

# *Allergic to hope: Angry resistant attachment and a one-person psychology within a two-person psychological system*

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Following on from earlier writing about individuals with an avoidant attachment style, STAN TATKIN explores the characteristics of individuals with an 'angry resistant' attachment style, in particular, within the context of couple therapy. While the primary issue for 'avoidant' individuals is dependency, the primary issue for 'angry resistant' individuals is dashed hope, leading to anticipatory disappointment and negativism, and a perpetual cycle of relationship failure. Discussion of these issues draws on attachment theory, arousal regulation theory, and recent advances in developmental neurobiology. Practical applications for the clinician include the use of characteristic patterns of expression, interpersonal contact, mode of communication, and attitudinal predisposition in the assessment of angry resistant individuals, as well as the engagement of the individual's partner as a means to help the angry resistant individual overcome his or her allergy to hope. TATKIN concludes that couple therapists, who understand the regulatory bias and basic neurobiological make-up of their angry resistant clients, have an advantage when it comes to moving these individuals toward a satisfying and long-lasting relationship based on a two-person psychological system.

In *Addiction to Alone Time* (Tatkin, 2009), I described the idiosyncratic behaviours and attitudes that mark individuals who are characterised with an 'avoidant' attachment style. Here I turn my attention to the opposite side of the insecure attachment spectrum: the individual who is characterised with an 'angry resistant' attachment style. In *Wired for Love* (Tatkin, in press), I euphemistically refer to the avoidant attachment style as islands, and the angry resistant attachment style as waves. These terms may evoke images that help to illustrate the differences between these two insecure orientations.

## **The insecure model**

Organised insecure attachment is grounded in a one-person psychological system that may be considered unfair,

unjust, and insensitive too much of the time. Unlike the secure system, the insecure model tends to focus away from relationship priorities in favour of self-interests that range from demands for external emotional regulation to narcissistic qualities, such as beauty, intelligence, power, performance, wealth, and youth. In the secure model, partners tend to put the safety and security of the relationship as a priority. In contrast with the insecure model, secure partners operate as a two-person system, based on an ideal of true mutuality. They have, explicitly or implicitly, a social contract with principles that aim to ensure fairness, equality, and sensitivity to bids or signals for attention—whether for distress relief, celebration, or mind-sharing.

The attachment system of the couple is built on signal-response interactions between self and other. I send a verbal and/or non-verbal signal to my partner, and she responds. How long it takes for her to respond, the quality of her response, and the consequences (if any) for my sending a signal in the first place, become part of the calculus that determines how I signal in the future. If my history contains many repeated experiences of sending a signal only to get no response, or a delayed response, or a response that was ill-attuned or unhelpful (for which I paid with rejection, punishment, or attack), I would 'organise' according to an insecure model. In addition, I would experience a higher load of interpersonal stress when I am in an attachment relationship than I would if I had a more secure history.

The avoidant individual tends to focus away from relational needs and agreements in favour of autonomous-like needs. I say 'autonomous-like' because the avoidant individual's version of independence may often

periods of reunion with one's partner. That reunion may or may not follow a physical separation. Reunions, from which springs hope of an eternal merger, instead bring memories of past reunion failures and are likely to

what is to come from hope, and it is bad. This becomes what is, in essence, an allergy to hope. While the avoidant individual is allergic to dependency, the angry resistant individual is allergic to hope.

### Background

Ainsworth (1969, 1978) identified the anxious, clinging qualities found in some infants as belonging to the anxious ambivalent (what I term 'angry resistant') group of insecure attachment. These same qualities were discovered through Mahler's work with mother-infant pairs, in what she called the rapprochement phase of separation-individuation (Mahler, 1968; Mahler, Bergman, & Pine, 1975; Mahler, McDevitt, & Settlage, 1971). Thorough studies of this group of insecurely attached infants, including

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arise as a result of neglect by a dismissive or derogatory care-giving style. In a sense, the avoidant individual is allergic to dependency and experiences a high degree of interpersonal stress. He or she adapted to aloneness by turning to the self for stimulation and soothing, so much so that turning to others became nearly impossible.

