

CHAPTER TWENTY-EIGHT

The Phobias of Attachment and Attachment Loss

AGENDA

- Welcome and reflections on previous session
- Homework discussion
- Break
- Topic: The Phobias of Attachment and Attachment Loss
 - Introduction
 - The Importance of Healthy Relationships
 - What Is a Healthy Relationship?
 - The Effects of Interpersonal Trauma on Relationships
 - The Phobia of Attachment and Difficulties With Regulation
 - The Phobia of Attachment Loss and Difficulties With Regulation
- Exercise: Finding Inner Common Ground About Relationships
- Homework
 - Practice the exercise Finding Inner Common Ground About Relationships.
 - Complete Homework Sheet 28.1, Finding Inner Common Ground About Relationships.
 - Complete Homework Sheet 28.2, Your Experience of Secure and Insecure Relationships.
 - Complete Homework Sheet 28.3, Balancing Self- and Relational Regulation.

Introduction

As humans, we have a lifelong, biologically driven need to connect with others: We are made to be social beings. Healthy relationships can provide safety, protection, emotional regulation and soothing, physical contact, companionship, communication, support, and a sense of belonging. As John Bowlby, an eminent psychiatric pioneer who studied attachment, noted,

Human beings of all ages are found to be at their happiest and to be able to deploy their talents to best advantage when they are confident that . . . there are one or more trusted persons who will come to their aid should difficulties arise. (1973, p. 359)

However, our most intense emotions are evoked in relationships, for better or worse. This makes relationships more difficult to manage and maintain in a relatively stable manner. Everyone has difficulties in a close relationship from time to time: People are not perfect and their individual needs and wants do not always coincide with those of others. We all misunderstand and misperceive sometimes because we cannot read each other's minds. We occasionally say and do things that are hurtful to others, even though it may be quite unintentional. The experience of being betrayed, abandoned, rejected, or humiliated can evoke some of the most intolerable feelings of hatred, rage, shame, loneliness, fear, and despair. In this chapter we will discuss models for healthy relationships and the difficulties that you may encounter in relationships that are related to traumatization and dissociation.

The Importance of Healthy Relationships

We all base our adult models for interpersonal relations on our early attachments. At that point in development, we learn how relationships work, for better or worse, from our limited experience in interactions with primary caregivers. Ever after, we respond in relatively similar ways in close relationships and expect others to respond similarly. We have thus developed a template or model in which we try to fit all of our relationship to some degree, whether they actually do or not. Relational models include certain persistent core beliefs, for example, "*I can trust others and am lovable,*" "*No one really cares about me,*" or "*People are dangerous.*" And various dissociative parts of yourself may have their own relational

models that potentially conflict with one another, as we will discuss later in this chapter. Fortunately, dysfunctional models can be changed with mindful reflection and work on your ways of perceiving relationships and other people.

Safe relationships that are nurturing, containing, and predictable are essential to our healthy development from the cradle to the grave. In fact, secure early primary relationships help regulate a young infant's immature physiological systems (including distressed states and emotions), the first necessary step in the infant learning to employ his or her own regulatory skills. Slade (1999) noted that such relationships "predispose a child toward more differentiated, coherent, and flexible functioning" (p. 584), conditions necessary to healthy development across our entire life span. In the next section you will find a partial list of guiding principles for healthy personal relationships. Notice what you have already incorporated into your relational model, as well as those on which you wish to continue to work. And remember, these principles are ideals: Because we are all human, no one is able to live up to them perfectly all the time.

What Is a Healthy Personal Relationship?

- It is based on mutual respect, empathy, and equality.
- You both are able to set clear boundaries with each other and be assertive without being aggressive.
- You both have a relatively healthy balance of autonomy, dependence, and interdependence.
- You both feel secure in the relationship, but this feeling of security *does not depend on whether the person can be available to you at all times.*
- You both have a sense of the other person, even when they are not with you, that is, you can hold him or her in your mind and heart.
- You both can regulate your emotions that are evoked in relationships.
- You both are able to negotiate and resolve most relational conflicts and are willing to ask for outside help if needed to get resolution because the relationship is valuable to both of you.
- You both have a relatively secure and stable sense of self.

- You both have a basic trust that most people do not intend you harm, and you can recognize those that do intend harm.
- You both are able to recognize and respect that the other person has needs and desires, thoughts and feelings, and goals and aspirations that may be different from yours.
- You can both generally accurately understand and reflect on the motivations and intentions of the other person.
- The relationship is based on negotiations about what is best for both of you, not on power and control, or dominance and submission, or winning and losing.
- You can both talk about your inner feelings and experiences without fear of rejection or humiliation.

