

The Construction of ADHD: Family Dynamics, Conversations, and Attachment Patterns

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Abstract

The paper offers an analysis of the conversational and attachment processes in a family where an adolescent has been presenting with problems of 'ADHD' and self-harm. The research was with one family and utilised individual narrative-based attachment assessments and a semi-structured family interview. Conversational analysis was employed to focus on the processes of meaning construction between family members. Three attachment discourse themes appeared throughout the family interviews: Distress and problems as related to biology, Self-responsibility in regulating emotional problems and Problems related to family relational issues, conflicts, and triangulations. These were considered in terms of family beliefs systems/domains domains of functioning-attachment and discipline and their points of conflict and contradiction. The analysis focussed on how the conversational processes could serve to manage dilemmas regarding how actions were regarded and generated repertoires of actions. This included aspects of family dynamics, such as expressions of feelings, divided loyalties, and triangulation.

Introduction

A number of studies indicate that young people diagnosed with ADHD and conduct disorders also display insecure attachment patterns [1-3]. However, there are relatively few studies which appear to have focussed on the observation of parents' behaviour, and in turn the parents' own attachment patterns and histories which guide their parenting [3]. Studies also suggest that parents demonstrate insecure attachments with indications that they display inconsistent responses to the child [1,4,5]. There is also evidence of an association of ADHD with children growing up in family environments where there is conflict, possibly violence between the parents and generally inconsistent parenting [4,6,7]. It is possible that ADHD, like many other severe problems, needs to be understood in terms of a complex interplay of the family dynamics and the parents' self-protective attachment strategies [4].

Both systemic and attachment perspectives are relevant to an understanding of ADHD but also have some limitations. Family therapy offers a picture of the complexity of family connections but falls short of showing how this relates to different kinds of inner worlds and problems. Similarly, attachment theory in its dyadic focus, does not offer an understanding of the full complexity of the family processes that shape attachment patterns. However, [8] had proposed that secure attachment develops in family contexts characterised by 'open' as opposed to 'closed' patterns of communication. The concept of attachments as a communication and shared meaning-making process [9-13] offers a promising framework for thinking about attachments in families. In this attachment, it can be seen as a shared framework in a family regarding how actions and emotions are understood and what responses are seen as legitimate.

In relation to ADHD one core axis may be whether the child's actions are seen as due to them being 'naughty' and therefore needing a disciplinary response. Alternatively the child's actions may be seen as an indication of their distress and frustration which requires an attachment response of emotional containment and comfort. An understanding of shared family domains has been shown to be important in well functioning families [12,14]. It has been suggested that attachment and discipline are two important family domains (shared processes of rules, emotions, and actions). Attachment domains are preceded by the child conveying feelings such as fear, illness, or separation. The parents'

action then involves taking an account from the child, conveying an understanding and providing comfort. Discipline domains are initiated by behaviour from the child which is deemed inappropriate or dangerous (or anticipated as such). The parents respond with rewards and punishments. It is important, not only for the family to make these two separate domains clear early on but also to match their responses to the feelings or behaviour, otherwise repeated circular problems/arguments may arise [12,15].

In some families an underlying shared attachment framework appears to be that family members should not unduly worry each other with problems unless it is really serious and should each try and deal with their own emotions by themselves. In other families the opposite shared framework may hold that it is essentially important that all feelings, concerns and worries are immediately shared and they must try to be very closely connected emotionally [3,10,12]. Interestingly these two positions (avoidant and anxious-ambivalent attachment patterns) also map on to the family relational processes observed by systemic therapists and researchers.

