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Procedia - Social and Behavioral Sciences 180 (2015) 1178 – 1183

Procedia
Social and Behavioral Sciences

The 6th International Conference Edu World 2014 “Education Facing Contemporary World Issues”, 7th - 9th November 2014

Parent-child connection – emotional synchronization and playing; a possible model to combat the child's unsafe attachment

Irina Radu Motataianu *

University of Bucharest, Faculty of Psychology and Educational Sciences

Abstract

Attachment is a universal principle in nature, especially in men – the superior social beings -, building the basis for his adaptation to environment. The attachment matrix is shaped in childhood, in the primary child- parent/caretaker relationship. Safe attachment, generated by parents offering stimulation, care and affection, secures and supports children in conquering the environment through firm explorations, ensures their mental balance and, in the long term, the emotional wellness of the future adults. Experience has consolidated our idea that parents, through lifelong education, may be supported to know the importance of attachment. Our study presents some modalities to train parents for tackling attachment problems.

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Peer-review under responsibility of The Association “Education for tomorrow” / [Asociatia “Educatie pentru maine”].

Keywords: Emotional synchronization, physical touch, playing, safe attachment

Issue under study

We live in a very busy world which is in a continuous movement. In our desperate attempt to communicate, to connect with the others, we discover all sorts of connection or communication methods. Although it is very easy to "tweet" or "chat" on Facebook, some may put forward the argument that technology leads to the loss of personal

* Corresponding author.

E-mail address: ira_2402@yahoo.com

connection because such interaction is still half-anonymous.

We were born to connect with others, both physically and emotionally. Our attentive awareness allows us to communicate and feel ourselves connected.

Similarly, children desperately need to feel connected, to know themselves and the world around them. They wish to be close to us and sometimes even the skin-to-skin contact proves to be efficient in healing colic.

A child's behavior is always shaped through identification and interiorization in relation with his own self and with the others, in a triangle constellation of factors: love, authority and a secure family. Any shortage of affection and any abuse of authority may cause behavioral disorders, due to either the parents who abandon their tasks or the child who identifies his parents as "patogenous" parents.

Family is a real school of feelings, based on maternal affectivity and paternal authority. If childhood is spent in a family environment full of privations and hostilities, of conditions that deprive the child from affection and adequately satisfying his natural desires and aspirations, he lives the so-called adaptation conflict, expressed in an attitude of protest against any resistance, opposition or interdiction.

All children with stable attachment are more confident, empathic and positive. Unsafe attachment generates negative results in the development of their mental health. Left untreated, inefficient attachment may lead to dysfunctional behaviors, misfits, addictions, lack of self esteem, emotional instability which extend to the adult age and then may be transmitted into the attachment patterns of the future parents. And the cycle is repeated perpetually.

If we determine the type of attachment, we can foresee and mainly eliminate, in the long term, its negative effects for the child.

The link between maternal responsiveness and safe attachment may lead us to determine the factors which could support the development of maternal responsiveness and implicitly of a safe attachment. Thus, we hope that as we involve in various intervention projects, we could have a larger and larger community with a safe attachment.

The father-mother-child triangle is quite important: the father is the affective resource of the mother and the mother is the affective resource of the child. The relationship between the two adults, the wellbeing between them, implicitly reflects onto the child's wellbeing, even since his intrauterine time. The mother-father-child triangle is transferred into the child's relationship with the others. For the child, his mother and father represent the inseparable dyad which offers balance, the stable pillars in the child's affective life. It would be good if this balance is interiorized by the child for the sake of his mental health. From a psychological point of view, the child is also the result of his parents' attitude. This is very important from the perspective of difference between the father's attitudes and the mother's attitudes toward the child. The maternal moral is based on the "proximity altruism", while the paternal moral is based on the "remote altruism". The father is the one who opens the child's way and horizon toward the world, the intermediary between the child and the world, while the mother cultivates the child's egocentrism.

In our opinion, there are four critical components; the visual and touch contact, the emotional synchronization, a safe holding environment, and pleasure, playing and entertainment shared. Parents should make these components available to their children, in order to help them develop a safe and healthy attachment. Children continue to feel the need for these attachment components until they become grown-ups and form adult relationships. Children may become anxious or disorganized if the four critical components have not been present for a long time, whether in infant, early or late childhood.

Children with attachment disorder also feel the need to be in agreement with their parents but they are desperate, tense for fear of being rejected, therefore, they also reject in their turn. When the "traumatic brain" becomes activated, children become hypo or hyper-excited and their behaviors may cause our frustration or rejection.

In order to develop a trusting relationship with a child who is nervous or rejecting, we should respond in a counter-intuitive way. Although it seems natural to respond with indignation and disapproval to a defiant and nervous child, patience and empathy are the only ways that may help him heal from such disorders.

We should very carefully look beyond his aggressive mask so that we could see his feelings of fear, anxiety and sadness and what he is subtly hiding: a great need of affection and acceptance. To keep our head, we should be very careful and aware of our deep emotions and, at the same time, to be objective and sincere with ourselves, to acknowledge what is actually happening to our child.

