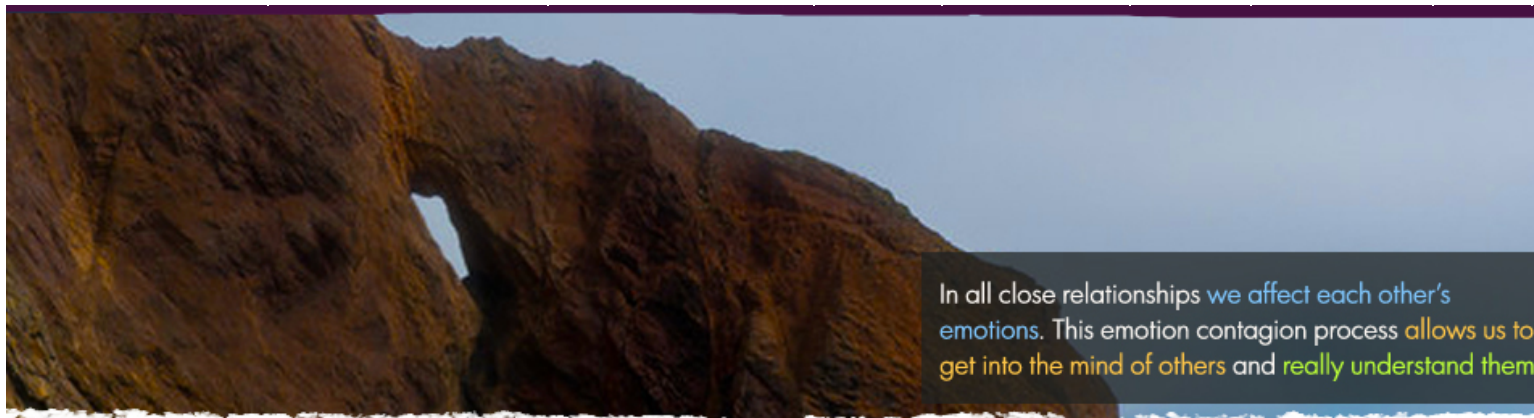


DANIEL SONKIN, PHD

Licensed Marriage & Family Therapist

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In all close relationships we affect each other's emotions. This emotion contagion process allows us to get into the mind of others and really understand them.

Can Secure Base Priming Enhance the Effects of Psychotherapy?

Daniel J. Sonkin, Ph.D.
Sausalito, California

John Bowlby's attachment theory (1969, 1973, 1980) revolutionized developmental and social psychology (Cassidy and Shaver, 2008), and infant mental health research (Beatrice and Lachmann, 2013). More recently both researchers and clinicians have begun to explore its clinical application as well (Obegi and Berant, 2010). Attachment theory has become a widely accepted concept, whose clinical appeal has grown over the past decade. What is not known as broadly, is that social and personality psychologists have also been interested in attachment theory, primarily in its application to adult relationships (Mikulincer and Shaver, 2010) and group dynamics (Simpson and Rholes, 1998). Two particular social psychologists, Mario Mikulincer and Philip Shaver (2010) through their collaboration, have greatly expanded our understanding of attachment in adult relationships, and in particular, the underlying cognitive and emotional processes that lead to particular attachment behaviors (Mikulincer, Shaver, Sapir-Lavid & Avihou-Kanza, 2009). What is most fascinating is their research on secure base priming which they have been conducting for the past 13 years (Mikulincer and Shaver, 2001). The implications of their findings, as well as the methodology they employed, are very applicable to our work as psychotherapists.

This article will focus on the details of the studies on secure base priming. I will propose a model for utilizing secure base priming in a similar manner as contemporary brain-training programs. I will also discuss how secure base priming can enhance the therapeutic process of earned-security that occurs within the context the therapeutic relationship as well as through security-boosting clinical interventions. Although secure base priming is based in attachment theory, the clinician doesn't need to be "attachment oriented" because these effects may enhance the positive effects resulting from any therapeutic model.

Attachment Theory: Important Concepts

Attachment theory has been extensively reviewed elsewhere (Cassidy and Shaver, 2008, Bowlby, 2005, Bowlby and Ainsworth, 2013), but there a number of important concepts that will put this article into context for both for the person new to attachment theory as well as the reader already familiar with the theory.

1. **The question is not whether or not a particular child is attached to a specific caregiver, but it's the quality of their attachment.** The term attachment is utilized in discourse in categorical terms – one is attached or not attached. Frequently people refer to a child as "not being attached" to its parent or "very attached" to its parent. Developmental psychologists believe that all infants attach to their caregivers (Main and Weston, 1981) - it is the quality of that attachment that differentiates children and caregiver dyads. For example, a child that doesn't seek proximity when distressed can still feel attached to their caregiver. One may ask if the child were distressed, why wouldn't they seek closeness and/or protection when frightened or distressed? One reason is that the child has learned, through their experience with that particular caregiver, that seeking proximity doesn't not relieve distress or help solve their problems. So they have learned to down-regulate the natural instinct to seek protection because a particular attachment figure has been *reliably* unresponsive to the child's needs. However, if another more reliable attachment figure is available, they are more likely to seek comfort from that person. The same can be said about children who are clingy or what some people would describe as "very attached." Clingy, or resistant/ambivalent attachment, behavior can develop through interactions with an unreliable caregiver and the clingy behavior can be a way of optimizing a helpful response by the caregiver, not because the child is *more* attached. A similar statement can be made about many adult relationships. Not seeking proximity when distressed or needing help doesn't mean a person is unattached or doesn't love their partner it can simply mean they have learned to down-regulate the need for closeness. Likewise, jealous or possessive behavior doesn't mean a person is *overly* attached. They have learned to up-regulate to manage anxious feelings of abandonment.
2. **Attachment theory is an interpersonal theory.** Infants, children and adults have their attachment representations created, maintained and modified through interactions with others. For this reason, attachment theory is the perfect model for MFTs who are specialists in relationships. Attachment theory is also a natural fit for clinicians working from a systems model (Meyer, Wood & Stanley, 2013). The interactions observed between parent and child, and between parents/couples in part evolve over the history of the particular dyad, but also based on their childhood experiences caregivers. Those

experiences were encoded in both implicit and explicit memory (ibid) and therefore the resultant attachment behaviors are automatic, and can be altogether not conscious. Psychotherapy is, in part, helping people become more conscious of their unhealthy behavior patterns so that change is possible.