In reality the situation in families is even more complex. It may be the case that the parents have differing views of what constitutes an attachment need and what response, comfort, stiff upper lip, anxiety and so on is appropriate. This starts to represent a much more confusing view and the child has a dilemma in trying to understand and match their emotional responses and request for attachment responses to the differing patterns of their parents [3,10]. Furthermore, parents may also carry unresolved experiences of loss and trauma from childhood or other experiences which can further break through and

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disrupt the consistency of their attachment responses and make the development of a shared understanding and agreed ways of meeting each other's attachment needs more complex. Most importantly, we observe frequently in clinical work with families some members of a family may 'break rank' and want to do things differently emotionally. Not infrequently this may be the member who is also designated as having the problems but alternatively can be seen as the one who feels most trapped by and wishes to resist the current shared attachment framework. This can be a difficult position to hold since if it implies a disloyalty to the family tradition, securing one's attachment needs may become all the harder.

We suggest that the conceptualisation of attachment in a family as representing a shared emotional and relational framework is a potentially useful bridge between systemic and attachment conceptualisations. Little research appears to have been conducted on how such shared frameworks are constructed in the conversational dynamics in families with significant problems, such as ADHD.

Aims of the Study

The broad aim of the study was to utilise conversational analysis to explore how a family negotiates their understanding of symptoms in a child relating to self-harm and ADHD. A specific focus was on how two major family domains of experience: attachment and discipline are discussed, developed, and contested.

The specific aims of the study were to explore the nature of the conversations in a family where ADHD is a presenting problem. The intention of the analysis was:

1. To explore the family's shared domains of understanding, with a focus on attachment and discipline.
2. To consider how these domains were constructed and maintained by the conversational process between the family members.
3. To consider how the conversational processes shaped and maintained the individual attachment patterns of the family members.
4. To indicate points of potential change for the family where the shared frameworks were being elaborated and contested.

Method

A single case study design was employed with one family where the young person in the family had a diagnosis of ADHD. The findings reported feature an analysis of a semi-structured interview conducted with the family and are supported by Adult or Transition to Adult Attachment Interviews with each member of the family.

1. Family interview - this was intended both to elicit information about the meanings held by family members and also to elicit their characteristic patterns of conversational interaction. The interview included a discussion of their perceived similarities and differences to other families, their explanations of the problems, current family, and trans-generational patterns of managing feelings and provision of comfort, corrective and replicative scripts in terms of how the parents have incorporated or attempted to change elements of their own child. The interview ended with a reflective discussion of how their experiences together had shaped them as individuals, as a family and their views of their future together.

A family genogram, family sculpt with coins and a time line of significant events that had occurred in the family were also employed

to map changes in relationships and surrounding beliefs. All of the interviews were video taped and transcribed verbatim employing key features of the notation employed in Conversational Analysis.

2. The Adult Attachment Interview with the mother (Diane) and the step-father (Peter) and the Transition to Adulthood Attachment Interview with the two teenage children (Rick and Keith).

Analysis

Conversational Analysis was employed since it offers a number of key interpretative frameworks for analysing conversations. It includes an analysis of relational processes and shares features of a systemic analysis of communication [10].

The analysis progresses in a series of over-lapping stages:

1. The dominant shared attachment themes under-pinning the family's understandings of their problems, especially in relation to ADHD.

2. The relational processes in terms of how the family members engaged in conversation and interacted to produce their shared discourses, for example the amount of talking, interrupting or taking the floor And also how meanings were constructed and contested.

3. The relational and emotional dynamics which appeared to underpin the family's conversational and relational processes, for example how meanings were contested, differences expanded and resolved.

This analysis attempted to incorporate discourse markers employed in the AAI to indicate examples of defensive processes which people are seen to be utilizing in order to manage their attachment needs.

Family in the study: The family contained a young person, Rick aged 16, who had a formal diagnosis of ADHD and had been in contact with the NHS (National Health Service) Child and Adolescent Mental Health Services (CAMHS). We were also able to interview his brother Keith, mother Diane, and step-father Peter.