In contrast, the angry resistant individual tends to focus away from the self in favour of external regulation by and for another person. The anticipation of relationship failure is as psychobiologically wired for the angry resistant individual, as autoregulation and indifference are for the avoidant individual. By 'wired', I mean recorded and recalled in procedural (implicit) memory via the signal-response system, and played out in defensive actions by way of the autonomic nervous and neuroendocrine systems. These defensive actions are largely reflexive and sub-psychological, which is to say they are driven by somatosensory/sensorimotor, brainstem, and lower limbic neuro-pathways.

The strategy of the angry resistant individual is to offset anticipatory disappointment and failure through negativistic conduct, a personality feature influenced by early childhood development (Fairbairn, 1941; Kurtz & Morey, 1998; Levy & Inderbitzin, 1989; Lewin & Schulz, 1992; Sroufe & Waters, 1977). Driven by hope that is dashed instantly by the anticipation of failure, the angry resistant individual employs negativism as a control mechanism against dependency. Hope is incurred most often during

be followed by the other's impatience, frustration, and withdrawal, quickly leading to yet another separation. The angry resistant individual 'knows', with certainty from within his or her body,



Illustration: Savina Hopkins

viewing of Strange Situation video data, have revealed a behavioural pattern whereby anxious ambivalent infants became fussy and preoccupied with their physically present caregiver, and demonstrated frequent and intense proximity seeking and contact

behavioural signs of anger. However, it has been my experience, based on clinical and video observation, that most preoccupied partners display frequent behavioural markers consistent with the anger and resistance observed in infants during

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maintenance toward that caregiver (Margaret S. Mahler Psychiatric Research Foundation, 1980a, 1980b, 1980c; Sroufe, Jacobvitz, Mangelsdorf, DeAngelo, & Ward, 1985; Waters, Wippman, & Sroufe, 1979). During separation from the caregiver, these infants became distressed and preoccupied with the caregiver's departure, but upon reunion, they again displayed strong proximity-seeking behaviours (along with their caregiver) and usually reunited in a physical embrace. However, these infants were slow to recover and displayed some signs of resistance to folding into their caregiver for comfort. Indeed, some of these infants appeared to express resistance and anger at the caregiver for having left. This resistance and anger may have originated not in the separation itself, but in the quality of reunion. Main and Weston (1981) recognised that caregivers of these infants were preoccupied themselves with their own difficulty with emotional or stress recovery, and angry with their own attachment objects. In Strange Situation reunions, these caregivers often become frustrated and overwhelmed by their hard-to-settle infant and may have given up early on attempts to settle the child. This caregiver pattern of preoccupation, frustration, and eventual misappraisal of the child's internal world was observed more recently by others (e.g., Cohen et al., 1999; Muir, 1992).

In the world of adult primary attachment relationships, Ainsworth's anxious ambivalent attachment style typically appears without strong

the Strange Situation. In addition to anger and resistance, in particular during periods of reunion, these preoccupied adults exhibit other characteristics of the angry resistant infant, including fussiness, signal vocalisations, proximity seeking, and contact maintenance behaviours; hence my reference to these 'adult children' as 'angry resistant' rather than 'anxious ambivalent'.

#### **The angry resistant individual on a regulatory level**

As a result of their negative early life experiences with preoccupied caregiver(s), angry resistant partners often present with problems with self-regulation. Easily overtaxed by responsibilities (e.g., school, work, marriage, children), angry resistant individuals often view themselves not only as overwhelmed, but as envious of and threatened by their partner's ability to do whatever he or she wants. Feeling the underdog, angry resistant individuals complain about not getting the help they need or deserve. These individuals believe in their special abilities to emotionally care for others, including and especially their partners. This is not simply a delusion of grandeur, though this ability is usually overblown; in contrast with adult avoidant individuals, who were tasked as children with regulating their caregiver's self-esteem, adult angry resistant individuals have a history of taking care of their caregiver's emotional well-being, often becoming early victims (before age 14) of parent-child role reversal. However,

while adult avoidant individuals mistakenly inflate their impoverished independence for adaptation to neglect, adult angry resistant individuals mistakenly inflate their impoverished abilities to emotionally regulate others. This is because children ultimately require caregivers who are themselves secure autonomous individuals with abilities to cultivate both dependency and autonomy by consistently valuing relationship before self-interests. In other words, children can step up to almost any task required of them, particularly when safety and security are at stake; however, if tasks such as premature independence or care of others are required because of caregiver need, children will adapt but will never do as well as children unburdened by such caregiver needs.