3. **There are different types of insecure attachment.** The terms for the different types of insecure attachment differ depending on whether or not you are referring to infants/children or adults. *Avoidant* children are referred to *dismissing* adults. *Resistant or ambivalent* children are referred to as *preoccupied* adults. And *disorganized* children are often referred to as *disorganized, fearful or unresolved* adults. These classifications are often thought of as categorical or mutually exclusive. Individuals with insecure attachment patterns may also be described as either *up-regulating* (resistant/ambivalent or preoccupied) or *down-regulating* (avoidant or dismissing). Disorganized, fearful or unresolved attachment involves a pattern of both up-regulating and down-regulating. This particularly form of insecure attachment has been correlated to trauma and/or loss (Soloman and Siegel, 2003).
4. **The categorical aspects of attachment classification.** Attachment categories may be thought of in categorical and dimensional terms. They are categorical in that researchers and clinicians think of individuals having secure or insecure attachment. But even these categories can sometimes be misleading. For example, early studies suggested that a child or adolescent might have a secure attachment with one parent, but an insecure attachment with the other parent (Ainsworth, Blehar, Waters & Wall, S, 1978). As the child develops it starts to develop "generalized" working models of self and others. And these generalized models will manifest in relationship to other attachment figures (La Guardia, Ryan, Couchman & Deci, 2000), particularly in adolescence and adulthood.
5. **The dimensional aspects of attachment classification.** How one measures attachment will in part determine whether or not you are viewing security-insecurity from a dimensional or categorical perspective. The Experiences in Close Relationships Questionnaire (ECR) (Crowell, Fraley, & Shaver, 2008), as well as other attachment assessments, view attachment security in degrees rather than either-or categories. For example, the Experiences in Close Relationships Questionnaire (<http://www.web-research-design.net/cgi-bin/crq/crq.pl>) deconstructs attachment on two dimensions – *anxiety* and *avoidance*. The degree of each will determine whether or not someone falls within the secure range or insecure range, and if the later, what type of insecure attachment (dismissing, preoccupied or fearful). Attachment style is plotted on a two dimensional grid with anxiety and avoidance on each axis, therefore someone can either be mildly secure, or extremely secure; mildly insecure or extremely insecure. A dimensional model of assessment helps better describe individual differences within categories and degrees of severity and/or health.
6. **Attachment categories are both continuous and discontinuous over time.** Longitudinal studies (Sroufe, 2005) have demonstrated that although attachment patterns are persistent, they may also change over time. This, of course, is good news for individuals who have had the misfortune of being born to parents who didn't have the requisite skills to provide a secure base environment for their children. This is also good news for therapists who are in the business of enhancing attachment security with individuals, couples and families. The Minnesota Longitudinal Study of Risk and Adaption (<http://www.cehd.umn.edu/ICD/research/Parent-Child/default.html>) has followed individuals over thirty years starting in infancy (~ 12 months). The studies confirm that there is about an 80% continuity rate depending on the population studied (Weinfield, Whaley & Egeland, 2004). Researchers have explored what contributes to changes or discontinuity in attachment status or style (Roisman, Padrón, Sroufe & Egeland, 2002). The most commonly cited factor is a secure base relationship. Most discontinuity consists of people with insecure attachment becoming more secure over time. There are instances of individuals with secure attachment who fell upon such unfortunate circumstances that they developed an insecure attachment state of mind; but many of these individuals were eventually able to regain their secure states of mind, because of secure base relationships.

Attachment and the Brain

Advances in neuroscience and imaging technology have greatly expanded our understanding how attachment categories are related to brain structure and function. In his early writings, Bowlby often referred to the "attachment functions in the brain," suggesting that there was actual structures or a center for attachment (Bowlby, 2005). Since those early writings, other researchers and clinicians have taken up the cause of hypothesizing the connection between attachment and neural structure and function (Schore, 2012, Siegel, 2012; Fonagy, 2010). We are just beginning to understand these relationships, but there are few important findings that are worth discussing, since they directly relate to the thesis of this article.

Because certain parts of the brain are not fully developed at birth, attachment relationships play an important role in brain development. The area that has been most described in the clinical literature is the development of executive functions in the prefrontal cortex (Siegel, 2012). This part of the brain is involved in a number of very important functions that affect interpersonal behavior, such as affect regulation, social cognition, self-other differentiation, auto-noetic consciousness, inhibition control, and reflective function.

Attachment mental representations of self and others, as well the aforementioned regulatory functions of the brain, are programmed within infants and children as a result of repeated interactions with caregivers throughout childhood. These mental representations and regulatory functions are typically maintained and strengthened over the long course of the child's development. However, as mentioned earlier, these representations and regulatory functions may also change as a result of interactions with other attachment figures throughout life (including therapists). From a neuroscience perspective, change occurs as a result of the brain's natural neuroplasticity functions. Neuroplasticity is the brain's ability to change and evolve over time in response to environmental demands and experiences. The first three years of life, because the prefrontal cortex is still developing, is a particularly important developmental period because environment influences (interaction with caregivers) are particularly critical to priming the brain.