Rick was described by the parents and himself as having had considerable problems at school and at home in terms of disruptive and angry behaviour. He had been excluded from a number of schools and eventually Diane sought assistance from her GP and social services that were said to have been rather unhelpful. Eventually Rick read about ADHD on the Internet and suggested this as a possible cause of his problems to his parents, who then mentioned it to their GP and eventually a diagnosis of ADHD was offered.

Diane had experienced a volatile and at times violent relationship with their father Anthony and when she left him, when Rick was aged 3. He moved away to live abroad for two years but returned, continued to have contact and was described by Diane and Peter to have subsequently caused them considerable problems with at times violent altercations.

Findings

Attachment strategies

Rick: His transition to adulthood attachment interview (TAAI) indicated a considerable degree of disorientation, and unresolved dismissed traumas regarding his own self-harm and his parents' divorce. He predominantly demonstrated a dismissive strategy (A: 4/6-compliant/ self-reliant). However, he also showed some pre-occupied patterns especially when he became agitated, confused and angry when discussing his natural parents' relationship.

Diane: Her AAI indicated the influence of several unresolved traumatic states. One of these appeared to be a dismissed trauma regarding her violent past with Anthony. This possibly also contained some displaced trauma in that she was extremely concerned about the influence it had on the children. In addition she seemed to hold a pre-occupying trauma regarding Rick's self harm. From her childhood she also seemed to show a mixed pattern of both employing dismissive as well as pre-occupying attachment strategies (A4 /C2-Dismissive Compliant and Pre-occupied Disarming).

Peter: Peter's AAI indicated an overall dismissive strategy (A 4/6-Compliant and self – reliant).

Keith: His TAAI appeared to display an unresolved, dismissed trauma regarding his father's self harm. Overall he also displayed a Dismissive Attachment Pattern (A 2/4-Socially facile-compliant)

Analysis of family interview

Three attachment discourse themes appeared throughout the family interviews:

- Distress and problems as related to biology
- Self – responsibility in regulating emotional problems
- Problems related to family relational issues, conflicts and triangulations

Though distinct, these themes were also inter-dependent and the conversation would segue from one to another as explanations of the problems and justifications of their actions were offered. Of particular interest to our analysis were 'contested moments' where, for example the implications of one of the themes escalated and was countered by the entrance of another theme. These episodes of contestation also appeared to be related to the emotional and attachment dynamics in the family such that strategies for resolving tension, blame and guilt became evident at these moments. In particular the major axis around which these contested attachment /relational themes seemed to rotate was between discourses of biological and heredity based explanations and those of free – will and social factors, such as family conflicts and distress.

Distress and problems as related to biology: In particular this discourse centred on the similarities between Rick and his biological father Anthony and contained ideas of inherited personality characteristics. Importantly woven through the family conversation in which these ideas were expressed, here was a thread of a contested discourse that self-control and choice could over-ride the biological explanations. However, the conflicting implications of these two discourses was not resolved and appeared to constitute lingering uncertainty. This was at times connected to a sense of exasperation and of feeling let down by professional services for not being able to provide clear answers for them. This therefore could have led them to distrust psychological professionals therefore exacerbating their biological causation discourse.

RD: I mean do you all agree on this that Rick takes after his dad?

Rick: Unanimous YES {looking at Diane} so we can just

Keith: hhh

Diane: {looking at Rick and then RD} He's physically like him he's definitely emotionally like him and there are some very strong genes that run in that family that Rick has definitely inherited so you know... (.3)

RD: Physical similarities often set off you know chains of thoughts don't they if a baby looks like one parent you know sometimes a story develops

Diane: Yeah, well actually the physical resemblance isn't that strong {looking at Rick}

Rick: [There's the eye there =

Diane: You've got the same colour eyes

Rick: Well eyes, it's not just the colour of eyes though it's not just the colour of eyes though, is it? =

Diane: yeah

Rick: It's not just the colour of someone's eyes that makes them follow in someone's footsteps = {looking at Diane, smiling}

Diane: No

Rick: It's the DESPAIR ^ {said in jokey whisper to his mother} in them..., laughter}

Diane: You don't < say that ... {laughter}.....

