AGENDA QUESTIONS
COMPILED FROM PARTICIPANTS' CONTRIBUTIONS

A. Infant Attachment Theory: Key Postulates, Logic, Strategy

Infant attachment theory is built upon a solid descriptive foundation, a well defined set of key postulates, and a detailed developmental analysis. These have made it possible to formulate empirical tests that could strongly confirm or refute key postulates.

A1. What image of infant cognition, motivation, and behavior underpins infant attachment theory?

A2. What are the key descriptive and psychological insights underlying Bowlby's theory of attachment infancy?

A3. Does Bowlby's control system/secure base model of infant attachment capture all the important attachment phenomena of infancy and early childhood? If not, what are the unpredicted or unaddressed phenomena? What kinds of explanations would be necessary to address them?

A4. Where do comfort seeking and exploratory behavior fit in the logic of infant attachment theory?

A5. What are the key motivational constructs and mechanisms in Bowlby's infant attachment theory? What kinds of interactions are there with other motivational systems? Can we discuss motivation with enough specificity to formulate testable hypotheses?

A6. What does it mean to say that an attachment system is turned on/turned off or activated/inactivated in emergency vs. non-emergency situations? What are the key observations to be accounted for and are there other types of explanations for them? Is the control systems concept primarily a metaphor or a source of testable hypotheses?

A7. Bowlby described emotion as a "phase of appraisal". What does this mean? Is it sufficient for the theoretical and empirical goals of developmental attachment research? Is it a failing that infant attachment theory does not include a more fully articulated theory of emotion? If so, is there a remedy?

A8. Mental representations play important roles in Bowlby's infant attachment theory. They are important input to the attachment control system and they play a role in the coherence/consistency of attachment behavior across time. How do such representations arise? Are there important developmental changes in the content or structure of such representations? What of the criticism that the working model concept is relatively undefined and thus explains everything and nothing at all?

A9. What are the primary errors of emphasis and of analysis in Bowlby's infant attachment theory? Are there conspicuous definitional or logical incoherences in the theory?
B. Adult Attachment Theory: Key Postulates, Logic, Strategy

A comprehensive adult attachment theory requires a set of descriptive insights, key postulates, and mechanisms that are coherent and empirically testable. One of the key issues in attachment study is whether solutions for adult attachment theory should be extensions of infant theory, should look to infant theory only as a model, or is logically independent of descriptions, postulates, and mechanisms used in infant theory.

B1. What are the key descriptive and psychological phenomena underlying current adult attachment theory? Are the descriptive underpinnings of adult attachment study well established? If not, is lack of solid naturalistic description an obstacle to theoretical coherence and testability? Or can it be put off until later.

B2. What image of emotion, cognition, and behavior in relationships underpins current adult attachment theory?

B3. Does attachment theory provide criteria for distinguishing attachment from other facets of relationships, mere familiarity, affiliation, or social support and other interpersonal constructs?

B4. How do the goals of current adult attachment theory differ from those of traditional relationship study by social, personality, and clinical psychologists?

B5. What are the key postulates of current adult attachment theory?

B6. What kinds of empirical studies would pose "dangerous tests" of adult attachment theory?

B7. What are the key motivational constructs and mechanisms in adult attachment theory? What kinds of interactions are there with other motivational systems? Is the same motivational analysis related to motivation models in the infant theory?

B8. Does adult attachment theory include a theory of emotions? If not, shall we draw postulates about emotion from psychoanalysis, some other theory, or ad hoc from many sources? How does this affect the coherence of adult attachment theory?

B9. Since Freud and Bowlby, developmentalists have hypothesized that infant-adult and adult-adult relationships are similar in kind and that early experience biases/constrains later relationships. Are such hypotheses integral to the logic of current adult attachment theory?

B10. How does adult attachment theory deal with the observation that adults find comfort and support in a wide range of people?

B11. Are predictions about stability and change within and across relationships integral to the logic of adult attachment theory? Or should we be looking elsewhere, e.g., to Sameroff & Chandler’s transactional model, for predictions about stability and change?

B12. Is adult attachment theory (and the results of specific studies) assumed to have broad cross cultural generality? Would lack of such generality pose a challenge to the validity of the theory?

B13. What are the key threats to the validity of adult attachment studies? How are they best addressed?