Memory also plays a very important role in understanding attachment. Because explicit memory brain structures (such as the hippocampus) are not fully developed until several years after birth (Schore, 2012), all attachment experiences during the first two to three years are stored as implicit procedural memory. Implicit memory is a form of memory where previous experiences help in solving problems or completing a task in the present without our conscious awareness. Priming is a form of implicit memory that is actively occurring in those early years. Attachment patterns are learned through thousands of interactions with caregivers early in life while the brain is still in a critical phase of development. When one is recalling through implicit memory, the individual doesn't have a sense of remembering, they just have a sense of being or doing. This why attachment behaviors, whether secure or insecure, are often automatic and therefore the person is often unaware of what they are doing until it is brought to their attention which often occurs in psychotherapy. A self-reflective or mindful practice that involves identifying problematic behaviors, their

origins, as well as behavioral alternatives, is one way to approach the change process.

With these basic principles in mind, let's turn our attention to the focus of this paper - secure base priming and how it can enhance the effects of psychotherapy.

Secure Base Priming

In their groundbreaking study Mikulincer and Shaver (2001), created a research methodology that asks the following question - can we alter adult insecure cognitive, emotional and behavioral responses to reflect more secure patterns in a particular experimental condition? In other words, can individuals with insecure attachment be primed to act more like people with secure attachment? The answer turned out to be yes. This change was accomplished through a process called, *Secure Base Priming*. Their research methodology has been repeated many times over the past 10 years (Mikulincer and Shaver, 2010).

Priming is a form of implicit memory (Tulving & Schacter, 1990) where when one is exposed to stimulus and that exposure heightens the probability that it will positively influence responses at a later point in time. A common experiment illustrating priming will be to show subject a word, such as *COMPUTER*. At a later point, the subjects are shown the letters, *COM* and asked to complete the word. Those primed with the word *COMPUTER* are more likely, than those not primed with the word, to complete the word correctly. This theory explains how we learn things through exposure or observation. Repeated interactions with our early caregivers teach us "the how" of close relationships through implicit memory and priming (Stupica & Cassidy, 2014).

Secure base priming, specifically, is the activating of mental representations of attachment figures through words, images and guided imagery, symbolically making these persons available for soothing, reassurance and help. This process has been found to increase a person's sense of felt-security, which contributes to emotional balance and flexibility, particularly when under stress. Priming can occur either subliminally (not conscious to the subject) or supraliminally (conscious to the subject).

Mikulincer and Shaver took the prototypical secure base script (Mikulincer, Shaver, Sapir-Lavid & Avihou-Kanza, 2009) and created both subliminal and supraliminal priming techniques to activate "*secure base mental representations*", of individuals assessed as having insecure attachment. Attachment style was measured by *The Experiences in Close Relationship Questionnaire* (Fraley, Heffernan, Vicary, & Brumbaugh, 2011). The prototypical secure base script is as follows:

"If I encounter an obstacle and/or become distressed, I can approach a significant other for help; he or she is likely to be available and supportive; I will experience relief and comfort as a result of proximity to this person; I can then return to other activities."

From this script they created words, pictures and visual imagery exercises that they hypothesized would activate positive mental representations of attachment figures, and consequently cause insecure subjects to respond more like securely attached subjects. All subjects in their studies were primed subliminally or supraliminally and then subjected to their experimental conditions.

Mikulincer and Shaver hypothesized that their priming effects were changing secure base structures in the brain, which has been found to be the case in studies of secure base priming where brain imaging has been utilized to document the neurological basis of secure and insecure attachment (Gillath, Selcuk & Shaver, 2008; Canterberry & Gillath, 2012; Gillath, Adams, & Kunkel, 2012).

The Secure Base Primes

Mikulincer and Shaver structured their primes based on previous, effective priming techniques reported in the literature (2001). They utilized words (e.g., comfort, love, embrace, secure) images (e.g., mothers/fathers holding children, couples kissing/hugging, photographs of the research subject's attachment figure; a Picasso painting of a mother and daughter) and visual imagery (prior actual secure base experiences and constructed) to prime their subjects. These primes are very reminiscent of what is typically done in psychotherapy to promote client change. Therapists:

1. Utilize words to express love, caring and concern for their clients;
2. They discuss positive outcomes that create positive associations in our client's minds;
3. They experientially give clients secure base experiences through their personal interactions with their clients (help solve problems and relieve distress);
4. Encourage clients to create secure base experiences outside of therapy; and...
5. Repeatedly prime their clients with these experiences every week, sometimes multiple times a week, over months and years.

So in a sense, clinicians are undertaking secure base priming with their clients. However, there are huge differences between temporarily changing attachment representations and/or affect in the laboratory, and doing so through live, in-person interactions with clients in the therapist's office. Psychotherapy outcome studies have repeatedly demonstrated that the strength of the therapeutic alliance is one of the most robust predictors of positive outcome in psychotherapy (Horvath, Del Re, Flückiger & Symonds, 2011). The role of the relationship with the therapist to therapy outcome cannot be under-estimated. Priming through an interaction with a computer will not be the same as a real relationship. But can it enhance the effects gained through a face-to-face relationship? As a practicing clinician, I can't imagine that computer-based priming could ever replace a real relationship (such as in the movie, *Her*), but the former could enhance the later.

So a number of critical question come to mind.

1. Presently the experimentally induced effects of secure base priming, though robust, only last a few minutes. Can the positive effects of secure base priming be strengthened through repeated priming experiences (Gillath, Selcuk & Shaver, 2008)?
2. If so, how much priming is needed to obtain a lasting effect on personality and/or behavior? How many days a week are needed and for how long?
3. Do these effects translate to behavior in the participant's real-life relationships?
4. How will these effects interact with psychotherapy if it is occurring simultaneously? Will therapy boost priming effects? Will priming dampen the therapy effects?

For possible answers to these questions we turn to the areas of neuroplasticity and brain training.