In this passage it is possible to see the shared family construction that Rick has inherited traits from his father. Diane offers interpretations of Rick's mind, suggesting that Rick feels he is trapped in a fatalistic view that history will repeat itself and that he will turn out to be like his father. This is followed by discussion about inheritance and appearance and that Rick is not physically so like his father. This passage comes to a climax with a poignant remark by Rick that it's the despair in his father's eyes that leads him to follow him! This also appears to underlie his connection with, and caring for his father. Diane's next remark that 'you don't say that' appears to be a discipline response. This highlights a mismatch of domains where Rick has hinted at his distress by joking he has despair in his eyes requiring an attachment response, however Diane responds within the discipline domain. Omissions in conversations can be as important as explicit content and here, as elsewhere in the family interview, the issue of the attachment dilemma faced by Rick in being close to his father in the context of the antagonism towards his father from his mother and step-father is never pursued

The passage continued with Diane making a further interpretation of Rick's state of mind and reminding him that he is in fact half a product of her genes and neutralises a potential critique of herself as claiming to be all the good part by reducing her claim, 'I don't mean that I've got all the good': Importantly, Rick continued to support this view by softly remarking that it 'has so far', after Diane has suggested he feels he will follow in his dad's footsteps, suggesting that he continues to think that his problems show a similar pattern to his father's.

Self-responsibility in regulating emotional problems: Following a few further exchanges about genes and hair colour, Peter starts to contest the idea of hereditary factors with a discourse about responsibility for actions and free-will:

Peter: ... {rest of family quiet, no attempt to interrupt} Yes, Rick shares a lot of personality traits with er with Anthony but does also have ehm other stuff which comes from Diana and you know so it's not, it's not fair to say, it's too easy to say that it's you know he's a clone and therefore you know it's all pre-ordained and that sort of thing it's very much erm. I do believe in ehm free will and you know making conscious decisions and changing cycles of behaviour and so on and so forth {gesticulating with hands for emphasis} and there's a degree

of awareness em that that Rick has that Anthony certainly doesn't have and never had.

In this passage Peter engages in a number of different strategies. He discusses the hereditary argument by claiming knowledge about Rick and repeating Diane's observation earlier that inheritance comes from two parents. This doesn't contest a biological discourse but elaborates it in terms of the inheritance being more complex. Secondly, he contests a genetic account by referring to free-will and conscious choice in changing behaviour. He points out by making a claim to know that Rick has more insight than his father, which is both a complement but also a further demand for Rick to take more responsibility for his behaviour. It is possible to see here the discipline domain tying into the theme of free will and responsibility. Peter may punish behaviour he feels Rick has responsibility over, whereas this may be Rick's way of indicating distress as has been shown in ADHD literature.

There appears to be a process whereby discourses of biology and inheritance are continually contested by the theme of responsibility and that personality traits cannot simply explain behaviour and, especially problems of both of the children's temper. This can be seen further in the discussion of temper and anger as a 'red mist'. Diane distances herself very forcefully from such temper being anything like her temperament. Indirectly this again suggests that this probably is inherited for their father, Anthony.

Peter: No that's true... No actually Anthony is, is far more fearful of authority (.4)

Rick: Is he?

Peter: Yeah

Keith: What do you mean by that?

Peter: Well Anthony will fall into line very quickly if he thinks that there is an unstoppable force that's going to land on him, whether it's the tax man[

Diana: a bit like yea a bit like you {to Rick}]

Peter: ... or the police Anthony falls into line very quickly when it comes to authority, Keith absolutely doesn't [

Diane: really doesn't,] the red mist comes down with Keith and actually it's like being hit with a hammer because you know he doesn't think em[=

Keith: shut up now]

Diane: you don't think consequences, consequences because actually once the red mist has come down you don't care what happens to you {looking at Keith} and em you know it quickly escalate

Peter: Keith's very sorry about 48 hours later

Importantly, in this passage the conversation moves to emotions but centres around anger. There is no connection made to why people become angry apart from something that is possibly an out of control state of 'red mist' which denotes a lack of free-will highlighting further contradictions in the family's discourse. There is also the introduction by Diane of the idea of not thinking about the consequences. However, Peter maintains the discourse of anger as possibly under voluntary control when the negative consequences are very clear. This carries an implication that Rick's behaviours are under voluntary control and he is therefore responsible for his actions.