Perhaps one of the most important aspects of a healthy relationship is that room is made for mistakes, because we all make them. In fact, healthy relationships follow a natural and inevitable *cycle of connection, disconnection, and reconnection*, over and over across time. Your ability to learn to flow along with this cycle and not become stuck in disconnection is a key to making relationships work. We will describe more about this later. But first, we will discuss how being traumatized affects your relationships.

The Effects of Interpersonal Trauma on Relationships

Those who have been significantly hurt or betrayed in major relationships, especially when they were young, generally develop their relational model based on these highly unstable and destructive bonds. Relationships themselves and various relational events have been traumatizing and thus may be major triggers in the present. Therefore, being in close relationship with another may be one of the most challenging and triggering experiences for individuals who have experienced interpersonal trauma.

People who have a dissociative disorder generally expect rejection, hurt, betrayal, or abandonment; therefore, they have major trust problems. They may develop a *phobia of attachment*, an intense aversion to becoming too emotionally or physically close to another person (Steele, Van der Hart, & Nijenhuis, 2001; Steele & Van der Hart, 2009; Van der Hart et al., 2006). On the other hand,

traumatized people are in desperate need of stable and caring interpersonal relationships. They may also develop a *phobia of attachment loss*, an intense fear and panic about losing important relationships. The need of the individual to simultaneously seek and avoid relationships leads to severe inner conflict and confusion among various parts of the personality, and it sends mixed messages to the other person, who may also become confused and frustrated. These relational phobias—of attachment and loss—are two sides of the same coin and are the major focus of this chapter.

The Phobia of Attachment and Difficulties With Regulation

In [chapter 18](#), we discussed the importance of being able to regulate yourself both by yourself (self- or auto-regulation) and with the support of others (relational regulation). Individuals, or certain parts of themselves, who avoid relationships generally prefer to find ways to deal with problems by themselves rather than reaching out to others for support and help. They have learned to become self-sufficient and are mortified by their own dependency needs. In fact, they often find that relationships are dysregulating rather than helpful because they are so worried about being hurt.

Some people, however, may have little ability to regulate themselves. They are thus more likely to engage in destructive strategies to cope with relationships, for example, using self-harm, drugs or alcohol, or excessive work. And, of course, some parts may want to avoid relationships but other parts simply do not have the skills to manage much regulation on their own, setting you up to resort to self-destructive coping strategies.

You will likely have one or more parts of yourself that have some degree of avoidance of becoming close to another person. Perhaps you fear betrayal, hurt, indifference, or ridicule and thus hold back. It is important to already begin to become more aware of what you and all parts of you believe about, and expect and predict, in relationships, because you can change dysfunctional beliefs with some help. In addition, some parts of you may fear the intense feelings, needs, and yearning that inevitably arise in a close relationship, and by avoiding relationships, you avoid these strong inner experiences (see [chapter 5](#) on the phobia of inner experience). Because there is so much conflict, fear, shame, and confusion about

relationships, you likely have trouble keeping yourself regulated in your window of tolerance.

Most people with a dissociative disorder do not avoid relationships completely but struggle significantly in the relationships that they do have. Parts of you that are phobic of attachment typically have several major innate ways to cope when they feel threatened in relationships. We discussed these reflexive strategies more generally earlier in [chapter 4](#) on understanding dissociative parts of yourself. They include *flight*, *freeze*, *fight*, and *collapse*. Perhaps you recognize one or more of these defenses in yourself in the context of a relationship. For example, during a conflict, you or a part of you just wants to leave and get away, or avoid talking about it (*flight*). Or you or a part of you feels so afraid that you are frozen and cannot move or think of what you would like to say (*freeze*). Perhaps you or a part of you becomes angry and gets into heated arguments (*fight*). Or you or a part of you even shuts down so thoroughly that you curl up in a ball and are not responsive, not feeling or thinking anything (*collapse* or *shutdown*). Each of these is an example of how you might avoid or even sabotage relationships with others. Each involves a high degree of dysregulation: you are either hyperaroused or hypoaroused.