Brain Training

Today, consumers are being bombarded with information about how they can strengthen and/or change cognitive functions through "brain training" exercises. These

claimed are based on the principles of neuroplasticity - that neural pathways and synaptic activity can be changed due to environmental influences. There is much data being published both promoting specific programs as well as examining overall outcome across brain training programs. The available data is very conflicting so that making an informed decision can be very difficult for the consumer (see internet links below).

I have been trained to administer one of these programs to older adults (Cogmed Working Memory Training by Pearson Assessments). I took the 5-week training myself to appreciate just what the experience is like for the consumer. This experience taught several things. First, I quickly learned why most people quit their training program before finishing it. Changing cognitive functions of the brain is not easy and you are likely to encounter many setbacks in the training process. I also discovered why there is such a high dropout rate with brain-training programs. Changing neurological function is not easy. It takes a lot of persistence and perseverance. Cogmed program has rigorous screening criteria and a coaching component. The coach checks in with the participant on a weekly basis and helps support users to finish the program in order to receive the most benefits. Because my wife was also training in using the program with children, we coached each other through the five weeks (five days a week, for 45 minutes) of training. Completing the program also helped me understand, how much effort is actually needed to change brain function so as to see real-world effects. It also reinforced the adage - use it or lose it. After the initial intensive training period, and a boost in working memory, I realized that periodic extension training was necessary for me to support the behavioral gains I experienced right after completing the intensive program.

The data suggests that "brain-training" is more successful when providers carefully choose their participants and provide client support. This is certainly true when choosing clients for psychotherapy treatment. A recent meta-analysis of studies looking specifically at working memory training programs, found mixed results in brain-training programs (Melby-Lervag and Hulme, 2013). For example, the researchers found more robust effects with younger children (under 10) than older children (over 10). They also found more robust effects with older adults (over 60) as compared to younger adults (under 60). Most notably, the researchers found that programs had better outcomes when they offered program support (coaching participants to complete the program), such as Cogmed. Besides the support component there were other variables that contributed to better outcomes such as economic, participant motivation, age, seriousness of impairment and other personality factors. For example, people who score higher on a measure of conscientiousness showed greater treatment effects.

Secure Base Priming as an Adjunct to Psychotherapy

If "brain-training" effectiveness may partly depend on careful screening and client support, it follows that the success of repeated secure base priming may also depend on these factors. Such a program would need clear screening criteria so that therapists could refer the most appropriate clients for priming. They could also provide the support and motivation for completing the exercises. In fact, clients could complete the priming exercises in their session (since they only take five to ten minutes to complete each day) and discuss their reactions with their therapist. This interactive process could augment the positive effects of psychotherapy.

If secure base priming techniques are similar to the naturally occurring psychotherapy process, and secure base priming activates and strengthens attachment representations, and the neuroplasticity of the brain allows for such changes in secure base neurological function, then it stands to reason that *repeated* secure base priming can have persistent effects. Studies have documented the profound and persistent effects of mindfulness practice on brain structure and function (Urry, Nitschke, Dolski, Jackson, Dalton, Mueller & Davidson, 2004). For example, Davidson and his colleagues found that six days a week practice of mindfulness meditation, over two months, could dramatically change activation patterns in the prefrontal cortex; and continued practice will support these changes over time. Why can't *repeated secure base priming* do the same?

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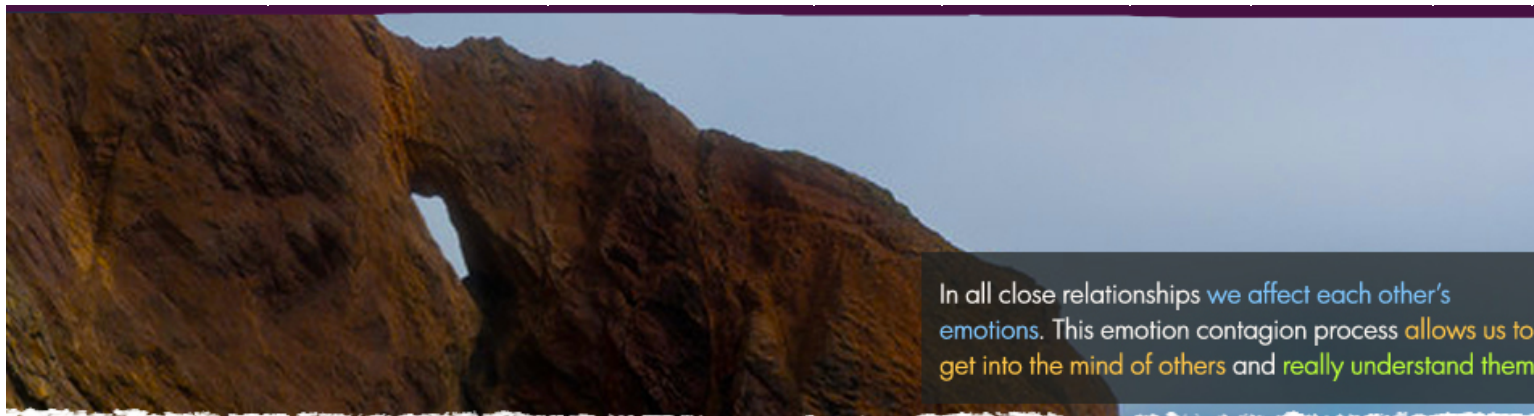
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Review Articles on Brain Training

<http://www.newyorker.com/online/blogs/elements/2013/04/brain-games-are-bogus.html>

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In all close relationships we affect each other's emotions. This emotion contagion process allows us to get into the mind of others and really understand them.

Your text message made me feel :-) Using technology to enhance attachment security

Daniel J Sonkin, Ph.D.
Licensed Marriage and Family Therapist
Sausalito, CA

"I received a text message from my wife, and before I even read it, I smiled!"

