

Attachment and the Development of Relationship Skills

Abstract

Thoughtful observations and research can help society understand violence and enable us to find ways of preventing future instances of horrible events. Healthy, developmentally appropriate, and successful attachments need to be formed in order for children to grow up to be healthy adults. Violence appears to be, in part, the result of rejections or failed attachments at the three critical periods of human development: early childhood, adolescence, and early adulthood. Trauma and/or rejection by the target of the attachment, be it parents, caregivers, the peer group, or work colleagues, can interfere with the development of future problem solving and interpersonal skills, resulting in ineffective or inappropriate interpersonal relationships.

Keywords: Relationship development; Attachment, Interpersonal violence; Childhood

Review Article

Volume 5 Issue 2 - 2016

Kathryn Seifert M*

CARE 2 LLC, USA

***Corresponding author:** Kathryn Seifert M, CARE 2 LLC, 2336 Goddard Parkway, Salisbury, MD 21801, Tel: 443-754-1001, Email: k.seifert@espsmd.com

Received: February 05, 2016 | **Published:** February 11, 2016

Introduction

Three critical periods of development

Mass murder may be, in part, the result of rejections or failed attachments at the three critical periods of development: early childhood, adolescence, and early adulthood. Trauma and/or rejection by the focus of the attachment - the mother, father, caregiver, peer group, partner, or work colleague can interfere with the development of future problem-solving and interpersonal skills. Failure to attach can also result in inappropriate relationships with others. The greater the damage to the necessary attachment bonds, the greater the potential for the detached individual to later harm others.

The three critical periods of development are:

- (i) **Early Childhood:** Healthy attachment to family or caregivers in infancy or early childhood supports the development of the brain and the basic skills needed to communicate and form relationships with other individuals [1-4].
- (ii) **Adolescence:** Attachment to a peer group in adolescence allows a teen to understand:
 - a) Cooperating as part of a group
 - b) Working within a group
 - c) Following the rules of a group
 - d) Adapting to the idea that 'what is best for the group is best for the individual' [5].
- (iii) **Early Adulthood:** In early adulthood, the developmental task is attachment to a partner or to a career path so that the individual becomes part of something larger than themselves, whether that be a family of their own, a community, or a life mission [6] (Figure 1).

Any sort of trauma that significantly and negatively impacts a healthy bond at any of these three critical periods can be a

significant contributor to youth and adult violence and low levels of social functioning. Frequency and severity of the trauma can also be a factor in the outcome. If the individual experiencing the trauma receives appropriate help to overcome it, they may come away from the trauma stronger than they were before. Having the support and the resources to get through the ordeal can make the difference between people who are able to face the impact of the traumatic event and gain the skills and learn the lessons that are the byproduct of the process of overcoming the negative experience. People who do not receive help and support in working through the negative experience are most likely to drift into violent behavior patterns later in their life.

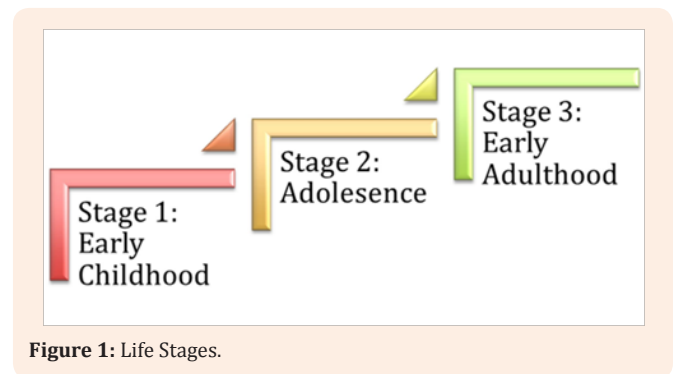


Figure 1: Life Stages.

Healthy attachment in infancy and early childhood

Attachment is the two-way emotional bond between two people, the basis of which is built in infancy. Babies are born innocent, helpless, and completely dependent on adults to take care of them. If a small and helpless baby is well-cared for and their needs are met, they form an attachment bond with their caregiver. If the baby responds with happiness and affection to the caregiver then a reciprocal bond is built from the caregiver to the infant. A healthy bond creates a feeling of well-being and attachment in both parties. It is crucial that the baby feels safe and develops trust with caregivers in order for them to grow up

socially and emotionally healthy. Trust is built when the child's needs are adequately and consistently met by the caregiver. This initial trust building is of critical importance because it is the foundation of the ability to form healthy relationships for the rest of the child's life.

Attachment is an ongoing process. As the infant grows older, develops further, and widens their social circle, there are opportunities to bond with more people and build upon the complexity of their existing relationships so that reciprocity, empathy, and compassion can develop [7]. Attachment to peers during adolescence broadens one's life experiences and adds texture to the structure and meaning of different kinds of relationships [8].

As the teen approaches early adulthood, the developmental task is attachment to a long-term relationship. While this attachment is often to a person, it is also sometimes to an important cause, religion, or discovery, such as Jane Goodall's lifelong devotion to the study of apes.