At times, some parts of you may be highly critical of other people, warning you that they are not to be trusted, are dangerous or useless, or only out to get something from you. They predict catastrophe because they are so stuck in past traumatic experiences where they were indeed hurt and betrayed. This inner experience only serves to make you more dysregulated and upset. These parts are unfortunately bound by their own limited perceptions to a world where every relationship will repeat the hurts of the past. Inner voices may also attack you internally, criticizing and ridiculing you: “*How could anyone love you? You are so stupid and needy, no one can stand to be around you!*” In this way, they help you avoid relationship by convincing you that no one could tolerate you. Of course, this evokes the shame and despair that you must have felt at times as a child, and these inner voices are re-creating what it felt like in the past, which keeps you from taking any risk in relationships in the present.

Based on understandable reasons, these parts of you that are phobic of attachment often have intense reactions to the parts of you that want to have relationships and feel a desperate need to be

with another person. Because they realize that having needs in the past was hurtful to you, they may viciously attack these parts, humiliating and despising them. Although this misguided behavior is hurtful to you as a whole person, the original intent was one of protection, since rigidly suppressing your needs might have been the only protection possible in the past. For example, they may call these parts “crybabies,” tell them they are disgusting or ridiculous, that they are just trying to get you hurt all over again, that they should be punished and locked away. Of course, as we have discussed earlier, this provokes the other parts to become every more fearful and needy and ashamed, so the inner cycle of chaos and turmoil continues. Yet it is essential for you to understand and develop empathy for these parts who really only want to protect you from further harm: They just need to learn more healthy ways of doing so.

The Phobia of Attachment Loss and Difficulties With Regulation

Now we turn to the parts of you that may be desperate for connection. Perhaps you or parts of you experience panic when you are alone, feeling that you will be alone forever. Or when you predict that someone might abandon or reject you, intense fear and rage are evoked. Such desperation and need for connection can be profoundly dysregulating and overwhelming. And perhaps you are deeply ashamed of these needs and of the parts of you that have them. However, we all have need for connection and care, to feel special and loved in the eyes of another. These are not bad needs and desires: They are normal. It is important to understand and accept this fact and be empathic toward all your needs and desires as a whole person.

Of course, parts of you may be stuck in trauma-time, reexperiencing periods when you so desperately needed care and support and did not receive it. Thus, they may be in a constant state of frantic seeking and clinging. It is important to understand that this desperate experience is a normal and natural defense in itself: Young animals and humans naturally become panicked when their mother is out of sight, and they cry out for her and cling to her when she returns, because she is their protection against the dangers of the world. This innate seeking and urgent crying is

designed to bring the mother back to provide safety, nurturance, and relationship: That is its protective function (McLean, 1985).

Most young dissociative parts have unmet attachment needs. Other parts may attack or be disgusted by them because they continue to reexperience betrayal and hurt by early caregivers. However, this serves only to increase their frantic seeking of help and support, sustaining your inner conflict between approaching and avoiding relationships.

Dissociative parts of a person who have a phobia of attachment loss generally prefer to be soothed and regulated by other people, and they often have serious difficulties with self-regulation. They have learned many different strategies to seek out people and avoid being alone. This comes at a cost, however: They tend to exhaust others, who then pull away, creating the very scenario these parts fear, which further reinforces the beliefs of attachment-phobic parts that relationships are hurtful.

On the other hand, some parts may seek out others by being “people pleasers.” Such parts may be rather submissive, avoid being aware of or expressing their own needs and feelings, and try to keep people close by doing whatever they want. But they do not get their needs met, because there is no true emotional intimacy in this type of relational dynamic. This strategy eventually exhausts the person as a whole, and other parts inevitably become resentful and angry. Strategies to be more assertive and realize your own needs are discussed in [chapter 32](#) on boundaries.

In summary, people with a dissociative disorder experience a confusing and conflicting set of relational phobias: Some parts of themselves fear being too close, while others fear losing relationships. This conundrum plays itself out as various parts of yourself simultaneously or alternately seeking and rejecting closeness with others. This fear-based (and often shame-based) dilemma makes it difficult to cope with relational disruptions. Next you will find ways to cope with such disturbances.

EXERCISE

FINDING INNER COMMON GROUND ABOUT RELATIONSHIPS

This exercise will help you learn to empathize with all parts regarding their position on relationships. Use the meeting place technique from [chapter 27](#)

(or some other method) to gather all parts together. You may ask for help from your therapist for this inner meeting if you need or want it.

Begin by getting yourself comfortable and calm. In your mind's eye, imagine your meeting space, the one just for you, and allow all parts that are able to attend. Some may sit closer and some farther away. Some may prefer to be outside the room, listening in. Each part of you can find a comfortable place. Begin the meeting with a statement that all parts are welcome and are invited to be heard. Also emphasize that all parts will be respected, and that no criticism is allowed during this meeting. Then begin to find some common ground upon which you could all agree about relationships. For example, you can surely understand that when you have been hurt, no part of you would want to be hurt again in a relationship, and some parts might thus avoid them. You can begin to understand their worldview, their core beliefs, their feelings of fear and anger and isolation, not an easy inner world to experience. Walk in their shoes for just a moment and feel empathy for how difficult it is.