Individuals who are in the angry resistant range of attachment tend to be biased at the higher end of the arousal spectrum. They are given to high affects—such as excitement, bliss, euphoria, mania, rage, embarrassment (not shame), lust, and fear or terror—that are driven specifically by the sympathetic nervous system. When two angry resistant partners form a couple, we call them 'high arousal' due to their mutual bias toward high sympathetic states; they appear as high conflict and high vitality, while at the same time appear poor at soothing and comforting one another. Because both partners in this case cling, they hold together despite their high conflict and sometimes explosive style of relating. It can be argued that they also enjoy more mutually amplified positive moments than do partners with other arousal profiles. They tend to have lots of excitement and lots of sex and tend to be very loud.

#### **The angry resistant individual on a neurobiological level**

It could be argued that the angry resistant individual's brain is wired a bit differently from that of secure-autonomous or avoidant individuals. There is increasing evidence in highly angry resistant individuals of a problem with regard to the vagal brake or vagal tone and the ability to control forward sympathetic acceleration or activation (Austin, Riniolo, & Porges, 2007; Kuo & Linehan, 2009; Porges



& Furman, 2011). This problem is akin to a helium balloon that does not have a rock to hold it down. The vagal issue leads to problems with escalation of arousal—the fast kindling of high sympathetic states such as rage—and a slow rate of recovery to baseline. It is possible the so-called ‘hate circuit’, involving the superior frontal gyrus, insula, and putamen, is over-engaged in angry resistant partners (Bartels & Zeki, 2004; Zeki & Romaya, 2008). Another possible problem in angry resistant individuals, especially those with a history of trauma, is damage to or irregularities with the amygdala. The ventral medial prefrontal cortex and orbital frontal cortex may not be providing proper feedback to lower limbic areas during times of distress or threat, leading to poorly modulated affects, particularly negative ones, and a higher than normal misappraisal rate (Fosha, Siegel, & Solomon, 2009; Henry, 1997; Herpertz et al., 2001; Schmahl, Vermetten, Elzinga, & Bremner, 2003; Schore, 2000, 2002a, 2002b; Siegel, 1999, 2006).

It also can be argued that the angry resistant individual is better than the avoidant individual at processing somatosensory and somatoaffective information, which tends to be a right hemisphere dominant specialisation

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(Adolphs, Damasio, Tranel, Cooper, & Damasio, 2000; Cohen & Shaver, 2004; Decety & Chaminade, 2003; Gainotti, 2001, 2005; MacLean, 1996; Weinberg, 2000). As a result, the angry resistant individual can experience intense empathy, to the point of experiencing affect contagion, a phenomenon according to which an individual catches the mood or affect of another person (Lin, Huang, & Chiang, 2008; Nummenmaa, Hirvonen, Parkkola, & Hietanen, 2008). This might be regarded as ‘thin boundaries’, whereby differences at an emotional level between self and other become blurred. Because of their high

expressiveness, both on a nonverbal and verbal level, we might expect better social emotional development in the right hemisphere, compared with that of the avoidant, who often appears lacking in this area and compensates through the left hemispheric functions of language, logic, and cognitive organisation (Cohen & Shaver, 2004;

Fukunishi, Sei, Morita, & Rahe, 1999; Guttman & Laporte, 2002; Horton, 1988; Larsen, Brand, Bermond, & Hijman, 2003; Moriguchi et al., 2006).