Attachment is necessary for healthy development

Everyone has natural rhythms in how they breathe, and move, and in how their heart beats. For a caregiver and infant, the ability of those rhythms to be in harmony is part of what makes a baby feel safe and loved. A mother instinctively rocks her baby in a soothing rhythm. This meets the need of the child and supports the bond between mother and child necessary for survival and brain growth. Attunement to an infant's needs is essential because the child, of course, do not have language to express their desires and needs; it is necessary for the infant to develop trust with the caregiver. The development of trust is essential for all future human relationships. Attunement is critical in infancy. It is possible that it can happen later in life, but it is not likely to be as effective.

There are eight vital functions of attachment bonds. Attachment bonds are reciprocal: from caregiver to child and from child to caregiver. The purpose of building strong attachments in infancy include keeping the caregiver close to the infant for protection and to meet the needs of child [9]. The process of building attachment bonds supports healthy development of the infant and is the basis for developing trust, reciprocity, and healthy relationships throughout their life. It also supports healthy brain development, teaches self-soothing, and how to build relationships through attunement. It is the basis for moral development [4] and creates a 'safe base' for exploring the world [10]. Attachment is necessary for the development of the amygdala and limbic system for emotional regulation and for the development of mirror neurons to create empathy.

The developmental aspects of attachment

Attachment is likely the basis for moral development in areas such as perspectives and empathy as well as an understanding of, and adherence to, the rules of society [4]. Healthy attachment creates a safe haven so the child can intermittently return to the warm safety of their mother's arms while exploring the unknown world. This is similar to historic explorers such as Columbus, Cabot, and Balboa, who developed their skills and knowledge of

the New World, and returned to the safety of their homelands to receive praise and adoration for their feats of valor. Young children do the same when they feel safe and confident enough to leave their mother's arms and explore. Positive attachment bonds in infancy are necessary for the development of the amygdala, the limbic system, mirror neurons, and emotional regulation.

Secure attachment leads to a positive view of self, others, and the world. It supports development of skills that are appropriate for age and IQ. Children who are well-attached form positive relationships with caregivers and others from an early age, develop a theory of mind, do not use aggression in their relationships, and are able to modulate emotions relatively well by ages 5 or 6. A youth will be academically successful in school to the best of their ability and behaviorally well-adapted by about 2nd grade. A developmentally-healthy child should be able to form trusting, reciprocal relationships, see things from another person's perspective, and possess empathy and compassion by age 10 [11,12].

William Jefferson Clinton (Healthy attachment despite childhood trauma)

An example of a healthy, secure attachment is the story of former president William Jefferson Clinton. William was born in Arkansas in 1946; his father was killed in a car accident several months before he was born. Following the birth of her son, Virginia Cassidy Blythe moved in with her parents and began attending nursing classes, leaving William in the care of his grandmother for long periods of time. It appears that he was well cared for by his grandmother, who taught him to read at an early age and had a significant influence on the formation of his character [13]. When William Clinton was about 4 years old, his mother married Roger Clinton; they soon moved in with him. He was an alcoholic who became abusive toward Virginia and his own son, Roger Junior. Ultimately, Bill Clinton had both loving and aggressive attachment experiences in his youth, Stage 1 of his attachment development.

Clinton went on to be successful in high school and college, thus supporting his attachment to his social group, stages 2 and 3 of attachment development, and evidenced by his positive activities and achievements during his education. When William Clinton was 17, he traveled to Washington, D.C. as one of two young Arkansas delegates in an imitation political convention. During the trip, he was afforded the opportunity to meet President John F. Kennedy in the Rose Garden of The White House [14]. Following this meeting, Clinton was determined to fulfill his mother's prediction that he would someday be President of The United States of America. When he successfully graduated from high school, he attended Georgetown University in Washington, D.C. and studied International Affairs. His determination to succeed was apparent during his time at Georgetown. He was awarded the Rhodes scholarship to study at Oxford University in England, which meant he was excused from the Vietnam War draft. He then went on to study law at Yale Law School, where he met Hilary Rodham; they married in 1975 [13]. Bill Clinton's political aspirations culminated in his becoming the 42nd President of the United States in 1993 and he went on to serve two terms. He continues his international philanthropic work through the Clinton Foundation.

Mother Teresa (Healthy Attachment Despite Childhood Trauma)

Another example of a healthy, secure attachment is the story of Mother Teresa. Agnes Gonxha Bojaxhiu, later known as Mother Teresa, was born in Skopje, Macedonia (formerly the Ottoman Empire) in 1910. Her parents were devout Catholics of Albanian descent. They were very supportive of their children and believed in being charitable and sharing what little they had with others who were less fortunate. Although she was well-attached in a stable family, Agnes suffered a terrible loss early in life; her father died when she was 8 years old. It is believed he was poisoned by political enemies [14].

