

(c) Anxiously Ambivalent

An Anxiously attached child will present with the following style of behaviours;
(ambivalence, coercive and dependant interactions)

- The anxious child will maximise his/her attachment behaviours to try to engage the caregiver either in a dependant manner (unable to work without 1:1 support), or in a wilful and argumentative manner (either way these children are known for taking a lot of teaching time in order to manage the child 'getting down to work').
- He/she will operate always with an undercurrent of anger and ambivalence (push/pull feeling in the relationship).
- His/her play is fragmented, (isn't smooth or easy), gets on better with adults than with peers.
- The relationship with the adults in his/her life lacks an ease/relaxed manner of relating, struggles and arguments (conflicts) will be frequent, .
- He/she will also seek to be coercive based on his exposure to anxiety, attentional problems and conduct difficulties are characteristic of this child's style of operating in the world that feels to them unfair and unloving. The strategies are employed in order to 'control' this world of pain and fear in order to pull adults in to 'manage' it for them.

These children can seem very confusing and exhausting to the adults in there environment as they are communicating in any way possible that they need your attention via any means all day. They may become highly distressed by the separation in the mornings from an adult from home however are not easily pacified on reunion at the end of the school day (and indeed can seem rejecting of the person they have pined for in the early part of the day). The child will seek closeness and proximity to the day time caregivers by alternating between seeking proximity and closeness and then resisting and kicking or hitting out against others, often attacks will be acted out on the vulnerable or those who are in 'competition' for the attention of the day time main care giver.

The play and capacity to sit and learn will be infringed upon because the child is ever vigilant to missing an opportunity to be and experience love. He she will approach the relationship with themselves, others and the world with neediness and rebuff.

Often children can find their own thinking 'painful' some manipulating their face and body to manipulate the discomfort and communicate experiencing high levels of anxiety, these can all be understood and worked with to support the child relax, with subtle changes to approaching these children large changes can occur.

(please see 'strategies' and discuss with Kris Catchpole, School Project Manager)

- May be worried about mother when apart
- Will present as helpless and unable to resolve conflict
- These children struggle to function in peer groups and have difficulty in maintaining friendships

In relationship with teacher/therapist the child will present the following;

- Hard to please, often unsure and passive
- Holds a negative view of self
- Parentified but also dependant and 'helpless'
- Responses will often be all feeling and no thinking
- Therapist/teacher feels idealised by child but also unable to get it right

The aims and strategy of the attachment behaviours are as follows;

- The child remained hyper vigilant and hyper active as a strategy to manage the unpredictability of the primary care giver
- There are two types of anxious /ambivalent behaviours (C1) is anger (C2) is sad and passive
- The aim of the attachment behaviours is to keep the primary care giver close and engaged in any way they can, any way possible

The inner world of this child has provided this child with the following core beliefs;

- Others are unpredictable, sometimes loving and protective, sometimes hostile and rejecting
- I don't know what to expect, I am anxious and angry
- I cannot explore I may miss an opportunity for love and affection
- If I can read others and get them to respond I will get my needs met

In adulthood normally classified as preoccupied, entangled and at worse personality disordered.

Ambivalence: Type C

Need to make things happen; disorder; no structure to family life
Fear of being lonely or isolated; terrified of rejection
Blurred generational boundaries
Entangled/enmeshed: everyone wanting to know what everyone else is doing
Moody & preoccupied with who prefers who, who is being unfair to who in the family: "it's about *me!*"
Fearful of losing family membership
Attention seeking such as heavy drinking at pub,
Exaggerated illness, leaving children at council offices
Copious crying in others' presence
Threatening own children with abandonment e.g.
"You make me want to kill myself...if I die it will be your fault"
Insensitively demands of children's affection when they're otherwise occupied
Aggressive to people in authority, especially if they disagree with you
Unpredictable/Erratic, frequently disappointed, so hard to please
Distractible, confused, poor concentration
Victimised, Feels powerless, helpless, flat
Uncertain how to feel, how to react towards your own children
Perceive own children as mainly demanding and difficult, tetchy, fretful
Verbal accounts of children alternate between being glowing & hateful
Can't stand or cope with being teased
Feeling overlooked and unwanted
Makes heavy emotional demands on others, over vigilant of children
Splitting: Taking sides & angrily rejecting opposing views
"You're wonderful - much better than my last key worker"
Blaming of others (it's never your fault!)
Parent and infant become unable to regulate each other's feelings
Clinging, tugging, following parent everywhere, crying
Reluctant to explore (in case parent disappears)
Seesaw of emotions from lack of prediction as parent is too sensitive or too insensitive
Find it hard to be self reliant
Showing off, act silly and don't know when to stop
Controlling: "Do you love me more than my sister/brother?
If so you'll do what I want to do"
Monopolising: "Will you be my best friend and play with no one else?"
Distressed by separation from parent/carer
Seeks closeness but resists comfort; cling but fight
Dependant: Feel incompetent, unworthy, low self esteem
Relentless focus on parent/caregiver
Listless, apathetic, passive, delayed development
Varying between being dull/ helpless and frantic/desperate
Quick to escalate and explode leads to provocative risk taking behaviour
Tend to 'act out' rather than 'explain' feelings
Hard to name and differentiate feelings
Tendency to dislike/distrust certain foods
Problems with eating sleeping and paying attention
Constant, indiscrete chatter