Problems related to family relational issues, emotions, and conflicts: This theme captured notions of possible links between Rick's problematic behaviours and conflicts and distress in the family. In particular Diane mentions that Rick was aged three when the worst conflicts and distress between her and his father Anthony were taking place. However, this discourse was not developed despite prompts from RD in the interview. Instead, sources of conflict were connected to Rick's school situations and recourse to ideas that there was something fundamentally unusual about Rick (biological and heredity discourse).

RD: right so at that time of that first exclusion it was just the three of you at that time and you'd separated from Anthony about a year ago?

M: Yeah. But the problems with the playschool were while I was still married to his dad while I was still with him..... Well ^ I mean it's quite a em melodramatic em statement to say that we were excluded they, they said that (.3) [

Peter: Don't come back is {laughter} [

Diane: yeah well they did they did say =

Rick: Exclusion is temporary, I wasn't outcast at three (M: mm) I wasn't outcast at three I think they probably just said something along the lines of...

Keith: Your EXPELLED {laughter, looking straight and directly said to Rick}

Diane: Yeah please don't please don't bring him ^ back (laugh)[

Peter: > WE WOULD YEAH WE WOULD PREFER YOU TO TAKE YOUR SON SOMEWHERE ELSE..... {laughter}

This sequence starts with Diane making a reference to still being with the boy's father at the start of Rick's problems at school. However, this is immediately following by the nature of the exclusion itself. A process that recurred can be seen then in which a form of 'black humour' develops in jokes initiated by Peter about how Rick was asked 'not to come back'. There is laughter regarding this and Diane and Keith join in. The laughter here possibly conveys some anger and irritation from Peter but in a manner which is disguised. The tone of Peter's speech and emphasis heightens as he talks in contrast to a relatively flat tone elsewhere. Interestingly, though Diane joins in the laughter her next response was to emphasise positive features of Rick, such as how beautiful he was as a baby, "the most beautiful little boy absolutely gorgeous".

There had been clear suggestions in the interview that Diane and the boys had experienced some very emotionally difficult and even dangerous events whilst with their father. An attempt was therefore made in the interview to try to explore how these events were seen to impact on them whether they saw any connections between these events and the start of Rick's problems:

RD: Can I just ask you I mean what was going on through that period I mean what were the stresses.. In what ways did you and the boys try and sort of find a bit of comfort ...?

Diane: em what happened was that I, I did come to the conclusion actually, that my, my marriage was over and I needed to leave and I can't pretend that nothing was going on that they (the children) would have picked up on, especially Rick, a lot went on and I needed to leave. A lot went on that they should neither have seen nor heard. By this time their dad was beginning to become quite unhinged > I he was here he would

say that he was doing a job that he hated, he really couldn't cope with family life and by this time I think he hated me em.(3) He didn't after I left but he did before he left if you know what I mean [laugh]..... he became increasingly ^ agitated and quite aggressive and I there was only about 6 months of that when Keith was very young and then I reached that point where I knew for my safety and for theirs I had to goAnd that was that was hard because I just took the kids he wouldn't have left the house so they were taken out of their house we lived with a friend for 3 weeks and then I found my own home. Now all through that time > I was quite together, I mean I fell apart after the separation but I, I tried to keep it together as a mum and my parents were quite supportive and I had a best friend who was very supportive and she had two children and so we lived with her for a bit =

Keith: Who are you talking about Sue?