This pious and loving family was negatively impacted, financially and emotionally, by her father's death. Through this difficult period in her life, Agnes had no behavioral problems and remained a diligent student who was active in church. Her father's death led Agnes to become even closer to her mother, who had a deep commitment to human kindness and involved her daughter in her charitable work. At the age of 12, Agnes, believing she had heard God's call, became deeply religious and set out to become a missionary. At 18 she left the family home and became a nun. She began her work helping the poor and downtrodden around the world through the Catholic Church [14]. It has been reported that Mother Teresa never saw her mother again after she became a nun, suggesting that her childhood attachments were set-aside for her adult spiritual attachment.

Disrupted attachment delays development of basic life skills

There are two processes that can disrupt early attachments and negatively affect relationships and skill development for a lifetime, if the damage is left untreated by caregivers. Disruptions can take either of the following forms:

- i) Unresolved, repeated, and severe trauma, including neglect of basic needs, and
- ii) 2) Insufficiently-treated severe mental illness or autism in childhood, which inhibits the child from bonding to his or her caregivers.

Disruption can also be caused by an amalgamation of problem areas. Combinations of severe problems in multiple domains, which include trauma and/or severe and persistent mental illness, are most likely to lead to a violent future if not effectively treated.

When attachment bonds are disrupted, there can be problems with:

- a) Skill development
- b) Interpersonal relatedness
- c) Self-concept
- d) Self-management
- e) Theory of mind
- f) Emotional regulation
- g) Development of pro-social values

- h) Brain development
- i) Family cohesiveness and relationships

Early trauma affects brain development and brain-to-body communication because the brain is still developing throughout childhood. The brain over-proliferates brain material followed by "use it or lose it" trimming. Epinephrine, nor epinephrine, serotonin, and dopamine are the brain-to-body communicators, or neurotransmitters; they process information from the environment so it is usable by the brain. Trauma changes the levels, effectiveness, and patterns of the neurotransmitters, consequently changing mood, memory, perception, cognition, and behavior. Post mortem examinations of toddlers have shown that the amygdala, a brain area involved in emotional regulation, may be smaller and less effective in children who have experienced early childhood trauma within the context of non-supportive families, than in children that have not experienced any major traumas [15].

Fight, Flight, or Freeze

Severe or repeated trauma can interfere with attachments at any one or more of the three critical periods of development. The inability to escape severe, repeated trauma leaves a child trapped in fight, flight, or freeze mode. In the animal world, a creature can run from a predator, fight that predator, or 'play dead' and make themselves seem small and insignificant. These are all effective survival mechanisms. Predators often attack and eat unprotected and defenseless offspring of other animals; as a result, the offspring become very fast, very mean, or very dead.

Speed is a good attribute for prey to have and fleeing is a popular choice in the animal kingdom, much like how running away is a common choice today for children who are abused or neglected at home. In the United States, we have many runaway children who make their own way in the world until taken in by gangs and predators who are involved in prostitution and drugs. Unprotected children in today's society have the same choices to survive as animals in the wild: run away, or become more vicious than those who prey on them.

In a chronic state of fight, flight, or freeze, all of the child's energy is applied to self-preservation. This leaves few resources for the development of new skills, such as interactive play, problem solving with others, interpersonal communication, emotional regulation, and empathy. In fact, having a trauma bond with one's abusive or neglectful caregiver causes the child to emulate his abuser as a means of self-protection. Becoming aggressive in a persistently dangerous home is adaptive in a toxic environment, but would not be effective in a healthy environment where trust and cooperation are the norm.

Rotating between communities based on trust, such as a school, and a world based on fear and pain, such as an abusive home environment, becomes a real challenge for children with a foot in each domain, as each requires a different type of adaptation. Children in this circumstance tend to be pulled more in one direction or the other depending on their survival needs. This means they are likely to function less effectively in one environment or the other. When living in an abusive home, survival skills like aggression are what is required and will have the stronger pull on the child's resources.

Developmental trauma disorder

Violence within the context of an intimate, dependent relationship does extreme damage to attachment bonds in childhood. Forming healthy relationships later in life and reframing their past experiences through counseling or therapy can help individuals move past their childhood trauma, and they often become stronger than they were before.

Childhood trauma can lead to Developmental Trauma Disorder or DTS [16]. In DTS, the victim is psychologically and physically immature and dependent on others. Their development is often seriously compromised by repetitive abuse and inadequate response to that abuse by family members or others on whom the child relies for safety and protection. One of the symptoms of this is dysregulation. Most of us can manage our emotions so that we do not get too angry, upset, or sad. We first learn to manage our emotions when our caregivers soothe us as infants and show us how to calm down. When caregivers do not provide this for a baby, their emotions can get out of control during an upsetting situation instead of staying within an acceptable range as the child continues to develop. The person is emotionally dysregulated. Other symptoms include severe problems with interpersonal relatedness and ineffective general functioning. This lack of development of skills can result in poor school performance, rejection by peers, symptoms of mental illness, behavior problems, and substance abuse.