John Bowlby's attachment theory (1969, 1973, 1980) revolutionized developmental and social psychology (Cassidy and Shaver, 2008), and infant mental health research (Beatrice and Lachmann, 2013). More recently both researchers and clinicians have begun to explore its clinical application as well (Wallin, 2007; Fonagy, 2010; Obegi and Berant, 2010). Attachment theory has become a widely accepted concept, whose clinical appeal has grown over the past decade. Social and personality psychologists have also been interested in attachment theory, primarily in its application to adult relationships (Mikulincer and Shaver, 2010) and group dynamics (Simpson and Rholes, 1998). Two particular social psychologists, Mario Mikulincer and Philip Shaver (2010) through their collaboration, have greatly expanded our understanding of attachment in adult relationships, and in particular, the underlying cognitive and emotional processes that lead to particular attachment behaviors (Mikulincer, Shaver, Sapir-Lavid & Avihou-Kanza, 2009). What is most fascinating is their research on secure base priming which they have been conducting for the past 13 years (Mikulincer and Shaver, 2001). The implications of their findings, as well as the methodology they employed, are very applicable to our work as psychotherapists.

Secure Base Priming

In their original study, Mikulincer and Shaver were able to create a research methodology that asks the following question. Can we alter adult insecure attachment emotional, cognitive and behavioral patterns temporarily, so as to reflect secure attachment? In other words, can people with insecure attachment temporarily act like they have secure attachment? The answer turned out to be yes. And this methodology has been repeated many, many times over the past 13 years. This was done through a process called secure base priming. Secure base priming has been found to be correlated to a wide range of positive outcomes. It has been associated with increased compassion, altruism, and openness to different ethnic groups. It has been found to temporarily increase self-esteem (Carnelley and Rowe, 2010), reduce anger (Dutton, unpublished manuscript) and possibly even protect people from post-traumatic stress disorder (Mikulincer, Shaver & Horesh, 2006). Most of the studies have involved single priming exposure and the changes are generally short-lived (minutes or hours). There are only a few studies on the long-term effects of multiple priming experiences, which to date look promising (Gillath, Selcuk and Shaver, 2008).

Priming is a form of implicit memory. It is the mechanism through which we learn things through indirect observation, rather than a focused attempt to develop a skill - though it can also occur via a more deliberate process of attention. Mikulincer and Shaver used both subliminal and supraliminal priming techniques to activate "secure base" mental representations of individuals assessed as having insecure attachment as measured by an empirically validated assessment questionnaire (Fraleigh, Heffernan, Vicary, & Brumbaugh, 2011).

Typical priming techniques include the subliminal presentation of words (eg, love, hug, etc.) and images (parents and children, couples, etc) on a computer screen. It may also include visual imagery, such as recalling actual secure base experiences. In their original priming studies Mikulincer and Shaver also asked subjects to create (make up) a secure base story, which had the same effects as actual secure base memories. Subsequent studies have included subliminal presentation of the names

and images of the subject's attachment figures.

More recent imaging studies have determined that secure priming does affect particular brain structures, which suggests that secure attachment can be neurologically differentiated from insecure attachment (Canterberry & Gillath, 2012; Gillath, Adams, & Kunkel, 2012). These studies point to a number of physiological processes in the brain that may give rise to attachment security. Secure base priming appears to, in part, activate memories (ostensibly of positive attachment experiences) (Quirin, Gillath, Pruessner & Eggert, 2010) in conjunction with the simultaneous activation of structures related to the release of attachment-enhancing hormones, such as vasopressin, oxytocin and dopamine (Gillath, Shaver, Baek & Chun, 2008). It is theorized that when the brain is primed to activate positive memories (mental images), feelings and thoughts of attachment, these representations are more readily available when experiencing stress, distress or when there is an opportunity for dyadic soothing or problem-solving (Mikulincer, Shaver, Sapir-Lavid, & Avihou-Kanza, 2009).

Priming and Psychotherapy

Secure base priming techniques are very similar to what naturally occurs in psychotherapy. Therapists utilize words and their non-verbal expressions to express affection, caring, support and concern for their clients. They also suggest solutions to specific as well as general problems the client is experiencing. Often therapists will encourage clients to remember positive outcomes from the past, or imagine positive outcomes in the future (both of which result in the creation of mental images and expectations in the brain). All of these aspects of therapy both directly and indirectly experientially give clients secure base experiences. It is the hope of therapists, that these repeated positive experiences will result in change. One can say that clinicians are exposing their clients to repeated secure base priming.

However, there is a huge difference between temporarily changing attachment representations and/or affect in the laboratory via computer, and doing so in psychotherapy with a real live person. However, change in psychotherapy can be a long, arduous process that could take years to generalize in outside relationships. So a critical question is can therapists use the secure base priming research to enhance the security-boosting effects of psychotherapy?

Therapists often recommend adjunctive activities that clients can participate in that support change, such as medication, changes in lifestyle, and mindfulness or meditation training. Mindfulness meditation, in particular, has been shown to improve mood (reduce depression and anxiety) and promote positivity (states of well-being). Davidson (2004) found that individuals who meditated for 30 minutes a day, six days a week for two months changed their activation ratio of their prefrontal cortex - from favoring withdraw emotions on the right to favoring approach emotions on the left. This change resulted in reduced anxiety and increased states of wellbeing. Secure base priming may also be a valuable adjunct to traditional psychotherapy.

Texting Can Make You Happy

In a recent study researchers explored whether texting secure base guided imagery exercises can increase self-reported feelings of "felt security" (Otway, Carnelley and Rowe, 2013). These researchers expanded the traditional view of felt security - feeling care, love and safety. They have included an energy component that can best be described as a "subjective vitality as feelings of aliveness and vivacity." They differentiate this state as discretely different from an overall sense of positivity (Luke, Sedikides and Carnelley, 2012). Their rationale for this particular experiment was their that it was logistically impractical to prime individuals only in the laboratory. Due to the wide spread use of smart phones, the researchers decided to explore whether or not texting could substitute for in-lab priming.