The children who received affection and emotional synchronization from their parents in a secured

environment have developed a broader window of tolerance for frustration. They have learned to overcome their fear of their own feelings, to acknowledge them, to express them in words, to exteriorize them, in other words, to accept them. They have internalized the comforting words of their parents and developed the ability to calm themselves, to trust their parents to be present both emotionally and morally.

Children with attachment disorder have only a narrow window of tolerance for stress. For a considerable period of time, during their development, they have had no significant person to help them solve their problems or teach them how to recover their temper.

In general, a child with attachment disorder believes that the world and the relationships are unsafe and bad, he does not trust his own strengths and sometimes he cannot solve his problems alone. His level of inner peace is very low.

Children with attachment disorder need our support in order to broaden their window of tolerance for frustration. They also need help to increase their feeling of safety and connection with their parents.

When early attachment trauma is associated with parents or caretakers, the negative feelings and convictions are then activated by the parental figures in all sorts of modes in the future, with teachers, colleagues and, when children become adults, in their couple relationships.

The parental figures are associated with fear, anxiety, mistrust and feelings of rejection and futility.

The parent's physical and emotional synchronization and connection

In his inner self, the child with attachment disorder desperately wishes love and affection. He does not trust the affection or care being offered to him and always fears that he will be rejected, even abandoned. That is why, when we ask a certain behavior from him, when we offer him affection, the child with attachment disorder responds through a quarreling behavior, refusal, denial, in other cases he shrinks into himself and gets away. Sometimes, even the physical defects untreated by the parents may cause feelings of rejection and inadequacy in the child. That makes him feel unwanted and rejected by his family and friends.

If the child lives in a state of high anxiety, he may continuously search for something that makes him calm himself. For the child, this searching behavior is not a conscious activity; he lives in a high level of anxiety. He may become manipulating, demanding more attention for him to feel better or he may search for comfort in other ways that satisfy him and give him pleasure (food or obsessive with video game play, drugs, smoking, any substance abuse, abuse in general).

People react to daily situations based on their prior information which was stabilized in their brain, the reptilian brain. **Daniel Siegel (2010)** explains that the specialized neurons which can imitate the behavior in the brain of another individual form the basis of people's **empathy**. When we see emotions, our mirror neurons move, circulate and offer us a response, letting us „feel” what the other person feels. **The mirror neurons** help us understand why the children's reactions and behaviors become similar to their parents' reactions and behaviors. When the mirror neurons of the children imitate the calm and predictable behavior of their caretakers, the children have feelings of peace and these feelings and behavioral models become stabilized, introjected. When the children's neurons replicate the behavioral models of chaotic, confused or aggressive adults, they may feel the same chaotic, aggressive emotions. The children's behavioral models are an automatic reaction to a stabilized neural network which was activated. It would be preferable for the parents to respond to the reactive and scary behavior through **synchronization, attention and calm**, and, as time passes, the child's emotions and behaviors will imitate those of their parents.

Emotional synchronization is one of the four ingredients of safe attachment between parents and their children. Hughes (2006) explains that emotional synchronization intensifies the sense of connection between parent and child. Synchronizing with the child's feelings, we will be connected with ourselves but, at the same time, we also help him to become self-conscious, to synchronize with himself.

Many of us are not aware of the emotions or feelings which invade our soul in certain circumstances. We only know that they invade us but we cannot name them. All the more so can a child. It is preferable to “teach” him how these feelings are called, not to name them, to guess them for him. We could help him with expressions like: “I

wonder what you feel..., If I were you, I would feel...It is normal to feel...".

When children feel themselves connected with their parent, even if for a short period of time, they feel they are more self-centered and that they belong. The connection with the parent is like a rope tied to an air balloon. If the rope is untied, the balloon will randomly go up in the air. The emotions of a child who feels himself disconnected will go anywhere and everywhere, in all his behaviors, in all his present and future relationships. And, to crown all, these behaviors will serve as models for the future generation. And so on...

We consider **emotional synchronization** and **physical touch** to be very important conditions of a safe attachment and essential parts of the breeding approach. They have a "magic wand" effect on children.

Bryan Post (2012) suggests that parents should intentionally connect with their children at three critical points of the day – in the morning, after school and at bedtime - for 10, 20 and 10 minutes, respectively.

The parent's synchronization with the child's anguish, his emotional support, his understanding and physical affection will help the child to "unblock" and be able to become conscious of his own moods and feelings, to cry or talk freely about them. The child should be allowed to consume his own anguish, finding comfort and acceptance near his parent.

Elisabeth Kubler-Ross and David Kessler (2005) and Bryan Post (2012) identified 5 stages of anguish: (1) denial, (2) anger, (3) negotiation, (4) depression and, in the end, (5) acceptance. However, none of us crosses the stages of anguish in a linear way, completing one stage and then immediately passing to the next stage. We all go back and forth, between stages. We can even get to a point of acceptance and then be thrown back to anger or depression because of an anniversary date or another recollection.

As time goes by, especially when you are encouraged to share your feeling with somebody who helps you and is close to you, those feelings of anger and desperation become more and more insignificant while the periods of acceptance become longer and longer.

