or welcome news about family), attachment connections are on trial and may require added attachment behavioural expressions. When a young child is unable to relax and sleep or partners receive emotionally laden news, these circumstances demand demonstrative proximity, assuring each other of their togetherness and that neither one has to go alone.

Far-reaching research has established that in infancy, childhood, adolescence, and adulthood, even securely attached individuals reveal momentary "dips" in their ongoing activity and energy output immediately after separation as well as at the point of reunification (Ainsworth, Bell, & Stayton, 1974; Ainsworth, Blehar, Waters, & Wall, 1978). In each of these diverse personal experiences they seek out behavioural, symbolized closeness, often with a strong clinging quality. Young children, for instance, will embrace or climb on the lap of their returning care person, stay

momentarily in the person's proximity, but after a brief period will return to their ongoing activity with a sense that "all is well" (Ainsworth, 1985). Briefly stated, even "normal" secure attachment requires moments of repair and mutual verification of the basic intimate relationship, and after many repetitions of such salutary experience, transfer of attachment becomes less of an issue (Ainsworth, 1985). After "independence," which actually requires acceptance of and dependence upon the norms and values of other intimates, is again a "system" of dependence.

Different processes of attachment behaviours are in evidence when there is a history of insecure, anxiety-prone, ambivalent attachment (Ainsworth, 1985; Crittenden & Ainsworth, 1989). Here we find individuals who insist upon added proximity, often severe clinging, in situations with young children where neither verbal assurance nor added physical togetherness can augment the uncertainty of leave-taking. Similarly, the caregiver's return does not produce solace nor create a learning experience. The "hurt" individual will, instead, unpredictably respond with aggressive anger against the returning person. At other occasions the child may respond by distancing as a denial of an acceptance of the reunification (Ainsworth, 1985). It seems that ambivalently attached youngsters are severely impacted by the recognized absence of their desired person. These individuals tend to be very much at a loss and display reduced energy investment in whatever they are engaged. They are unable to settle during this period of bereavement and "desertion."

There also seems to be another pattern of differential behaviours in which attached persons are essentially angry and at a loss for being without dependable attachment. Their behaviour seemingly creates minimum havoc and tends to be extremely puzzling. These youngsters most often show no overt reactions to the parting or return of their caregivers, implying an indifference to the status of their care (Ainsworth, 1985; Bretherton & Waters, 1985). As we examine these special patterns, there are at least three distinct clusters of interactions. They are: what has been defined as "normal" reoccurrence of very temporary proximity-seeking efforts (designated in the research literature as "b" group); individuals with anxious and ambivalent attachment formation ("a" group); and youngsters with strong anger and denial of their attachment strivings ("c" group). Recent research also located a fourth constellation ("d" cluster), but these findings are as yet too inconclusive to go into at this time (Rutter & Rutter, 1993).

At present we know that regular attachment formation has no linear developmental patterns. Development has its differential progression with ever-present loops of regenerations and contextual trials of loss and enrichments. Simultaneously, variations in attachment hint at the different reactions that identical experience might provoke. In short, a caregiver's well-meant greeting of, "Here I am again!" after a temporary absence might carry quite different meanings for various children or youth, and consequently arouse quite a range of reactions, thoughts, and feelings (Singer,1992).

Taking into account all these variations, it is still most essential to recognize that compensatory connections can be reconstituted. Rutter and Rutter most recently called our attention to the notion that:

> Attachment qualities in relationships are evident throughout life ... It appears that confiding emotional exchange may index attachment relationship during adolescence and adult life in a way that they do in early development.

They point out further that:

> [I]t seems that the experience of selective attachment [i.e., with the care worker] may in some fashion underlie development of a range of close relationships in adult life (friendships, sexual love relationships, and parent-child relationships) … Research findings suggest that to an important extent close relationships may compensate for earlier lags (Rutter & Rutter, 1993, p. 256).