Diana: Sue....hh so it was it wasn't all death and destruction but it was a very unsettling time and then I was on my own for < about 8 or 9 months and then I met Peter so.....

Diane described the split up with Anthony as a very difficult period and suggested that there was violence and 'events' which the children should not have seen or heard. This is followed by her describing how Anthony was starting to become 'unhinged'. Diane appeared to be on the point of making some causal connections between these events and Rick's state of mind at the time and his subsequent problems. There is a twin emphasis on this period having been hard but followed immediately by an emphasis on how she managed to cope with the help of a good friend.

RD makes a further attempt to invoke discussions of psychological and relational factors that might be employed to explain Rick's difficulties:

RD: I'm not trying to lead your conversation ...but children do often do collecting as a way of sort of comforting themselves In times of stressas a way of distracting themselves from things that are not very nice how did things develop did anyone else have problems did they go away for a while did they come back?

Diana: No I think the problem was definitely for Rick the problem was definitely school. And I think Rick's whole school life up until really very recently was a very unhappy experience and a very negative experience

RD: Do you Do you agree with your mum?

Rick: Yea definitely

RD: What was what made it unhappy for you?

Rick: er loneliness and insecurity in [

Keith: Bullies..].....

RD: (to Rick) Looking back on it now do you have ideas=

Rick: Yeah many.

RD: Can you say?

Rick: (0.6) er well I suppose when I was young em I can see myself doing that like well I suppose the things that people do wrong change during the kind of their own show something that you've done wrong in a social group a while ago would be (0.4) er there are certain things that I would ^ see myself doing and imagine as being wrong but I can't really put my finger on why they're wrong or why they're not socially acceptable

RD: Do you mean the other kids thought you were a bit unusual? What do you think was the main thing that made you seem unusual, in their eyes?

Rick: I suppose it's just a bit too old really, I can't put my finger on it.. [=

RD: Too much of a swat, collecting things?]

Diane: Do you want me to help you? =

Rick: I was never like ^ attention seeking? {Looking to mum} (.5)

Diane: < Yeah. You would attention seek but not in any traditional way. You ^ would just do things that were (.4) the only word I can use that they use nowadays is kind of random.

In this last sequence Diane directs the conversation to problems at school and again with a statement of his unhappiness at school. This is related to an earlier discussion that Rick's obsessive collecting behaviours caused these problems at school. However, when Rick is asked about his own ideas to explain these events he appears to become disorientated and confused about what exactly he might have been doing wrong. At this point, as happened frequently in the interview Diane intervened to offer to help him out and to explain his actions for him. However, what is offered is a somewhat an enigmatic explanation of his actions being 'random', which potentially puts them beyond explanation or being accountable.

Discussion

The aims of this paper were to consider how shared attachment frameworks are maintained in family conversations. It was suggested that these shared frameworks govern how difficulties are regarded and what attachment responses are made. Particularly in the context of ADHD it has been suggested a critical issue is the need to be able to discriminate whether at any particular moment the behaviours are seen largely as requiring discipline or emotional care and comfort (family domains). A third issue is whether the problem is to be seen as biological and therefore in need of a medical response such as drug-based interventions. However, the question still remains whether this intervention needs to be accompanied by both attachment based and parenting/disciplinary organisation in the family. We will discuss each theme in turn but note that they were inter-connected and the family conversation could flip from one to the next.

Our findings indicate that these common issues in relation to ADHD were indicated in the three major attachment related themes that connected their relationships as a family.