The children who encountered a traumatic loss are scared of the intensity of their own feelings, have profound and deep feelings of sadness, anguish and anxiety. The child should be able to open his own heart, to be allowed to feel his feelings, to express them in words, to exteriorize them in the form he feels to be proper, in order to be capable of passing through the traumatic memories and intense emotions he encountered at a certain moment during his life. Children cannot be forced to open themselves unless they feel safe or are prepared to pass through pain.

In the family therapy, we consider it ideal for the child to learn how to express his feelings of sadness in words and to only work on his own anguish jointly with the therapist.

Anguish is a process occurring in time and going from "overwhelming" to "bearable". The therapy will remove the obstacles against the child's anguish in order to allow him to process such anguish in a normal way, as time passes. The parent's **synchronization and physical and emotional connection will be vital components for bringing comfort and safety into the child's life.**

Awareness, understanding and account taking of the child's needs, as well as the self analysis, the expression of his own needs (in particular the emotional needs) become the basis of a love-centered environment, empathy, good will, respect, trust giving and expressing and, through this climate, the framework for an emotional balance, for personality maturation, pro-social behaviors of the child.

Playing – a bridge to the child's inner self

Playing is fun, but it is more than that; a playing and playful attitude may help us create an emotional connection with the child, through pleasure, touch and laughter. Playing is also an important component of cognitive, emotional and social development of a child. Through playing, the child assimilates information about himself and about the world.

If, in his early childhood, a child failed to play with his attachment figures, such deprivation may have delayed his development in a lot of domains.

Playing helps children to learn about their own emotions and to express, prove, experience and explore these emotions, to discover themselves and to work through their own emotions, but also through the emotions of the others. Children even overcome their own fears while playing. Playing is an important component for the development of friendship and cooperation skills.

As he plays, the child learns to speak, to listen, to read facial expressions and gestures of the others. As time goes by, he learns that if he wants his friends to play, he should share, negotiate, follow or make rules and be patient, obedient and tolerant.

Playing develops imagination and the abilities to solve problems and also helps in the development of fine and normal coordination.

Briefly, playing prepares children to deal with the challenges of adult life, provides them with social skills and self-trust, helps them develop their ability to have fun and enjoy life, forming their sense of social communion.

The lack of early play experiences may cause a decline in the emotional and social development of the child. As we mentioned above, if the child was deprived of playing opportunities, probably he remained at an earlier stage of development of his playing skill, which means incapacity to express himself, to associate cause and effect, to solve problems and find solutions. These children did not actually learn how to feel pleasure through playing.

Playing is one of the **ingredients of a safe attachment**, a sharing of pleasure, play and fun. A parent joining his child's games helps him to feel pleasure, comfort, safety, to have a better communication and an affective intimacy.

The key of the benefits of laughter consists in the chemistry of the limbic region: the emotional center of the brain. The amygdale and the hippocampus within the limbic region are involved in detecting the threat and in flooding the brain with stress hormones, in order to activate the body in the “fight” or “flight”, for ensuring survival. When the stress hormones are released repeatedly, they remain at a high and chronic level.

The limbic region of the brain, including the amygdale and the hippocampus, is activated during laughter. Fun, play and laughter increase the secretion of opioids and reduce the level of stress hormones, leading to general feelings of wellness and broadening the window of tolerance. Laughter is like a shut-off button to the fight or flight response (Berk et al., 1989).

Our therapeutic model, focused on experiential psychotherapy through playing was the foundation for the educational activities carried out by the teachers of Kindergarten no. 209 in Bucharest, actions focused on playing, tolerance, positive emotionality, unconditioned trust giving and respect for the child. The parents were advised how to tackle attachment problems and guided on how to create a safe attachment in their children.

Proposal for future research

The family matrix is the foundation for shaping a child's personality and any abdication of this role may transform children into “**orphans**”.

The parents' lack of time, the busy timetables, the extra-school activities, sports, piano, dance, even personal development lessons may be real obstacles against synchronization with the child, against the “real play”. We very well know that the involvement of the child in multiple activities leads him to both neuropsychic and physical overstress and in particular to emotional and social overstress. When such activities disappear from his life, we find ourselves in front of a literally depressed child, because he does not know what to do with the free hours in his life, he has too much time for himself.

Unstructured time is benefic for the child, he relaxes, he simply plays, experiences new life situations, experiences the life of a child.

We suggest that, in the **model of psychotherapeutic intervention focused on experimental play therapy**, we should encourage the child to play, to progress initiating games together with his parent and bringing many “real” toys. Real toys, such as dolls, toy bricks, drawing materials, board games, clothes for playing disguise facilitate the children's imagination, creativity and interaction.

We believe that the experience of playing together and the emotional synchronization bring a huge gain for both the parent and the child. In other words, we are happy together and we share our happiness.

We aim to have this program carried out in several kindergartens, both in Bucharest and in Buzau, for a period of 12 months, with a twice-a-week frequency which will be then progressively reduced. We consider it necessary to have at least one parent attending all the advising sessions.

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