And you can surely agree that all parts of you have been alone and lacked much necessary care and support from others, and thus some parts would quite naturally want to seek out the comfort, support, and enjoyments of what they have missed. You can begin to understand their worldview, their core beliefs, their feelings of loneliness and need and desperation, not an easy inner world to experience. Walk in their shoes for moment and feel empathy for how difficult it is.

Be aware that you are all struggling so hard, each in your own way, and have your own suffering and needs. Perhaps all parts of you could agree that you do not want to be hurt and that you would like to feel better. See if that is so. And perhaps all parts of you could agree that if you could know for sure that a relationship was trustworthy, it would be worth having. See if that is so. Now you are beginning to find some common ground. Just stay with what you are able to agree on, no matter how small, and leave the rest for another time. Experience what it feels like to be in agreement, all together. Savor this moment for awhile.

Now, in the same way that parts need to feel safe, secure, and supported in relationships, free from hurt, free from criticism, free from rejection, each part needs to feel the same with other parts inside. The more all parts of you practice treating each other as you would want to be treated by other people, the more safe and calm and ready to cope with

relationships you will be. This meeting is a good start. Come back often to this place and reexperience the common ground upon which you can all agree. Work together, respect each other, take your time, and you will begin to feel better, safer, more stable and strong.

Homework Sheet 28.1

Finding Inner Common Ground About Relationships

1. Reflect back on the exercise, Finding Inner Common Ground About Relationships, and describe your experience of your inner meeting with parts of yourself. For example, what did you feel? What did you expect? Were you able to find some common ground? Did you find that some parts had a more difficult time with the exercise than others? What were the obstacles to agreement; for example, were parts too critical or too scared?

2. Practice this exercise each day at home. If you have difficulties, discuss them with your therapist and practice during your therapy session so you can learn to find common ground.

Homework Sheet 28.2

Your Experience of Secure and Insecure Relationships

1. Describe an experience in which you felt secure in a relationship. For example, what were your emotions, thoughts, sensations, and actions?
2. Using the same experience in #1 above, describe how various parts of you felt, if it was different from what you experienced.
3. Describe any conflicts among parts. For example, were some parts afraid, angry, or mistrustful? Did you feel an urge to withdraw from the relationship? Did any parts criticize you or other parts of you for being in the relationship or for what you felt?
4. Describe an experience during which you felt a little unsure or insecure in a relationship. Choose a minor incident, not a major one. For example, what were your emotions, thoughts, sensations, and actions?
5. Using the same experience in #4 above, describe how various parts of you felt, if it was different from what you experienced.
6. Using the same experience in #4 above, describe any conflicts among parts. For example, did some parts want to continue to be with the person, while other parts wanted to get away? Did some parts want to start a fight, while others wanted to run and hide? Did any part criticize you or other parts of you, or blame you for what went wrong?

Homework Sheet 28.3

Balancing Self- and Relational Regulation

1. Describe times when regulating yourself is preferable to being with someone else to calm yourself down. For example, if you feel stressed or anxious, you prefer to withdraw and think it through and deal with your feelings on your own.

2. Describe how you calm, comfort, or reassure yourself when you are alone.

3. Describe why soothing yourself is preferable to receiving soothing from others in these incidences.

4. Describe times when you find that being regulated in a relationship is preferable to soothing yourself alone. For example, if you feel stressed or anxious, you prefer to call a friend or talk to your therapist in a session, rather than deal with it on your own.

5. Describe what about a supportive relationship helps calm you.

6. Most people have at least some balance between self- and relational regulation. Please describe what (approximate) percent of the time you self-soothe versus what (approximate) percent of the time you seek out relational reassurance and support. Various parts of you may prefer different ways, and, if so, notice which parts desire self- or relational soothing and support. If you want those percentages to change, please describe what you would ideally prefer, and notice whether there is any inner conflict about changing.

7. Spend some time thinking about and discussing with your therapist how you might achieve a better balance between self-

soothing and relational support, if you need to change your balance. For example, you might write below some of the core beliefs that support self- or relational support (*“People should take care of themselves and not ask for help” or “I can’t do anything by myself, certainly not support myself!”*)