APPLICATION OF OUR UNDERSTANDING OF ATTACHMENT

The preceding serves as underpinning for the following section: the application of this rich knowledge to the everyday practice of care work. This section addresses professionals involved in the daily care of children and youth as well as those active in administration and in policy formation within the boardroom or in government departments. The foregoing findings demand decisive changes in overall policy and approach for care provisions. Agency philosophy and structure require review efforts, along with endeavours to support innovative care interactions of staff working with the group care residents, their families, and communities. Care workers' daily activities are continuously impacted by that which their supervisors and administrators think and expect of them. Equally important is the elusive quality of openness allowing for real mutual engagement between youngsters and workers in everyday programs of group living. Care workers are here challenged to adopt new approaches in view of this recent knowledge; it is also applicable for foster parents, counsellors, and birth parents (Krueger, 1987, 1991, 1994; Maier, 1987, 1991).

It is important to remind ourselves of the earlier observation that individuals with limited or defused attachment development can be assisted to a fuller attachment formation when they have a renewed chance to experience nurturing, reciprocal relationships. Such "second chance" opportunity (Werner & Smith, 1982) will best occur within the context of child and youth care or foster care utilizing the workers' interactions in a group setting (Curtis,1991; Fahlberg, 1990, 1991; Krueger, 1994; Maier, 1987, 1992a).

We have learned that a fundamental factor affecting the likelihood of attachment formation is the elder person's constant availability and readiness to stand by.

In practice it would require that the worker would feel permanently free and ready to be actively at hand within a setting that structures, supports, and values such a range of involvement. Consistent availability within the young persons' frame of reference takes precedence over bureaucratic necessities. The children have to feel the adults' presence by their being on hand and actively conveying their pleasure and support in the youngsters' daily experience (Krueger, 1991, 1994). Being present is not enough: it means visible involvement in the children's or youth's daily lives far beyond the tasks of being supervisors or appraisers of their behaviour (Sorce & Emde, 1981).

In fact, the fertile ground for the highest sophisticated therapeutic work emerges from the subtle transactions of ordinary interactions. As in early childhood, so too in selective attachment development in later years, potential building blocks rest upon minute exchanges and experiences like sitting restfully next to each other, attending to a spontaneous snack of crackers with peanut butter, being spared a squabble or fight by a win-win intervention, assisting with homework, finding excitement or a way out as youngsters report successes or ever-present defeats. Above all we need to be discovered as the children's advocates, however bleak the immediate future looms at that moment. Care work transforms into pathfinding with hurdle lowering rather than hurdle maintenance entailing subsequent consequences (Maier, 1991; Powell, 1990).

Intertwined with active engagement of the minutiae of daily living are the challenges offered when the workers introduce enjoyable activities. Being together for fun could also include task-oriented routines such as leaf raking or a unit wash-down party. Workers have to be deliberately known for their sharing of enthusiasm and adding fun into their lives through lighter moments. It is not too difficult from earlier childhood interactions when spontaneous smiles, finger play, or a hilarious peek-a-boo added frivolous pleasures and emphasized the care person as a symbol of power for spontaneous pleasure. In the later stages of childhood an unplanned beanbag or ball toss, a struggle with a riddle, a quick decision to make cookies, to create music, to recruit others for a game of cards, and so much more, are all authentic opportunities for attachment while producing multiple moments of enjoyment. Care work means locating or creating such pleasurable occasions.

For a few moments let us set fun aside. Much of the care workers' efforts admittedly are directed toward dealing with troubles: troubles between the group members, strain in regard to necessary daily commitments, tension with staff, difficulties with people in the other units or community, and the struggles and conflicts each youngster carries with him- or herself over time. Here, as in early childhood, attachment development finds roots. The workers can offer genuine identification with the youths' struggles and readiness to stick with them through the ups and downs while searching for better ways. Most important is the challenge to steadfastly remain the children's rather than the establishment's advo-

cate. Here connections are made (Garfat, 1989)!

For attachment formation at moments of trouble there is a need to forego recourse to logical explanations, wishful thinking that "things will get better," or attempts to handily tax youngsters' guilt. We have to challenge ourselves to stand by the youngsters' feelings, appraising their emotional readiness for input. Experience tells us that during these critical moments, appeals to reason hardly find a taker. Moreover, reprimands by personal pleas or the impersonal bestowal of consequences tend to be perceived as scolding and personal rejection (another one on their long path of previous "outcast" roles). The stirring-up of guilt may unwittingly relieve the care persons of their sense of involvement while shifting the young person's emotion from personal investment to frustration and anger against the individual in charge "who just doesn't understand!!"