B14. Are there distinctive strands within infant and adult attachment theory? If so, would be the advantages and disadvantages of identified them with distinctive descriptive labels?

B15. Who is Jan Smedslund?
C. Definitions Of Basic Terms And Concepts

One of the most telling criticisms of attachment theory is that key concepts are not well defined and expand to meet any need, cover any incoherence. This begins with the term attachment itself and applies as well to the working model concept and to many emotion related concepts and individual differences variables.

C1. Does the term "attachment", as applied to adults, refer to all significant relationships, a specific type of relationship, or a facet of some (all) relationships? Is it essential that the term be used similarly in infant and adult work? What kinds of phenomena would not fall under the attachment rubric?

C2. Are people's links to places and objects properly described as attachments. Are humans' relationships to pets "attachments"? How about the pet's relationship to the human? Why?

C3. What do attachment representations represent? What testable predictions does adult attachment theory make about them?

C4. Does the "working model" concept add anything beyond the notion that mental representations play an important role in attachment? Does it have a specific definition and range or does it, as Hinde suggested, expand to meet any need and any observation?

C5. What does it mean to say that an instrument "measures" a working model"? Do we want to say that all interviews or self report scales measure associated working models? If not, why not?

C6. What key phenomena and evidence are associated with the concept of multiple working models? How are multiple models conceptualized in adult attachment theory and is the concept testable?

C7. What are the links, theoretically and empirically, between general and relationship-specific attachment styles/patterns? What are the best methods for studying these links?

C8. Attachment theorists do not consistently distinguish representations associated with one figure from more generalized representations. Can we (need we) be more clear about this?

C9. How are individual differences in attachment similar to and how are they unlike traits?

C10. Should the term attachment pattern or style be applied to any trait that (a) is scorable in (or in interviews about) relationships, (b) strongly influences the course of interactions within a relationship, or (c) predicts course of a relationship? Or should we apply these terms to a more restricted range of phenomena? Does attachment theory provide any guidance here?

C11. What is the theoretical association between an "attachment style" and "working models?" Are these simply two names for the same construct or are there good theoretical reasons to distinguish these constructs?

C12. Are avoidant and preoccupied styles generalized coping styles? Does it matter?

C13. In developmental research, reunion behavior has been more useful than separation behavior as an indication of attachment security. Is this kind of information relevant for adult attachment research?

C14. The primary individual differences variable in developmental and AAI research is secure versus insecure. Researchers using self report measures favor a different solution. What is the logic underlying the different solutions? Should/can this difference be reconciled?

C15. Can adult attachment patterns/styles be mapped onto patterns/styles of adult personality and/or psychopathology?
D. Mechanisms

Attachment research has long been criticized for inattention to mechanisms. The complaint is not that mechanisms for key findings are hard to imagine but that there are too many plausible mechanisms. A related concern is that failure to implicate specific mechanisms forecloses important avenues for formulating and testing dangerous tests of key attachment hypotheses. Questions about mechanisms bring to the fore the nature of links between attachment theory and psychoanalysis.

D1. Is the behavioral control system model Bowlby used in his work on infancy central to adult attachment theory? If so, what kind of testable hypotheses can be derived from this motivation model?

D2. Can the key phenomena of adult relationships be construed as general processes of stress and coping playing out in the context of relationships? Or are the mechanisms in play specific to attachment? How could we tell?

D3. What postulates of attachment theory bear on how people come to trust in a partner's non-contingent availability and responsiveness without evidence of their availability and responsiveness in every possible context? What kinds of individual differences are relevant here?

D4. What processes might lead to change in working models in adulthood? What might lead to change at an explicit, conscious level, and what might lead to change at a more implicit, nonconscious level? How can we best measure change in working models?

D5. Most change in attachment status is from insecure to secure. Are there postulates of attachment theory attachment theory relevant to explaining this?

D6. Should attachment theory focus only psychodynamic processes that can be translated into cognitive mechanisms?

D7. Does adult attachment theory have to explain defensive processes? Or was Bowlby's interest in this independent of his attachment theory?

D8. Can attachment theory hope to be a general theory of personality or does one need well developed theories of other constructs (e.g., emotion, self, etc.) to make sense of adult attachment phenomena and to make the theory coherent? If the latter, how should this be spelled out in attachment theory?