The moors murderers of England

As a child, Myra Hindley was physically abused by her alcoholic father. At 5 years old, Hindley was sent to live with her grandmother. However, the damage had already been done to her psyche, social functioning, coping skills, and brain maturity. In her teen years, she had poor attendance in school and suffered the death of her closest friend. Lacking the skills for a pro-social relationship, she became devoted to Ian Brady and his life of sadism, pornography, and Nazi admiration. Hindley and Brady lacked the skills to find satisfaction in a deep interpersonal relationship, so they sought excitement through the adrenaline rushes found in risky and horrific behavior.

Together they sexually abused, tortured, and killed five children and teens in the 1960s and became known as the Moors Murderers of England. Like an addiction, each horrible act had to be followed by one even more horrific than the previous one, in order to generate the same level of rush for Hindley and Brady. Soon, nothing mattered but the "rush". Having no empathy or remorse, they recorded the pleas for help of at least one of the children as she was tortured. This was likely to re-experience the rush at a later time. Brady and Hindley were arrested by police and put on trial. Both received life sentences with a 30-year minimum term. Hindley died in jail in 2002 and Brady is now the longest serving prisoner in England and Wales.

Theory of mind

An early attachment problem worthy of note is the lack of development of a theory of mind. Theory of mind is a person's recognition that they have a mind and that others have a mind, each with a point of view, which can differ from their own;

this skill should be fully developed by age 5. It is the basis for perspective-taking, interpreting the intentions of others, and empathy. Certain brain functions and social experiences are necessary for an individual to develop a theory of mind. Some children who have been badly treated in early childhood can develop non-existent, poorly-developed, or distorted theories of mind. When this is missing, the child does not adequately develop feelings of empathy, understanding another person's intentions, or reciprocity. A study in 2005 demonstrated a significant relationship between being placed in foster care and not having an adequately developed theory of mind [17].

Richard speck

The notorious mass murderer, Richard Speck, did not have an adequate theory of mind and possessed an extreme hatred for women. Speck was 6 years old when his father died and his mother remarried. Speck was severely abused by his cruel, alcoholic stepfather. By age 12, he became a substance abuser like his stepfather and was frequently in trouble with the law. Speck beat and brutalized his mother at 18 and was a suspect in several brutal murders. He did not do well in the job market and was somewhat of a loner in his personal life. In 1966, Speck ruthlessly raped and killed eight nurses who were living together in a townhouse on the south side of Chicago. He was arrested, convicted, and spent the rest of his life in jail until his death in 1991 [18].

Psychiatrist Marvin Ziporyn reported that Speck had experienced several head injuries, had a low IQ, and exhibited sporadic, compulsive rages. Ziporyn further described Speck as impulsive, willful, and self-centered. He saw women in black and white categories as either perfect and untouchable, or terrible whores who deserved to be punished. However, in prison, Speck dressed and acted like a female, which may have been to gain favors from other inmates, because he was sexually ambivalent, or both. Many believed he was psychopathic and that he would do whatever it took to survive [18].

Relationship health

Relationship health can range from hurtful to altruistic and from withdrawn from society to engaged. The graphic below demonstrates this. An example of a person who is altruistic and engaged was Nelson Mandela, who was revered worldwide for his role in the fight against Apartheid in South Africa. An example of a person who can be described as hurtful and withdrawn is Charles Manson. Attachment experiences in infancy will contribute to the relationship patterns of a child. Without effective interventions, dysfunctional patterns can last a lifetime.

In an original research study, (Blinded) compared a sample of six altruistic persons, six violent criminals, and six ordinary citizens. Examples of the types of people evaluated in the study were: Nelson Mandela, Mother Theresa, Charles Manson, and Charles Whitman. The research indicated that the differences between the two pro-social groups (altruistic and ordinary citizens) and the violent group were a supportive family, school success, and engagement in positive activities (Figure 2).

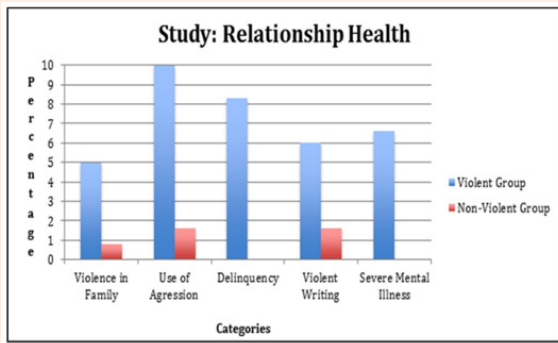


Figure 2: Relationship study.

Fifty percent of the violent group had experienced violence in the family while they were growing up, as opposed to 8% of the two non-violent groups. Aggression was used in 100% of the violent group and 16% of the non-violent group, delinquency at 83% versus 0%, violent writing at 66% as opposed to 16%, and incidence of severe mental illness was at 66% as opposed to 0% of the two non-violent groups. The groups did not differ greatly on the percentage of the children who had difficulty in school or who were bullied. All the children in the non-violent groups were engaged in positive activities in childhood, while none in the violent group were engaged in positive activities in childhood. 83% of the non-violent group had nurturing families, while only 16% of the violent group had a nurturing family (Blinded).