On the neurobiological level, particular skills and deficits are common to the profile of the angry resistant individual. On the skill side, we might see expressiveness, warmth, empathy, humour, vitality, and social emotional awareness. On the deficits side, we see thin boundaries; misappraisals of another person’s feelings, thoughts, and intentions; preoccupation with self and others that borders on obsessive compulsive; and a poorly developed vagal brake.



### Assessment of the angry resistant individual

The following patterns of expression are typical of the angry resistant individual and are invaluable when it comes to assessment:

- speech patterns;
- prosody;
- facial expressiveness;
- emotional expressiveness.

In addition, the following patterns of interpersonal contact, mode of communication, and attitudinal predisposition are characteristic of the angry resistant individual:

- proximity seeking;
- contact maintenance;
- meta complaints;
- negativism.

The clinician can observe micro-movements and micro-expressions associated with all of these patterns to assess whether one or the other partner or both have an angry resistant attachment style. Each of these patterns is discussed in the sections that follow, with an eye to how the clinician can incorporate them within the assessment process.

### Speech patterns

Because speech is a major form of communication, beginning as early as about 18 months, how partners speak to one another (as well as to the

therapist) can reveal a great deal about their attachment formation. The speech patterns of most secure individuals are characterised by a natural variation in speed, and these individuals tend to speak for the right amount of time; that is, they don't say too much or too little. Secure individuals tend to appear to cooperate with the listener, whether that person is a partner or the therapist. Their speech can be characterised as truthful, easy to follow, self-confident, coherent, and relevant. It also tends to sound fresh, insightful, and balanced.

By contrast, angry resistant individuals often talk too fast or too erratically. They may feel a need to say as much as possible about a given topic, with the result that the quantity of their speech is too great. These partners often take too long to get to their point or to get their point across, and may bring up tangential or irrelevant material without realising they are doing so. Angry resistant individuals don't know how to edit what they are saying while they speak, and tend to find it difficult to pause and collect themselves before they speak. Their relationship with the listener may be poor because they do not pay close attention to the effect their words are having on the other person. Their speech can be characterised as hard to follow, overly emotional, and exaggerated.

### *Prosody*

Prosody refers to the rhythmic and intonational aspects of speech. The importance of prosody is evident when listening to a good storyteller or actor/actress. It also is recognisable when a person adopts a sing-song, melodic voice (sometimes referred to as 'motherese') while speaking to children or to pets.

Secure individuals tend to demonstrate a naturally wide variance in the sound of their voice, both in terms of tone and volume. One can say they have good prosody, which makes them appear as lively and engaged at times, but also contained or subdued when appropriate. By contrast, angry resistant individuals often display variances in volume and pitch that reflect an overly emotional state and that demonstrate misattunement with their partner. This feature alone can

contribute to mutual dysregulation during periods of stress.

### *Facial expressiveness*

Typically, secure individuals show a range of facial expressiveness. Some secure individuals have relatively inexpressive faces; however, this should not be taken as a reflection of their level of security. Neither should secure partners with high facial expressiveness be regarded as overly expressive (i.e., false expression). Angry resistant individuals, on the other hand, often overly express facially, much as they do vocally. Their facial expressiveness can be highly variable, nimbly displaying low affects such as grief, as well as high affects such as glee.

### *Emotional expressiveness*

Secure individuals typically display a wide range of emotions. Some have deficits in emotional expressiveness (i.e., affect blindness), but it is rare to find secure individuals who display strong emotions in a manner suggestive of insecure or disorganised states. Angry resistant individuals, on the other hand, may appear overly expressive emotionally. Because these individuals tend to be high arousal, their emotions tend to be high intensity. Their expression can be so strong that it appears false or deceptive. Social-emotional deficits, such as thin boundaries, are common and leave the angry resistant individual vulnerable to affect contagion.

### *Proximity seeking*

Proximity seeking is exemplified by the mother who holds her arms out to her child and invites a hug. It also is exemplified when one adult partner gazes at the other, reaches out to touch that partner, or even smiles or winks to catch his or her attention. In each case, the behaviour expresses a need for physical and/or emotional closeness with another person.

