The Anchoring Function: Parental Authority and the Parent-Child Bond

HAIM OMER*
SARIT G. STEINMETZ[†]
TAL CARTHY[†]
ARIST VON SCHLIPPE[‡]

Descriptions of parental authority and of the formation of a secure parent-child bond have remained unconnected in conceptualizations about parenting and child development. The parental anchoring function is here presented as an integrative metaphor for the two fields. Parents who fulfill an anchoring function offer a secure relational frame for the child, while also manifesting a stabilizing and legitimate kind of authority. The anchoring function enriches the two fields by: (1) adding a dimension of authority to the acknowledged functions of the safe haven and the secure base that are seen as core to a secure parent-child bond, and (2) adding considerations about the parent-child bond to Baumrind's classical description of authoritative parenting.

Keywords: Anchoring Function; Parental Authority; Parent-child Relations

Most formulations of parenting that promote a positive parent-child bond tend to focus on parental caring, sensitivity, and attunement (e.g., Ainsworth, 1991), implying that these are the core parental qualities that are crucial for the establishment of a secure and positive relationship. The parental qualities that reflect authority, such as firmness, discipline, and supervision, have been usually discussed only in the context of countering negative behaviors. In our view, positive parental authority, which fulfills an *anchoring function*, is a central component of a secure parent-child bond. The *anchoring function* is proposed as a bridge between two widely accepted models on parenting and development: the view of authoritative parenting derived from Baumrind's seminal work (1966; 1971) and the view of growth as a function of a secure parent-child bond, as epitomized by attachment theory (Ainsworth, 1991; Bowlby, 1982). Rather than being a new idea, the *anchoring function* serves as a bridge between those two "old" fields. However, the anchor metaphor appears to have heuristic value of its own, contributing to the fields it was designed to bridge. Thus, it allows us to embody the concept of authoritative parenting in a detailed treatment program with wide clinical applications (Omer, 2004, 2011). And it may enrich our understanding of the crucial elements in the parent-child bond, by expanding on the core metaphors of the safe haven and secure base that were derived from attachment theory.

*School of Psychological Sciences, Tel Aviv University, Tel Aviv, Israel.

[†]School of Psychology, Interdisciplinary Center (IDC), Herzliya, Israel.

[‡]Witten-Herdecke University, Witten Germany.

Correspondence concerning this article should be addressed to Sarit G. Steinmetz, School of Psychology, Interdisciplinary Center, kanfei Hanesharimand Alterman, Herzliya 46150, Israel. E-mail: saritgs@idc.ac.il.

PARENTAL AUTHORITY AND THE PARENT-CHILD BOND

Traditionally, parental authority was often defined by distance, punishment, and dominance. The authority figure saw him- or herself as the sole and absolute source of power, accountable to no one, and holding no responsibility for escalation in the interaction with the child. Disciplinary harshness was viewed solely as a function of the child's opposition (Braunmuehl, 1983). A new view of authority gradually gained acceptance with Baumrind's conceptualization of parenting as a function of two orthogonal factors, responsiveness and demandingness (Baumrind, 1966; Maccoby & Martin, 1983). *Responsiveness* refers to the extent to which parents foster the child's individuality and self-assertion by being attuned, supportive, and sensitive to the child's requests. *Demandingness* refers to the claims parents make on children to become integrated in society by behavior regulation through discipline and supervision. According to this model, parenting characterized by the traditional authority described above is highly imbalanced by being low in responsiveness and high on demandingness, thus representing an "Authoritarian-Directive" style (Baumrind, 1991). Such a style of authority would probably offer the child a conditional and insecure parent-child bond, for the child is accepted by the parent and receives affection only as long as he or she complies. Such conditional regard has negative consequences both for the child's development (Kanat-Maymon, Roth, Assor, & Reizer, 2012), and for his or her attitude towards the parent (Roth, Assor, Niemiec, Ryan, & Deci, 2009). The arbitrary nature of some manifestations of authoritarian parenting ("You'll do that because I said so") also precludes the development of mentalizing skills, which are now viewed as central to the child's development (Fonagy, Gyorgy, Jurist, & Target, 2004). Mentalization is obstructed because the child's mind is not being "kept in mind" by the parent, while the parent's mind is made willfully opaque ("Orders should be obeyed, not understood!").