D9. Does "working models" concept make it difficult to recognize and address different types of representations and cognitions in play in adult relationships? If so, should we dispense with the term in favor of more specific language?

D10. Does adult theory assume that the primary function of attachment relationships is reducing distress? Would evidence contradicting this present a significant challenge to the theory?

D11. It has been proposed that activating the representation of an attachment figure reduces distress. Is this derivable from specific postulates of adult attachment theory? What are the mechanisms?

D12. Freud and Bowlby were committed to the idea that early experience provides a prototype for all later love relationships. What is the status of this hypothesis in current adult theory?

D13. What is the role of phantasy in the construction and maintenance of internal working models of attachment? Can we speak of attachment between a person and a phantasy attachment object or figure?
E. Differential Predictions and External Correlates

Attachment theorists have never had trouble formulating hypotheses about relations among attachment constructs and components within the theory or relations to other domains. Critics have suggested that attachment research has established too many correlates to remain coherent. They also suggest that the theory too readily assimilates unexpected results.

E1. Bowlby described the domain of attachment related phenomena to include secure base behavior, attachment representations, and defensive processes? Is this triad integral to current adult attachment theory. If so, does it contain postulates that address why these diverse phenomena would be related?

E2. It has been argued that attachment is a dyadic phenomenon and that research should focus on differences between and correlates of secure-secure, secure-insecure, and insecure-insecure dyads, not on individuals. What are the strengths and limitations of this perspective?

E3. Does attachment theory afford strong predictions about cross-relationship consistency of attachment security? If so, what is the logic of these predictions and what kinds of designs would decisively address them?

E4. What are the most obvious domains to search for correlates of attachment patterns/styles? What are the mechanisms that would account for correlations with these domains?

E5. How does adults attachment theory defend against the criticism that it is just the theory that "all good things go together"?

E6. Do the key postulates of attachment theory provide any guidance as to the roles of generalized and partner specific beliefs? Or should attachment research designs always include independent assessments of both?

E7. What are we measuring when we use self-report questionnaires versus interview measures of attachment security? How can we conceptualize their relation (or lack thereof)? To what extent do they predict (or are they predicted by) similar or different factors?

E8. Does current theory predict anything about insecure attachment styles/patterns that could be used to formulate a "dangerous test" of the theory?

E9. Should we expect attachment phenomena and correlates to differ in courtship, early phases of marriage, later marriage, and in the immediate and later aftermath of dissolved relationships? Can an answer be derived from the key postulates of attachment theory or must we draw on experience from other domains or research, or from informal experience?

E10. Does attachment theory include postulates that predict sex differences? Has the theory been modified to take into account sex differences that have been observed? How can we explain sex differences in adult attachment research?

E11. How does adult attachment theory conceptualize parental behavior? Does it make specific predictions about links between caregiving directed toward partners and toward children?

E12. Attachment research has shown that the AAI and self report measures have a wide range of (rather different) correlates. Would the theory have been falsified if some of this research had produced negative results? If not, then how can the positive results be said to strengthen the theory?
F. Clinical Issues

One of Bowlby's primary goals in developing attachment theory was to advance prevention and therapy. Progress on this front has lagged far behind progress in basic research. Attachment theory's association with psychoanalysis has often been an obstacle to research and to acceptance among non-analytic therapists. Whether research will play an important role in emerging therapies and whether clinical experience will make significant contributions to current attachment theory remains to be seen.

F1. What are the advantages and limitations of clinical experience as a source of descriptive insights about adult relationships?

F2. From the point of view of current attachment theory, what is it about attachment that changes and what are the primary mechanisms of change in the course of therapy?

F3. What roles can attachment assessment play in formulating therapeutic strategies and goals?

F4. What role does attachment play in the evaluation of therapeutic outcomes in individual and couples therapy?

F5. Is insecure attachment per se a sufficient reason for therapy?

F6. What are the implications, if any, of attachment research and theory for specific approaches to psychotherapy?

F7. How can an understanding of patients’ and therapists’ states of mind with respect to early attachment relationships contribute to our understanding of aspects of the therapeutic relationship including transference, countertransference, and therapeutic alliance?

F8. Can there be clinical applications of attachment theory outside of a psychodynamic framework?