Secure individuals engage in frequent proximity-seeking behaviours because these were modelled for them by their parents, starting during early childhood. As a result, they feel comfortable seeking closeness. Angry resistant individuals, by contrast, tend to exhibit a need for closeness that can appear almost insatiable. The only exception is when they

are angry; in which case, they over-control their proximity seeking as a means of punishing the partner. These individuals continually check their partner's face and seek out physical contact, and even try to entrap their partner.

### *Contact maintenance*

Contact maintenance is a cousin of proximity seeking, and refers to the maintaining of physical or eye contact. Secure individuals are at ease with sustained physical contact, but do not need to maintain contact to feel secure. Angry resistant individuals tend to be continually ravenous for contact. They can feel persecuted if they are without contact for too long. However, maintaining eye contact may not be easy for them, especially if they did not experience comfortable gazing during childhood. When they are angry, these partners often withhold physical contact from a partner, even though this is what they secretly desire. Lack of physical contact is one of the reasons angry resistant individuals give for being unfaithful to their partner.

### *Meta complaints*

According to Gottman (1994), healthy complaining is the antidote to what he refers to as '*the Four Horsemen*'—criticism, contempt, defensiveness, and stonewalling—which serve as predictors of divorce. No couple is immune to complaints. The most common gripes pertain to money, sex, time, kids, and disorder. However, meta complaints (i.e., complaints originating at the level of personality) are especially insidious because they are tied to an individual's underlying attachment orientation, and therefore can be difficult for couples to parse. If we understand the developmental trajectory of early attachment formation, we can spot the fractal emergence of these meta complaints in the couple system and even predict their occurrence.

The meta complaints of angry resistant individuals may appear situational, but really are global and not so easily managed. Their complaints include worries about a partner's unreliability or recalcitrance, rejection, being neglected or punished, being wrong, being deprived (usually

of love and affection), unfair treatment, injustice, confusion, ambivalence, and being hurt or wounded. They are unable to remember ever feeling this way before, yet such sensitivities originate very early in childhood as relational trauma involving caregivers. Inwardly, they believe something is wrong with them, that they are a burden to their partner, that they are too needy, and that they don't deserve to be loved in the way they long to be. Outwardly, their defense suggests otherwise: that they deserve more than they are getting, that their partner is indifferent or unloving, that their partner is selfish and self-centered, and that they're not going to take it anymore. Angry resistant individuals hold grudges. They make it their mission to settle old scores before they will even consider any forward movement. Their tenacious hold on meta complaints can lead them to dominate their partner, as well as therapy sessions, in a very persuasive and at times even despotic manner.

### Negativism

Negativism comes in many forms—physical, verbal, and nonverbal. At a physical level, angry resistant individuals may push away when approached or when approaching a primary attachment figure. Their tone can be anywhere from playful to aggressive and hostile. At a verbal level, angry resistant individuals can be sharp tongued, particularly if they have been unexpectedly approached with hopeful rapprochements (reunion) following distress (separation)—in other words, all the makings for an allergy to hope. At a nonverbal level, angry resistant individuals signal distress through utterances, vocalisations, facial expressions, and physical postures and movements. These nonverbal signals may simultaneously deliver threatening sounds, gestures, and facial expressions. Threats against the relationship are common, as is the perseveration of current and past injustices and insensitivities. The verbal pushing away of hope and successful reunion is reflexive, psychobiological, and in strict obedience to implicit (and very real) threat memories of having been too often dropped, rejected, or abandoned. To the angry resistant's

partner, the push away is threatening to the safety and security of the relationship, and the angry resistant individual's preoccupation, lack of recovery, and seeming inconsolability can become highly dysregulating. Any evidence of fear, anger, or distress in the partner's face, eyes, voice, and movements serves as feedback confirmation of the angry resistant

is to move forward on the angry resistant (in friendliness) and not away. Angry resistant individuals expect their partner to move away, pull back, or otherwise rebuke their cloaked wish for the angry resistant partner to override his or her negativism. The true hope of angry resistant individuals is that their most important other, their partner, will see beyond their negativism

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individual's sense of himself or herself as burdensome, needy, and 'too much', making the angry resistant individual exquisitely sensitive to inevitable withdrawal.