Nelson Mandela (Healthy attachment base despite childhood trauma)

Nelson Mandela was born in Transkei, South Africa on July 18, 1918. His father died when he was about nine years old, and he soon became placed under the guardianship of Chief Jongintaba at the Great Palace in Mqhekezweni. Despite the loss of his father, Mandela was well cared for as a child. However, he was reportedly bullied in boarding school by a group of older students. He completed college and law school and started South Africa's first black law firm. In 1944, Mandela joined the African National Congress, an organization dedicated to expanding the rights of South Africa's black population. Mandela spent 26 years in prison (from 1964 to 1990) for his involvement in opposition against the Apartheid government, which included a peaceful gathering on March 21, 1960. When police fired on the protesters, 69 people were killed and 180 were severely wounded in what became known as the Sharpeville Massacre [19].

Mandela was released in 1990. In 1993, he received the Nobel Peace Prize along with F.W. de Klerk, the president of South Africa at the time. He succeeded de Klerk and became the first democratically-elected president of South Africa in 1994. After one term as president, he stepped down from politics and created the Nelson Mandela Foundation, which continues to perform many charitable works. The fight between the powerful and the powerless is evident in Mandela's early adulthood. He adopted a non-violent approach against Apartheid and embraced healing among ethnic groups once he was elected to office [19]. Although he died in December 2013, the breadth of his influence on the

world has continued. He was able to access something within himself that enabled him to not only overcome the adversity he experienced as a child and young man, but to step into a position of global leadership and communicate a message of healing and reconciliation to his country and the broader world.

Charles Whitman

On a hot summer day in August 1966, Charles Whitman shot and killed 14 and wounded 30 over the span of 96-minutes from his perch on the bell tower at the University of Texas. Whitman's father who, while he was an adequate financial provider for his family, was a gun fanatic with a vicious temper. This was manifested in savage, frequent beatings administered to his wife and children as a way to ensure their compliance with his rules [20]. Following yet another beating from his father, at age 18 Whitman entered the Marines. Initially, he was extremely successful as a result of his hard work and the structure afforded him by the military. The Marine Corp sent Whitman to college; he did not do well in an unstructured environment and soon returned to the military. When he resumed the military lifestyle he began to demonstrate significant aggression and participated in petty crimes. He was demoted and eventually discharged from the service [20].

Similar to Navy Yard shooter Aaron Alexis, Whitman acted out before the shooting, but his actions flew under the radar and were not pieced together. As a result, no serious concern arose and no treatment was mandated because he was not believed to be dangerous. Whitman frequently beat his wife; this should have been an indicator for a propensity to commit violence. On March 29, 1966 he attended counselling with Dr. Dean Heatly about his rage and fears that he might 'snap'. He described his fantasy of shooting people from the tower. However, Heatly did not consider him a danger to himself or others because several of his patients had similar fantasies and had not carried them out. Presumably, Dr. Heatly did not know about or consider Whitman's domestic violence as a red flag for violence toward others. Whitman was encouraged to stay in treatment but chose to ignore this advice [18].

During the early hours before the shooting, Whitman killed both his mother and his wife. Then, with a large cache of weapons, he climbed the Tower, where he killed 14 and wounded 30. It is believed that Whitman had trauma issues and a personality disorder. The Tower has since been re-opened, but with the added precautions of a metal detector, guards, and a protective lattice on the top deck to prevent future shootings [20].

Adolescent attachment to a peer group disrupted by rejection and bullying, causing further delays in development of basic skills

One of the developmental roles of adolescence is for a young person to find a peer group and forge relationships with other teens. According to a study conducted by MIT, there are 10 key developmental tasks of adolescents, including: establishing key aspects of identity, forming friendships with others, adjusting sexually to maturing bodies and feelings, and developing new coping skills [21]. These tasks are extremely important to the health and well-being of the individual and their community.

Well-accomplished developmental tasks form the basis for the next stage of developmental complexity. Without this, future skill-building will be delayed and adversely impacted as an adult. When teens are rejected and bullied, they become detached during a time when it is necessary that they enter and belong to a peer group to further their development. Peers can reject the child because they are different, and they can be rejected by teachers because they are unruly, difficult to like, and disruptive students. Rejection by their peers is a significant blow to a young person's self-esteem and it can thwart social and emotional development.

Adolescents can strive for independence in an exaggerated way when they are bullied by peers, rejected by family, or failing in school. This rejection, known as 'recognition denial', can be associated with anger, rage, and lack of strong attachment bonds to family, school, work, or community. The answer in the past has been to suspend them – to detach them from the school. It is another blow to their self-esteem and has been associated with violence in some studies [22].

