• People with dementia who were securely attached were less anxious and viewed themselves more positively than those who were insecurely attached.
• Attachment style did not make a difference to the quality of life of people with dementia.
• We found no relationship between attachment and the level of dementia-related problems.
• Carers who were securely attached had higher levels of well-being than those who were insecurely attached.
• Attachment style did not make a difference to how much stress carers were experiencing.
• The attachment styles of the person with dementia and the carer were rarely the same, so we could not say whether it was helpful for couples to have the same attachment style.

IMPLICATIONS

• Understanding a person’s attachment style can help us understand what they are experiencing and how they are behaving.
• People with insecure attachment styles may need more support in order to maintain well-being. This applies to both people with dementia and carers.
• Providing education to carers about the importance of attachment bonds and ways to maintain good relationships may be useful.

HOW HAVE WE MADE OUR FINDINGS KNOWN?

Conferences: We presented at the Gerontological Society of America annual conference (2011, November) in Boston:


More details of the study can be found in:


Other papers that may be of interest are:


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Attachment styles and attachment needs in people with dementia and family carers

Nelis, S.M., Clare, L. & Whitaker, C.J. (2011)
WHAT IS ATTACHMENT?
Attachment is the quality of relationships with significant others or a lasting emotional bond with a loved one.

Attachment styles develop during our early experiences with parents or carers. Good, consistent, warm and loving experiences result in a secure attachment style. Inconsistent, cold, distant, or neglectful experiences can create one of several insecure attachment styles.

Attachment styles last as we go through life, and affect how we see ourselves and others. People who are securely attached tend to feel happier and less anxious.

Attachment styles also influence the way in which people deal with chronic illness and loss, or adapt to becoming a caregiver. Therefore attachment styles are very important when people have to face the challenges of later life. There is some evidence that attachment styles can change as we grow older.

When a person develops dementia, the need to feel attached to others may get stronger. The way in which family members or caregivers respond to this may depend on their own style of attachment.

Few studies have assessed attachment in people living with dementia and even fewer have assessed attachment from the perspective of the person with dementia.

PROJECT AIMS
• We wanted to find out if the combination of attachment needs and different attachment styles makes a difference to how people cope with dementia.
• We investigated what attachment styles people with dementia and carers have, how their attachment styles relate to their level of well-being, and whether it helps if the person with dementia and the family carer have similar attachment styles.

HOW WAS THE STUDY CONDUCTED?
People with dementia and their family carers rated their own attachment styles. This was done using a questionnaire that describes different styles and asks people to rate how much each style is ‘like me’

Attachment styles:
Secure: have a positive view of relationships and find it easy to become emotionally close to others.
Insecure: There are several different types of insecure attachment.
Fearful-avoidant: desire close relationships, but are uncomfortable with closeness.
Anxious-preoccupied: seek high levels of intimacy and may become highly dependent.
Dismissive-avoidant: self-sufficient & comfortable without close relationships.

Additionally we collected information on:
Self-ratings by the person with dementia:
• Self-concept
• Mood: anxiety and depression
• Quality of Life

Relatives’ ratings of the person with dementia
• Dementia Symptoms: number and severity, and carer distress.
• Activities of Daily Living: functional abilities

Distribution of Person with Dementia & Carer Attachment Styles (%)