Unlike the avoidant individual, whose negativism is a signal to avoid or dismiss, the angry resistant individual's negativism is actually a signal to the partner to approach. To the other person, this is not intuitively obvious because the angry resistant individual engages by pushing away. The angry resistant individual's attempts to reunite are threatening and hostile. The reaction, as read by the angry resistant individual on the face of the other, is equally hostile and threatening, thus reaffirming the angry resistant individual's suspicion that he or she will be dumped. In this way, the angry resistant individual's negativism becomes self-fulfilling.

### An antidote to the allergy

People are hurt by people, and only people can repair those injuries. No one is better positioned to repair injuries than the primary relationship partner, and the couple therapist can promote this. The angry resistant's negativism both engages and pushes away, as we have seen. The angry resistant's partner, regardless of his or her own attachment orientation, likely will be faced with an ongoing challenge to remain undaunted by the waxing and waning of this negativism. The partner must come to understand in therapy that the corrective counter-movement

and recognise it for what it is: a real bid for patience and understanding; kindness and compassion; and ultimate reassurance that the angry resistant is not a burden, overly needy, or destined for rejection. In other words:

*She:* [approach and reunion] "You are so handsome. I love you."

*He:* [angry resistant reaction to approach and reunion] "Yeah, right. Tell that to someone who'll believe you."

*She:* [typical but wrong response] "Forget it. You're impossible."

*She:* [corrective response] "You are my handsome man and I – LOVE – YOU." [she kisses him]

The couple therapist should expect the angry resistant to respond positively to this forward movement. Why? Because it is the last thing the angry resistant expects, it can cut through entrenched negativism and provide relief for his or her allergy to hope. Partners do not always have to move forward in this manner, but they must find a way to counter the angry resistant's self-fulfilling negativism.

### Conclusion

Couple therapists working with angry resistant partners are advised to keep in mind that, like avoidants, angry resistant individuals operate in a one-person psychological system. This means they make too many pro-self choices at the cost of the relationship. Nevertheless, how this orientation manifests, both within the relationship and in therapy, is quite different for the two insecure

types. The couple therapist must become continually attuned to such differences. Understanding regulatory bias and basic neurobiological make-up, and having the ability to accurately assess the attachment style of partners in therapy are crucial for working effectively with angry resistant individuals. For example, conventional wisdom from American object relations theory suggests that couple therapists faced with a clinging partner (borderline spectrum, or angry resistant) and a distancing partner (narcissism spectrum, or avoidant) should not confront the distancing partner first because that partner is too vulnerable to exposure and to narcissistic injury, and therefore more likely than the clinging partner to up and leave (Kernberg, 1975; Klein, 1995; Masterson, 1981). Applying the principles of attachment theory and arousal regulation discussed here, the couple therapist understands the angry resistant individual's allergy to hope, and thus is able to engage the angry resistant individual's partner in providing a sufficient corrective response that paves the way for confrontation, without risking premature termination by either partner. Couple therapists who can incorporate such subtleties stand the best chance of successfully working with individuals who adhere to a one-person psychological system and moving them toward and into a satisfying and long-lasting relationship based on a two-person psychological system.

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## AUTHOR NOTES

STAN TATKIN, Psy. D., MFT, developer of *A Psychobiological Approach to Couples Therapy* (PACT), integrates neuroscience, attachment, and arousal regulation and applies these disciplines to adult primary attachment relationships. In addition to his private practice, he runs training programs for certification in PACT across the USA and Canada. Dr. Tatkin received his early training in developmental object relations (Masterson Institute), Gestalt, psychodrama, and family systems theory. His private practice specialized for some time in the treatment of adolescents and adults with personality disorders. Over the last decade, his interests branched into psychoneurobiological theories of human relationship, and integrating principles of early mother-infant attachment with adult romantic relationships. Dr Tatkin is a veteran member of Allan N. Schore's study group, and has trained in the Adult Attachment Interview with Mary Main and Erik Hesse at the University of California, Berkeley.

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