The first theme: Distress and problems as related to biology - connected Rick's problems with a genetic explanation of inheritance from his father. Biologically based explanations are common in a range of conditions and potentially imply that problems are not connected to attachment processes in the family. Though biological explanations need not exclude the relevance of attachment responses of caring, emotional empathy and even of a grieving for the loss of a 'healthy' identity in this family they seemed to exclude some of these considerations. It was poignant that in the discussion regarding his father and the extent to which Rick looked like him he remarked that, 'it's not just the colour of someone's eyes that makes them follow in their footsteps... it's the despair in their eyes'. Interestingly, he laughs with his mother at this statement which is also a typical marker of dismissive attachment strategies, whereby the significance of statements about emotions and vulnerability are minimised by laughter. The 'despair' comment was

followed by Diane with a 'you don't say that' indicating discipline and missing the emotional content of what he has said and therefore perhaps adding further to Rick's (and possible Keith's) dismissive attachment strategies.

Interestingly, this medical discourse was also contested in various ways. Both Diane and Peter pointed out that inheritance comes from both parents and therefore a simple causal connection could not be made. However, it did also lead into a discourse advocated by Diane that Rick showed what could also be described as OCD or autistic spectrum disorder type symptoms from childhood. This suggested that there was something odd about Rick which had required earlier diagnosis and led to him having problems at school which compounded his problems.

The second theme: Self – responsibility in regulating emotional problems repeatedly cut across the biological theme and seemed to be a significant point of contestation. Peter, suggested that Rick's father could control his supposed 'biologically – based' anger when he needed to. In effect this discourse suggested that temper and the 'red mist' might to some extent be seen as manipulative. As such it follows that the responses therefore lie on the domain of the family disciplinary system and not for the family to explore what might be upsetting for the child. Again it seemed that whereas an attachment response was needed this was met with discipline. This is a frequent process in many families and particularly in re-constituted family situations; the non biological parents appears to be more likely to advocate the relevance of disciplinary as opposed to attachment responses in relation to difficult behaviour, especially 'protest' in a child. Therefore Peter is mis-matching the discipline domain where Rick might benefit from an attachment response. The related concept of 'spoiling' a child was also mentioned in relation to Anthony's childhood and how that did him no favours. Diane and Peter seem to lack clarity and similarity in their discipline domain. Although they are both dismissive, Diane has a softer approach to her responses whereas Peter uses harsher words and tones.

This theme of self-responsibility is closely allied with avoidant attachment strategies which Peter displayed in his AAI and were also indicated in Diane's AAI pattern. Peter described very poignantly in his own AAI how he had needed to be extremely self-reliant in his own family. He did not advocate this position for Diane but indirectly advocated this position by his challenging the validity of a biological explanation.

The final theme: Problems related to family relational issues, conflicts and triangulation – was possibly the most indirect and defended theme in the family. Diane introduced it as a possible factor in terms of the early experience of conflict between herself and Anthony. However, this conflict was mainly referred to as a consequence of Anthony's actions, his personality, and his unfortunate family background. Diane acknowledged that the conflicts may have impacted on the children, especially Rick but was quick to argue that she had done well to protect them from the worst of this. She did not indicate that she had any part in the break-up though, in his individual interview, Rick indicated that he had been told by his father that the break-up was due to their incompatibility and not just his fault. Throughout the interview it appeared to be important for Diane to be seen as a competent mother and she intimated that the responses of some professionals had led to her feeling blamed about the children's problems.

An important omission in the discussion of conflicts or anywhere else in the family interview was the continuing conflict between Anthony (Rick's father) and Diane and Peter. Rick in his individual

interview explained that he felt confused and caught between their continuing conflicts and at times didn't know who or what to believe. His TAAI indicated a complex attachment representation with markers of both dismissive and pre-occupied attachment strategies. These were particularly evident in his interview at points where he talked about the relationship between his biological parents. Further, at these times he also showed disorientation in a lack of certainty about his own mental states, not being able to trust his memory and saying he didn't know who to believe. Importantly, he did not make a connection though between his confused feelings regarding his own parents and his emotional problems. Likewise, in the family interview this issue was not addressed though RD attempted to introduce it into the conversation. Diane moved the direction of the conversation onto her attempts to cope well as a mother and how as a family they therefore came through the difficult period with Rick's father. However, it was clear that there was on-going tension between Diane, Peter, and Rick's father but this was not referred to nor was it ever introduced as a possible cause of some of Rick's distress.

