Buchheim, A., & George, C. (2011). Attachment disorganization in borderline personality disorder and anxiety disorder. In J. Solomon & C. George (Eds.), *Disorganized attachment and caregiving* (pp. 343-382). New York, NY: Guilford Press. *(Peer-reviewed volume)*

Author Abstract:

Research has shown a strong correspondence between unresolved attachment and psychiatric symptoms in clinical samples, however we know little about how unresolved loss is related to adult psychiatric symptoms. Some researchers have called for expansion of the field's understanding of mental health risk and unresolved attachment (e.g., Lyons-Ruth et al., 2003; Spieker et al., 2011). The goals of the current study are to (1) examine the convergent validity of the AAP and AAI in a German sample of psychiatric patients and controls and (2) use the AAP to begin to ravel what may be diagnosis-specific nuances in unresolved attachment in adults diagnosed with borderline personality disorder (BPD) and anxiety disorders. With regard to convergent AAP/AAI validity, AAIs were coded by two reliable AAI judges and AAPs were coded by the authors. All judges except the first author (who coded AAPs) were blind psychiatric status. AAPs were coded by the second author using English translations. Interjudge AAP reliability was 98% (kappa = .97, p<.000). AAP/AAI concordance was 84% for four classification groups (kappa = .71, p<.000), 91% for secure vs. insecure (kappa = .70, p<.000), and 88% for unresolved vs. resolved (kappa = .75, p<.000). The patient groups showed significantly more unresolved attachment than the controls. There were no significant differences in the attachment classification distribution between BPD and anxiety patients, with predominant classifications of preoccupied and unresolved. Trauma patterns were examined using a newly developed "trauma risk screening" coding system developed for the AAP for this study. As predicted, the patients demonstrated significantly greater trauma indicators in their responses to the alone AAP stimuli as compared with the dyadic stimuli. Traumatic content in the responses to each AAP stimulus and class of stimuli (i.e., alone, dyadic) were examined. Results indicated that BPD patients tended to demonstrate the strongest dysregulation in response to fears of being alone combined with isolation, which are related to severe abuse combined with loss of protective attachment figures. Anxiety patients were also dysregulated, but less so than BPD patients. The representations of anxiety patients depicted contradictory models of protective attachment figures in hypothetical stories juxtaposed with shifts in attention to their own threatening personal experiences.