Subjects were assigned to either a secure or neutral priming condition before starting the priming process. During the first exposure (which was conducted in the laboratory), subjects were asked to either write a story about a security-inducing attachment figure or a neutral assignment (eg. a supermarket shopping trip). Twenty-four hours later, subjects were texted a 3-minute visualization task (either secure or neutral). Twenty-four hours later, subjects received another text with another 3-minute visualization task (secure or neutral). And again twenty-four hours later they received another text. They received a total of five primes over the course of a week every twenty-four hours. Felt security was measured with a 16-item scale (that was developed by the researchers) which assesses feeling secure and safe (eg, loved), as well as this sense of energy.

The findings were in line with other secure base priming studies. Secure base priming increased feelings of "felt security" as compared to the neutral primes. Most importantly, they found that the feelings of felt security stayed active for a number of days. This is important because it suggests that repeated priming may act as security boosters over time. The results suggest that texting can be used as an intervention with clients. CBT therapists have been using texting to facilitate treatment for a number of years now (Aguilera and Monoz, 2011). Why can't attachment-oriented therapists do the same?

Secure Base Priming Program

Another way of delivering secure base primes to a client is through the Internet. The smart phones that are able to receive text messages also have access to online information via a web browser. I have developed a web site (www.securebasepriming.org) that is able to deliver three different types of primes to a user, which can be accessed by the client at any time. The three priming exercises are words (secure, support, care, etc.), images (mother/fathers and children, opposite and same-sex couples – all of different ethnicities) and guided imagery exercises. The three guided imagery exercises based on the concept of a Secure Base Script (Waters & Waters, 2006).

"If I encounter an obstacle and/or become distressed, I can approach a significant other for help; he or she is likely to be available and supportive; I will experience relief and comfort as a result of proximity to this person; I can then return to other activities."

The first guided imagery exercise is simply an affirmation (saying the secure base script aloud). The second guided imagery exercise is the creation of a story that reflects the secure base script. And the third guided imagery exercise is the recalling of an actual secure base experience with a real-life attachment figure.

The web site is the basis of an online research study that will examine the effects of repeated secure base priming on attachment style, mood and relationship behaviors (as measure by the partner of subjects). Therapists, who are interested in referring subjects, are welcomed to try out the primes themselves and see what effects they may have on their mood and attachment style.

Conclusion

Utilizing technology for enhancing attachment security has potential, but more questions need to be answered before making any claims of beneficial effect to the public. First, we need to know whether or not repeated priming can have a lasting effect on enhancing attachment security. We know that the studies date have found short term effects, but it's not clear whether or not those changes can be sustained over time. Like most brain-training programs, it is likely that the client will need to prime over a longer period of time in order to experience lasting effects. Plus, we don't know if after a specified period, whether or not the effects will begin to plateau or wane altogether. We don't know if clients need one type of prime or different types of primes over time. We also don't know what types of clients would most benefit from priming. Most importantly, we don't know if there are any adverse effects of repeated priming. All of these questions and more need to be answered through research. However, in the meantime, there is no question that real relationships can enhance attachment security – this is already been demonstrated though longitudinal studies on attachment (Roisman, Padrón, Sroufe & Egeland, 2002). Whether or not these effects can be gained electronically is yet to be determined.

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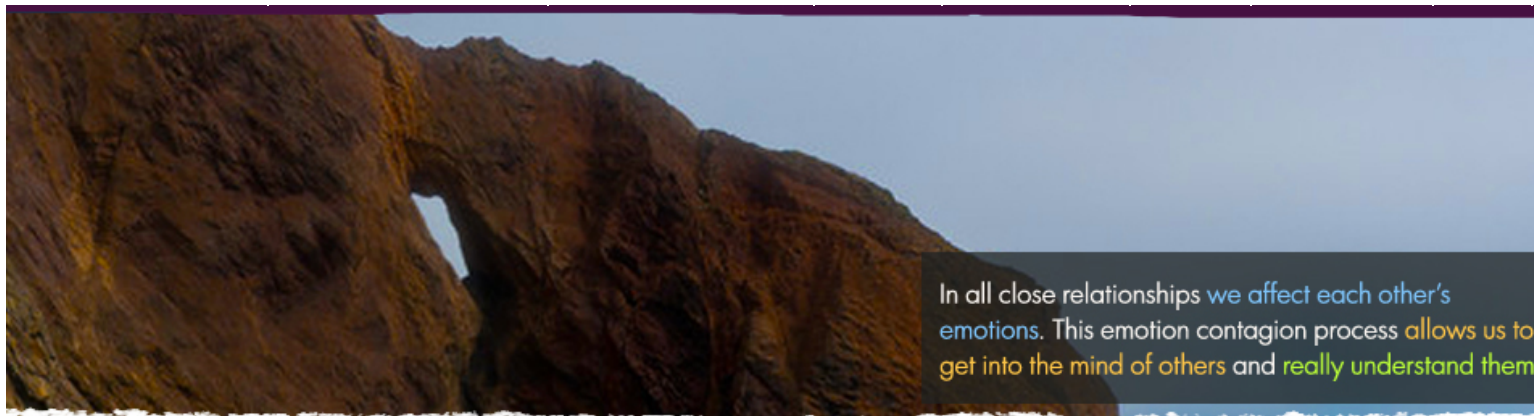
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In all close relationships we affect each other's emotions. This emotion contagion process allows us to get into the mind of others and really understand them.

Want to Feel More Intimate this Valentine's Day? Boost Your Attachment Security!