Columbine school shooters

The FBI study of school shooters found that most of these shooters had subjectively experienced bullying or peer rejection. A case in point would be the shootings at Columbine [23]. Eric Harris (Chronic Group) and Dylan Klebold (Erupter Group) reportedly felt bullied by the jocks of the school. Klebold was depressive and suicidal, possibly psychotic. Harris was likely a psychopath who hated the world and everyone in it. They were a deadly combination [24]. Harris and Klebold wrote about their seething rage and wanting revenge against those that bullied them. Before the Columbine Massacre, both were arrested for theft but successfully completed a diversion program. Their risk for future dangerousness was not effectively assessed or detected. Harris wrote in his journal about manipulating the system by pretending to be remorseful about his misdeeds and about admiring Nazi ideals. Both used violent themes in their creative writing in school. The pair acquired guns through straw purchases. On April 20, 1999, to the horror of the entire world, they killed 13 people and wounded 24 others at Columbine High School in Colorado [24].

Aileen Wuornos

Disruption of attachment bonds at the critical periods of early childhood and adolescence can be twice as tragic. Take the example of Aileen Wuornos, born in Michigan in 1956. Wuornos' childhood was full of abandonment and despair. Her biological father served time in prison for molesting a child and later hung himself in his cell. Aileen's mother, who began motherhood as a teenager, lamented that the children were crying, unhappy babies, and left Aileen and her brother with their maternal grandparents when Aileen was only four years old [25]. At age six, Aileen suffered facial burns while setting fires with lighter fluid and possibly had sex with her brother at a young age, a claim which has not been verified. Aileen was often truant from school and was pregnant at 14. In the same year, her grandmother went into violent convulsions and died. There was suspicion that Aileen's grandfather was to blame [25].

Aileen soon entered a bleak existence of hitchhiking and prostitution, picking up several charges of drunk, disorderly behavior and assault along the way [25]. She was later charged, convicted, and executed for the murder of six men she had had sex with, claiming and then refuting, that she committed them in self-defense. Had her family provided for her emotional needs, or if she had been placed in a safe loving home with sufficient treatment, her murder spree might have been avoided. Aileen was never able to form an attachment to a peer group or develop the capacity for empathy with others...

Adam Lanza

Adam Lanza was mentally ill and/or on the Autism Spectrum when he killed 28 people at sandy Hook. He had become increasingly isolated from his family and peers. His ability to communicate with others and solve problems became less effective or never fully developed. He was also very bright intellectually, but socially awkward. He failed to find peers with which he could bond. Adam was fascinated with mass killings and was allowed to have guns. His mother refused treatment for him despite the recommendations of professionals and his deteriorating condition and increasing isolation.

Unsuccessful attachment to a partner and/or a career path in adulthood

The records of many mass murderers show that they failed to attach to a partner or have success at a job, school, or a career as an adult. Failure to attach, a critical developmental task of early adulthood, can be a significant blow to a fragile ego. Rejection or lack of attachment at this critical period is found among the histories of mass murderers such as Charles Whitman, Colin Ferguson, and Aaron Alexis, all in the Erupter Group.

A recent meta-analysis demonstrated that the amount of damage caused by childhood trauma is strongly related, not just to the trauma itself, but also to a lack of family support and high family disorganization [24]. These simultaneous events are related to the development of severe narcissistic, anti-social, and borderline personality disorders. The cornerstone of these disorders is the person's lifelong inability to form successful interpersonal relationships in adulthood. This is evidence of the failure to attach to a partner or career path at the early adulthood critical period of development; these are paths which are very difficult to change once a person reaches adulthood. However, the change is easier to ameliorate through trauma-informed treatment and skill-building during childhood and adolescence.

More recently, the Aversive Childhood Experiences (ACE) studies completed under the auspices of the Center for Disease Control has demonstrated the relationships between aversive childhood experiences and poor life outcomes in physical and behavioral health [26].

Charles Manson

Charles Manson failed to attach at the infancy and the adult periods of development. His mother was a callous teen-age alcoholic who severely neglected her son. When he was an infant,

she once sold him to another waitress for a pitcher of beer. Because of her gross neglect, Manson spent most of his teenage years on the streets and in institutions. He, like his mother, was a chronic substance abuser [27]. Manson had delays in relationship skill development due to his early childhood neglect. He learned how to charm people, and to manipulate other for his own advantage, but he never learned to attach. It is likely, if he had been in treatment, he would have been diagnosed with antisocial personality disorder.

Charles Manson and some Manson Family members stayed at the home of Dennis Wilson, a member of the band The Beach Boys. The connection to Dennis Wilson is believed to have helped Manson get an audition with Terry Melcher, son of Doris Day. Manson's music was rejected by Melcher, resulting in a severe narcissistic wound. Some experts speculate that his rejection was the reason why Manson chose Melcher's former home as the place to commit murder. Manson has always claimed that he did not kill anyone, and that it was his family who committed the murders. At the time of the trial, he appeared to be delusional, and believing himself to be the new Messiah, who would create race wars that would lead to worldwide destruction, 'Helter Skelter', from which he would emerge as the leader.