The focus of this paper is on Rick since he was presenting with the major difficulties. Though interestingly some two years after this interview the family were contacted and though Rick was said by Diane to be doing well, Keith was now seen as becoming anxious and needing therapeutic support. The conversational dynamics can be seen to fit with their individual attachment orientations. Peter offered analytic advice on occasion and physically sat away from the family. This fitted with his AAI indicating a dismissive pattern. Diane displayed a mixture of dismissive strategies but also at times anger and pre-occupation with lack of support from professional systems. She held the conversational floor for most of the family interview but could also be seen to attempt to be an emotional bridge between Peter's emphasis on the importance of clear rules and discipline in the family and her sense that Rick was vulnerable and also needed emotional support. Straddling this position appeared to match the two sides of her attachment strategy. It may also suggest her awareness of Peter and herself not having shared domains for discipline and attachment and that they are frequently mis-matching attachment response seeking with discipline.

Rick in some ways displayed a mirroring of his mother's attachment pattern and displayed a dismissive pattern for most of his AAI interview with disorientation and pre-occupied patterns when he mentioned his parents' relationship. In the family session he frequently looked to Diane for advice and clarification of his own thoughts. Such a pattern is more developmentally evident with younger children and parents where they still require parents to help narrate their thoughts.

Keith's position was interesting and in some ways similar to Peter's. He adopted a largely dismissive attachment strategy. In the family interview this was evident in his more distant position and largely analytical statements. However, he showed some tension around his attachment position as well in terms of striving to make a claim that Rick's behaviour had caused the family to be dysfunctional, whereas he in contrast had behaved better. This position could be seen as making some claims for more of his parent's time and attachment responses. A sense of resentment that the sibling displaying problems is also claiming the majority of the attention appears to be common amongst siblings in many families with whom we have worked.

Finally, it is both what is and is not talked about in families which is significant. By employing a combination of individual and a family interview we could see some important gaps between issues that were raised between the two sets of interviews. The most pronounced of these omissions in the family interview was the triangulated position

that Rick felt most acutely in this family. This issue, it appeared, could not be articulated openly in the family interview. Instead, a discussion of how Rick was like his father was opened up but instead of moving to a consideration of the attachment dilemmas which this raised for him it moved to a discussion of how his father, and possibly by implication Rick, used anger and his temper in a manipulative way. Peter attempted to give Rick a route out of the dilemma this raised for him by observing that Rick was not as manipulative as his father. But arguably, to accept this it implied Rick seeing his father more negatively which was just the dilemma he was in. Perhaps, it is possible to see why for Rick, and of course for many adolescents, the only viable route through such family dilemmas is to distance themselves from the family system.

We have attempted to utilise a combination of systemic, attachment and CA perspectives in looking at how attachment dynamics are constructed in a family conversation. Of course the family may act differently when by themselves and not on 'display' in a recorded interview. However, by combining an analysis of a family conversation with their accounts in their individual interviews we think points towards what may be some important features of how this family, and by extension others with similar problems construct their shared attachment relationships and relational dynamics. Core to our analysis is a consideration of what constitutes an 'attachment' need and request and what is seen as requiring discipline or medical intervention. Thought not distinct the balance between these is important [12]. In this family, it did seem that for Rick an important part of the attachment dilemma of being caught between the conflicts of two people he loved – his mother and father was not open for discussion. In our experience the attachment dilemma of such a triangulated position is extreme and appears to be linked to a range of problems) [7]. There may not be a clear one-to-one correspondence with triangulation and any one form of 'disorder' but interestingly, like many families Rick and his parents had considered a variety of explanations for ADHD. In fact, it was Rick who had read about ADHD and had suggested this initially to the family as a possibly cause for his problems.

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