Daniel J Sonkin, Ph.D.
Licensed Marriage and Family Therapist
Sausalito, CA

"Love never dies a natural death. It dies because we don't know how to replenish its source." — Anaïs Nin

All the world loves love. In fact, most cultures have days or rituals that acknowledge the importance of romantic love. For example, in Japan, White Day is celebrated on March 14th, with the exchange of white chocolate and marshmallows among both friends and couples. In South Korea, Pepero Day is celebrated on November 11th. Couples typically exchange pepero (a cookie stick dipped in chocolate syrup) and other romantic gifts. But many South Koreans, especially the younger generation, feel that one day of celebrating romantic love is not enough. So they have informally designated the 14th of each month as a day of showing love and affection for their beloved. Each month has a different theme. For example, January is Candle Day, May is Rose Day, June is Kiss Day, September is Photo Day, etc.

In Israel, the holiday of Tu B'Av is also a popular day for expressing love. It falls on the 15th of Av each year. Originally, this minor holiday had ties in the Talmud, in which the day signaled the start of the harvest season. It is also the last "official" holiday of the Jewish calendar, before the new year celebration of Rosh Hashanah. Because it's tied to the Hebrew (Lunar calendar) it always falls on the full moon of the month. This year it will occur on July 30th. Today in Israel, it is customary to send a bouquet of red roses to the one you love on Tu B'Av. Romantic songs are played on the radio and parties are held in the evening throughout the country. In addition, Tu b'Av is a popular date for Jews to hold weddings.

In many cultures, the celebration of Valentine's Day typically occurs once a year, and involves reminders of the beauty and possibilities of romantic relationships. We celebrate with candlelit dinners, roses, boxes of chocolate, love notes, and gifts that signify love and affection. Valentine's Day serves as a reminder of who we love, why we love them and demonstrating through behavior our appreciation of how they enhance our lives. However, is one day of expressing gratitude enough to sustain your relationship? Absolutely not! Given the high rates of divorce, investing energy into a relationship one day a year is clearly not enough. Of course, this makes intuitive sense. If you wanted to get into physical shape, exercising once a year (or even once a month) is just not going to cut it.

Growing Your Love One Day at a Time

Psychologists have studied love for many years, and what most researchers agree (and you don't need to have a Ph.D. to know this), is that although the instinct to bond is hardwired in humans, sustaining long-term relationships takes effort - effort to find love, effort to grow it, and effort to sustain it. Some people may ask, "If you have to work at it, is it the right relationship?" Unfortunately, the answer to that question is more complex. Like a garden, love takes time, attention and care. It begins with the intention to create it, preparing the soil, planting the seeds, protecting them from pests and patience while nature does its magic. But once the plants mature they continue to need lots of attention and effort. Some relationships require more effort than others. This obviously has to do with the individuals involved and the circumstances. Although those challenges can seem unsurmountable at first, many who persevere, reap the benefits of their efforts and patience. Unfortunately, some relationships the rewards are extremely minuscule even with a great deal of effort. And that it may a tell-tale sign that a particular relationship may not be the right one for you.

But what is a healthy amount of effort to put into a relationship? What types of effort are really important? With Valentine's Day just around the corner, many lovers are

contemplating this very question. In fact, most people put quite a bit of effort into their celebration plans. What would be the perfect gift? How much should I spend on a gift? What restaurant has the most romantic atmosphere? Should I give my beloved roses or chocolates or both? In our consumer-driven culture, we are bombarded with images of what love looks like and these images inevitably include giving "**things**" to our beloved. The more we give, the more likely we'll "live happily ever after." Certainly, all the effort you put into making Valentine's Day special can boost or reignite a special connection with your partner. But if all that effort disappears on February 15th, and not replaced with other activities, the good feelings of the previous day, will quickly wane from yours and your partner's memories.

Besides gifts and romantic dinners, how can we grow and support our feelings of gratitude, desire and romance for our loved-ones before, on and beyond St. Valentine's Day? Let's look at how this is possible.

Attachment Theory and Learning to Love

Attachment theory may be understood as a theory of love. It was first developed by British analyst, John Bowlby in the mid 20th century to describe and understand the caregiving connection between a mother and infant. Most mothers will describe how they fall in love with their newborns. And the quality of caretaking and attention they give is partly determined by these feelings of love. Over the decade's attachment theory has been expanded to fathers and children and, most recently adult romantic relationships.

For better or worse, there is a strong connection between our first experiences of love with our parents and how we approach love and romantic intimacy in adulthood. For those who were lucky to have a caregiver who was quite sensitive and attuned to their emotional needs, they grow up and approach adult intimate relationships with openness, flexibility, hope and optimism. This doesn't mean that they never experience failure or disappointment or rejection. It just means that they tend to have more optimistic attitudes towards close relationships. They are less likely to expect rejection or abandonment from others. They are also more likely to generously give care to others when needed. And when disappointment happens, as it does for everyone, they tend to seek care and comfort from others and consequently recover more quickly. These qualities are the hallmark of "**secure attachment**."

But what about adults whose parents did not provide adequate sensitive caregiving during their childhood? Some parents chronically ignored or rejected their children's efforts for care and comfort. Other parents experienced a great deal of anxiety and felt overwhelmed by their child's emotional needs. Some parents may have role-reversed and sought out care and comfort from their children. These experiences may lead to, "**insecure attachment**." People with insecure attachment are less optimistic and hopeful about their adult intimate relationships. They anticipate rejection or don't seek care and comfort in their close relationships. Thousands of daily, unrewarding experiences with caregivers are encoded in their memory, and these memories play a big role in how they view close relationships as adults. In the most general sense, secure and insecure attachment patterns may be thought of as expectations about others that effect our attitudes, feelings and behaviors in close relationships.

What's the Fix?