Byran Uyesugi

On November 2nd, 1999, Byran Uyesugi killed seven people and wounded eight others at the Hawaii Xerox building in which he was employed. He failed to attach during the adult period of development because of major work problems and schizophrenia. He had a low stress threshold and problems with anger. Uyesugi had worked for Xerox for 15 years and often had conflict with staff and customers. His work performance was poor, and he had been ordered to seek counselling. His flashpoint was reached when his manager informed him he would either have to adapt to new technology or face dismissal from his job. Uyesugi responded by bringing a pistol to his workplace and opening fire. One victim was his supervisor, while others on his work team were also targeted. Eleven handguns, five rifles, and two shotguns were found in his home. Uyesugi was diagnosed as schizophrenic, but doctors found that he understood the difference between right and wrong. He was found guilty and given a life sentence [18].

Seung-Hui Cho

As a youth, Seung Hui-Cho was diagnosed with selective mutism and severe social anxiety for which he was in an Individualized Education Program [28]. Cho was given special accommodations for verbal participation in school classes. He had had difficulties since childhood with social and communication skills and in forming relationships. Cho had difficulties attaching to others at all three critical periods of development.

The media reported that Seung Hui Cho was treated for mental health problems or an autism spectrum disorder until the age of 18, when he chose to stop therapy because he felt as though he no longer needed it. At this time, he left home for college. It was recommended that he enter a smaller college than Virginia Tech because of his issues, but he rejected this idea [29].

While at Virginia Tech, Cho was mostly non-verbal. He was allegedly pressured to speak in class and was teased about his inability to verbalize his thoughts. His college writing was known to be gruesome. This fact offers evidence of his failure to express himself and attach to an adult career path.

He was twice accused of stalking female students, and often took pictures of women's legs and knees. These behaviors were evidence of his inability to relate to women sufficiently enough to find a female companion. Cho was suicidal in 2005. He was taken to a mental health facility for an evaluation where he was found to be mentally ill and a danger to himself and others. Cho was ordered to attend a mental health treatment program, but this was never monitored and he did not follow through with treatment [29]. As a result of this system failure, Cho was later responsible for the Virginia Tech massacre, killing 32 people and wounding 17 others in one of the most devastating mass murders the United States has witnessed.

Tamerlan Tsarnaev

Tamerlan Tsarnaev, one half of the Boston Marathon Bombers, reportedly had a severe mental illness, battled inner demons, and had a history of domestic violence as an adult [30]. Not much is known about his early life, except that he was born in Chechnya, a country that still has considerable violent influences in its communities. The flashpoint that changed Tamerlan's life and set him along a violent path appears to be the ending of his Olympic boxing dream. Following Tamerlan's second consecutive Golden Gloves heavyweight champion of New England title he was excluded from the National Tournament of Champions due to a change in the rules, which meant that non-U. S. citizens could no longer compete. The decision left him devastated and he withdrew completely from all boxing competition [31]. It was following these events that Tamerlan became dedicated to radical Islam.

Tamerlan Tsarnaev and his brother Dzhokhar committed one of the most brazen and horrific terrorist attacks ever seen on U.S. soil on April 15th, 2012, when they bombed the Boston Marathon, killing three and injuring well over 250 people in downtown Boston [32]. What followed was a massive manhunt for Tamerlan and Dzhokhar that ended in Tamerlan's death and the non-fatal shooting and subsequent arrest of his brother, who will stand trial in 2014 and could face the death penalty.

James E. Holmes

James, age 24, killed 12 and injured 58 outside a movie theatre in Aurora, Colorado, in July 2012. He was self-described as "quiet and easygoing." Others said he was exceptionally bright and there was no history of violence. However, he had a long history of mental illness including homicidal thinking since childhood. This would indicate a failure to attach to peers and see things from another person's point of view. Moving away from home to college where he faced challenges for which he was unprepared, pushed him further into psychosis and away from natural social supports. He failed to attach to a life goal or a group of peers to further his development into adulthood. By the time he went for psychiatric care, he was beyond the point of no return.

Conclusion

Healthy attachment to early caregivers is essential for wholesome infant and childhood development, which is the foundation for later growth. When children are well cared for, the attachment bonds are likely to be strong and healthy. This supports the development of relationship, communication, problem solving skills, and adequate emotional regulation. Good bonding keeps the caregivers close so they can attend to the needs of the offspring, creating a safe base from which they can explore the world. An example of healthy family bonding and its results would be the life of Mother Teresa, described earlier in this chapter, and her life of caring for the poor and disadvantaged.

Disrupted attachment bonds in infancy appear to have two sources: childhood trauma, as in the case of Charles Manson, and childhood mental illness or autism spectrum disorders, as in the case of Seung Hui-Cho. Inability to escape trauma leaves one stuck in the phase of fight, flight, or freeze. For young children, this can interfere with the development of basic skills for coping with the world, including severe disruption in the ability to form adequate and healthy relationships with others. An example includes Myra Hindley, raised by an alcoholic and abusive father. Showings of support and assistance from family or professionals can help children overcome trauma, learn skills, and lead a pro-social life.

Perspective-taking is preceded by a theory of mind and followed by empathy. Those that do not have a theory of mind cannot see things from another person's perspective. Lack of this is associated with early childhood maltreatment and is usually fully developed by age 5 or 6. The killer Richard Speck did not possess an adequate theory of mind.