Interestingly, the kids seem to be right. "We just don't understand!" It is this mastery that is at stake if we want to promote attachment formation. A joint search for the ways change can come about while maintaining the youngsters' confidence is the task at hand. Then, possibly, a realistic review and an attempt to reinforce an emerging conscience might find a potential taker. The inevitable developmental progression, as in early childhood, can proceed on course and may possibly be implemented toward trust of care and trust of control with an eventual rootedness in trust of self.

It is timely to add that workers frequently find themselves on the spot when they themselves (like the youth in their care) are at a complete loss as to what can or should be done or whether there is a way out at that point. An honest recognition of the care persons' own frustration and identification with the youths' dilemma and sense of futility can be fruitful soil for building reciprocal connections—beginnings for promising attempts for a way out and closer attachment. The point is that each individual in his or her everyday life has to experience that another person is unconditionally invested in his or her well-being before he or she can expand emotional trust to the other.

Attachment behaviours on the part of the child and the worker have to be understood for their ramifications beyond the behavioural event, as a medium for furthering connections. For example, let us look at the workers' leave-taking with variations of goodbye gestures. The care persons are actually engaged in linking their shared present with possible anticipation for a joint future. Opportunities are evident in care work: "See you tomorrow," adding the relevant touch, "I want to know if you have any new riddles; I shall try to find a new one, too." On another day it may require acknowledgement of a rough day and the worker's commitment to return with new effort.

On a day-to-day basis, individualized and hopefully reciprocal responses are helpful to bridge connections, utilizing proximity maintenance attempts. In these interactions two dimensions are to be kept in mind: (a) Body language is a powerful dimension of one's communication, including the relevant mode of touch from a

casual wave of the hand to a hearty embrace or gentle pat. Let your body language accentuate what you want to convey verbally. (b) Reciprocity, the other's response, and the worker's response to it are all part of one exchange. A child's distancing or "thumbs down" response may challenge the seriousness of the worker's original statement. We suggest the worker is then obliged to deal with the sincerity and intent of her or his message of care.

Attachment behaviours within the context of connection building spell out for us the attachment formation demands. Many children, even over their protest, have to discover and must repeatedly have confirmed their craving for care through frequent experience. Trust of care is anchored in bodily care and, for them, in initial well-meant soft body contacts of handholding, a gentle squeeze, or possibly a backrub. These will confirm the natural pleasure of body experience akin to the fondled infant. As in early life, so later attachment formation outreach by the care worker enhances readiness for proximity. And when these interactions do occur they can be accentuated with relevant added attachment behaviours. This approach is illustrated when, for instance, workers ask for a response to the offer, "Give me five," comment favourably on a person's appearance, or cite a recent successful moment of togetherness with the child.

Other opportunities emerge on occasions such as signing off for the night or meeting anew in the morning. However, we need to remember that in belated attachment building, attachment behaviours are salient tools of the workers and they should also be valued as "tools" of the children in their efforts to solidify attachment strivings. Michael Rutter sums up the research in attachment formation at a later age, as follows: "Children can develop attachment later on but they will do it at the expense of stronger and more persistent attachment behaviors" (1979, p. 292). Rarely do we have such concrete and complete social science findings that can inform us in situations where attachment formation or "repair" are attempted. There is the necessity for special attention to the need for extra close and frequent interactional experiences for the individuals involved (Garfat, 1989).

Emphasis has been placed upon the reciprocal nature of attachment development and caregivers' appropriate responses to youngsters' moods and circumstances. As in all sensitive mutual interactions, both parties need to be intimately involved. The workers' astute awareness of their own disposition and values in their interactions is also crucial, because the workers themselves are equally impacted by their personal life experience and their own private values and beliefs (Fewster, 1990, Rose, 1991).

POSTSCRIPT

I hope this article presents a full account of the importance of attachment development in the lives of everyone and offers a challenge in the use of the recent knowledge for the care of children who haven't yet had a chance for such satisfactory development. As earlier cited, powerful contemporary research findings inform us: Attachment formation can be fostered later on if the attachment-deprived per-

sons receive a second chance through *close, creative, and intimate opportunity for attachment via care in their daily living experience—and that is what child and youth care work is all about*.

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