The downside of bad habits is that they are hard to change. The upside is that we can learn new habits and ways of thinking about close relationships, but it takes a lot of effort and focus - but it can be done! Phillippi Lally, at University College in London, was interested in knowing how many repetitions it took to form a new habit. She and her colleagues conducted a study and it turns out that the results varied widely - from 18 repetitions to 254 repetitions. Quite a range! But the average was about 66. Those results were coincidentally consistent with other studies of learning new behaviors. For example, Richard Davidson, at the University of Wisconsin, found you can change how we approach problem-solving (seeing a glass as half empty to seeing it as half full) by practicing mindful-meditation six times a week for approximately 60 days. So if you can learn to change the way your approach problems in approximately 60 days, what about changing attitudes and behaviors in close relationships?

Changing Attitudes Through Priming

Attachment researchers, Phillip Shaver and Mario Mikulincer were interested in this question, and they decided to approach it through, "**priming**." Priming is how we learn through observation, and it generally occurs outside our awareness. Think about the first time you were given the keys to the car. Pretty exciting, right? Although you had to learn many new skills to drive carefully, you already knew quite a bit. You knew about the pedals and where to place your feet. You knew how to hold the steering wheel. You probably knew how to turn on the engine and use the directionals. All of this was learned by observation. Sitting in the back seat as a child, you had a good view of people going through these routines on a fairly regular basis - mother, father, older siblings, grandparents, other relatives, friends parents or even babysitters. In fact, your parents might have even let play behind the steering wheel when you very young. So when you were finally handed the keys, you already knew quite a bit about driving a car. The rest was learned by focused instruction and experience. There is certainly no replacement for real experience. However, we do learn a lot through priming - watching life happen unfold before our eyes. And, as I mentioned above, we learn a lot about relationships from just watching and experiencing our family for many years - in other words through, "**priming!**" If we developed negative attitudes or behavioral habits through priming, we can we develop new positive habits from priming!

Priming the Secure Base in You

Shaver and Mikulincer found that they can temporarily alter attitudes, feelings and behaviors about attachment relationships through "**secure base priming**." They developed a method for helping people with insecure attachment temporarily respond more like people with secure attachment. They accomplished this with a number techniques that have been used in many studies over the past fourteen years and that have yielded very consistent results. They used subliminal (outside awareness) and supraliminal (within awareness) techniques to boost attachment security. They used words (comfort, embrace, love, etc.), images (pictures of happy parents and infants, couples, etc.) and guided imagery (think about a positive situation....). But like most research findings, there are limitations. Most of the studies conducted to date, the subjects were only primed once, and therefore the changes are very short-lived - minutes or hours. But psychologists, Katherine Carnelley and Angela Rowe in the United Kingdom are looking at whether they can obtain more sustain, longer-term effects through repeated priming. Where as Shaver and Mikulincer required subject to come to their laboratory to receive the primes, Carnelley and Rowe are using smart phone technology (eg, texting) as a way of delivering the primes. Can repeated priming create a more lasting change our relationship attitudes, feelings and behaviors? I am asking that very question and you can participate in a study at www.securebasepriming.org.

Give the Gift that Keeps on Giving this Valentine's Day

So you may be asking, "What does priming have to do with Valentine's Day?" On Valentines Day (and the days leading up to it), we are exposed to all kinds of messages in the media about love (and of course consumerism - buying flowers, jewelry, etc.) and that exposure is meant to boost our interest in love and expressing it to others. And although the messages are often trying to sell something - the message of love and expressing it to our loved ones also get's communicated. Perhaps the best way couples can make this Valentine's Day, and everyday, even more special, is to work to boost their attachment security all year round. The greater your attachment security, the more likely you'll experience and express more positive attitudes and feelings in your close relationships, which get translated into behaviors. Although the idea of repeated priming is new, our preliminary data suggests that ten days of secure base priming leads to a significant increased mood and an ever so slight increase (though not statistically significant) increase in attachment security. Although the average number repetitions for creating new habits in general seems to be about 66 days, you can start moving in that direction today.

There are many ways we can boost attachment security through priming - even without an online program or psychological experiment. Looking at happy images of couples in love and thinking about positive attachment-related words (love, embrace, caring, affection, etc) can both have a positive effect on your mood and thoughts about intimacy. Thinking about positive past experiences you had with your partner can also be powerful booster of attachment security. Below is a guided imagery you can try that may increase your mood and start you moving in the direction of greater attachment security. Even making up stories about positive attachment experiences has shown to have the same security enhancing effects as memories of real experiences. But as Lally's studies on habit-forming suggest, doing this once in a while is not sufficient to build new habits. You really need to put in the effort every, single day. And although you may not notice a big change immediately, try priming your secure base for sixty days and perhaps you'll be pleasantly surprised. You'll still have time to celebrate White Day in Japan. Happy Valentine's Day!

Secure Base Guided Imagery

Please think about a relationship you have had in which you found that it was relatively easy to get close to the other person and you felt comfortable depending on the other person. In this relationship you didn't often worry about being abandoned by the other person and you didn't worry about the other person getting too close to you.

Now take a moment and try and get a visual image in your mind of this person. What does this person look like? What is it like being with this person? You may want to remember a time when you were actually with this person. What would he or she say to you? What would you say in return? How do you feel when you are with this person? How would you feel if they were here with you now?

Please spend a few minutes thinking about the person you visualised and how they make/made you feel safe, secure and comforted.

If you are having difficulty identifying a relationship in this exercise, complete the following alternative exercise.

Imagine yourself in a problematic situation that you can not solve on your own, and imagine that you are surrounded by people who are sensitive and responsive to your distress, want to help you only because they love you, and set aside other activities in order to assist you.

Now take a moment and try and get a visual image in your mind of these people. What is it like being with these people? You may want to imagine a specific problem you are seeking comfort or help with. What would these people say to you? What would you say in return? How do you feel when you are with these people? How would you feel if they were here with you now?

Please spend a few minutes thinking about the people you visualised and how they make/made you feel safe, secure and comforted.

1505 Bridgeway, Suite 105 - Sausalito, California 94965 - (415) 332-6703
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