Rejection of adolescents when they are developmentally geared to attach to a peer group is an especially tragic blow to the teen ego. It is the second time that they have had the opportunity to attach. Attachment disruption during infancy and adolescence can be extremely damaging. The FBI study on school shooters found that the majority of school shooters felt that they had been bullied by peers, including Harris and Klebold at Columbine High School.

In adulthood the developmental task is to find and form a relationship with a partner and/or to start on a career or family path. When people feel rejected or are unable to successfully manage either tract, this can be a factor contributing to a violent act.

Without sufficient adult support during these vital developmental stages, youth may not internalize the rules of society, see things from another person's point of view, gain empathy for others, socialize adequately with peers and authority figures, solve problems and learn to get their needs met without using violence. Reductions in violence in our society will come when the adults in each society ensure that the youth develop appropriate interpersonal and life skills to succeed in a very diverse world.

References

1. Bowlby J (1980) Attachment and Loss, sadness and depression. Basic Books, New York, USA.
2. Mooney CG (2010) Theories of Attachment: An Introduction to Bowlby, Ainsworth, Gerber, Brazelton, Kennell, and Klaus. Redleaf Press, USA.
3. Erikson E (1970/1975) "Identity Crisis" in perspective. In: Erikson E (Ed.), Life History and the historical moment. Norton, New York, USA, p. 18-22.
4. Kohlberg L (1969) Stage and sequence: The cognitive approach to socialization. In: Goslin D (Ed.), Handbook of socialization theory and research. Rand McNally, Chicago, USA.
5. Dodge KA, Pettit GS (2003) A biopsychosocial model of the development of chronic conduct problems in adolescence. Dev Psychol 39(2): 349-371.
6. Gottfredson MR (1990) A General Theory of crime. Stanford University Press, Stanford, USA.
7. Valsiner J (2007) Culture in minds and societies. Sage, New Delhi, India.
8. Mercer J (2006) Understanding Attachment: Parenting, Child Care, and Emotional Development. Praeger, USA.
9. Bowlby J (1969) Attachment and loss. Basic Books, New York, USA.
10. Ainsworth MB (1978) Patterns of attachment: A psychological study of the strange situation. Erlbaum, Hillsdale, New Jersey, USA.
11. Bowlby J (1976) Separation and loss within the family. In: EJ (Ed.), The child in his family: International Yearbook of Child Psychiatry and Allied Professions. Wiley, New York, pp. 197-216.
12. Levy TA (1998) Attachment, trauma, healing: Understanding and treating attachment disorder in children and families. CWLA Press, Washington DC, USA.
13. Miller Center (1914) Clinton Life Before the Presidency.
14. Spink K (2011) Mother Teresa (Revised Edition): An Authorized Biography. Harper Collins, New York, USA.
15. Perry B (2002) Childhood Experience and the Expression of Genetic Potential: What Childhood Neglect Tells Us About Nature and Nurture? Brain and Mind 3: 79-100.
16. Kolk B (2005) Developmental trauma disorder: Towards a rational diagnosis for children with complex trauma histories. Report of the APA DSM IV committee.
17. Fisher PA, Burraston B, Pears K (2005) The early intervention foster care program: Permanent placement outcomes from a randomized trial. Child Maltreat 10(1): 61-71.
18. Ramsland K (2005) Inside the minds of mass murderers: Why they kill. Praeger, Westport, CT, USA.
19. Meredith M (2010) Mandela: A biography. Public Affairs, Perseus Books Group, New York, USA.
20. Laverne G (1997) A sniper in the tower: The Charles Whitman murders. University of North Texas Press, Denton, Texas, USA.

21. Simpson AR (2001) *Raising Teens: A synthesis of research and a foundation for action*. Harvard School of Public Health, Cambridge, USA.
22. Brezina T (2008) Recognition denial, need for autonomy, and youth violence. *New Dir Youth Dev* 119: 111-128.
23. FBI (1999) *The School Shooter: A threat assessment perspective*. FBI Academy, Quantico, Virginia.
24. Cullen D (2011) *Columbine*. Hachette Book Group, New York, USA.
25. Russell S (2010) *Lethal Intent*. Kensington Publishing Company, New York, USA.
26. Trickey DSS (2012) A meta-analysis of risk factors for post-traumatic stress disorder in children and adolescents. *Clin Psychol Rev* 32(2): 122-138.
27. CDC (2013) *Injury Prevention & Control: Division of Violence Prevention*.
28. Guinn J (2013) *Manson: The Life and Times of Charles Manson*. Simon and Schuster, New York, USA.
29. Office of Governor of Virginia (2009) *Mass Shootings at Virginia Tech: Addendum to the report of the review panel*. New York Times.
30. Kleinfeld J (2009) The state of American boyhood. *Gender Issues*: 113-120.
31. NY Times (2013) *A battered dream, then a violent path*.
32. Smith D (2011) *Witness (later issued as Evil Relations): The Story of David Smith, Chief Prosecution Witness in the Moors Murders Case*. Mainstream Publishing, Edinburgh, Scotland.