Indeed, since the late 1950s this type of parental authority has come under severe criticism. An anti-authority stance became more and more fashionable among psychologists and educators. Hopes ran high that children could be reared without demands and restrictions, which were viewed as detrimental to spontaneous growth (Braunmuehl, 1983). Today, however, most professionals would agree that these hopes were disappointed. Children brought up in this spirit turned out to have more problems than children reared in a more traditional manner (Baumrind, 1973, 1971; Lamborn, Mounts, Steinberg, & Dornbusch, 1991; Mayseless, Scharf, & Sholt, 2003; Parke & Buriel, 1998; Steinberg, 2001). However, the old model of authority could not be simply reinstated. It had to be redefined so as to fit with our ideals about responsive and sensitive parenting as well as with the values of a more democratic society. Baumrind's (1966, 1971) description of authoritative parenting was a major step in this direction. According to her, the authoritative parent directs the child's activities, but does so in a rational, issue-oriented manner, encouraging dialogue, and sharing with the child the reasoning for a decision to be taken.

The present model of authority builds on Baumrind's formulations, expanding it by specifying the sources and means of parental authority, as well as the links between these factors and the formation of a secure parent-child bond. The model, also known as the "non-violent resistance" or the "new authority" approach, is based on clinical experience and empirical evidence from several parent-counseling programs conducted in Israel, Germany, the U.K., and Belgium (Koetter & Schlippe, 2007; Lebowitz, Dolberger, Nortov, & Omer, 2012; Levavi, 2010; Ollefs, Schlippe, Omer, & Kriz, 2009; Oleffs & Schlippe, 2007; Omer, 2001, 2004, 2011; Omer & Lebowitz, 2012; Vanschoonlandt, Van Holen, & Vanderfaeillie, 2012; Weinblatt & Omer, 2008). In these programs, parents received a short-term (ten to twenty sessions) intervention, emphasizing parental presence, ability to structure the environment, self-control, and social support. The interventions were

administered to clinical populations (e.g., parents of children with ADHD, aggressive behavior, anxiety disorders, truancy, self-risk, and delinquent behaviors) and non-clinical ones (e.g., parents worried about possible computer abuse and exposure, cannabis and alcohol exposure, and dangerous driving style). The counseling program, administered to families with parents from European, African, and Middle-Eastern origins, has been shown to reduce children's symptomatic behaviors and parents' sense of helplessness and punitiveness. The wide cultural range of the treated populations shows the model to be relevant for parents originally from both more democratic or more traditional societies. Although the counseling has different emphases with these varied populations, the accept-ability of the approach and the effects of the intervention are similar, with drop-out rates probably among the lowest in the literature (Ollefs et al., 2009; Weinblatt & Omer, 2008). The goal of this paper is to lay out the central concept guiding this work—*the anchoring function*—and its relation to authoritative parenting and the furtherance of a secure bond.

THE CONTRIBUTION OF DEVELOPMENTAL MODELS

Attachment theorists have provided two influential metaphors for the parental atti-tudes that foster a secure parent-child bond: the provision of a safe haven and of a secure base (e.g., Ainsworth, 1991; Bowlby, 1988; Cassidy, 2008; Mikulincer & Shaver, 2007). However, attachment theory has mostly ignored the role of parental authority in the for-mation of secure attachment; an omission that has been criticized by some attachment scholars (e.g., DeWolff & van Ijzendoorn, 1997). The disregard of parental authority in the attachment literature may also stem from the relative scarcity of attachment research in middle childhood and adolescence, when issues of authority become more and more salient (Moss, Bureau, Beliveau, Zdebik, & Lepine, 2009). In these developmental periods, as the child broadens his or her field of exploration and becomes exposed to new risks, the link between authority and and the creation of a secure parent-child bond becomes even more relevant. We thus hold that parental sensitivity and availability should be combined with authority for a stable bond to continue developing during these years. This could be achieved by the parental *anchoring function,* which would thus complement the functions of the safe haven and the secure base that had been posited as necessary and sufficent for the establishment of secure attachment. Whereas the safe haven and the secure base reflect the parent's offer of refuge and encouragement, the anchoring function reflects the safeguarding aspect of the parents' role, by which they keep the child from venturing into dangerous waters. To fulfill this function, parents must be themselves well anchored in their parental role. After all, an anchor that is not firmly attached cannot stop the ship from drifting. By firmly anchoring themselves, the parents become able to protect the child, themselves, and other family members from the developmental storms that jeopar-dize growth. Indication for this claim comes from Jones and Prinz's (2005) review of doz-ens of studies with evidence strongly supporting a link between parental self-efficacy (PSE) and parenting competence. Specifically, parents with higher PSE tend to demon-strate more effective parenting also in the face of challenging child behavior. In our view, parents with high PSE have actually a good sense of anchoring: they feel well grounded in their parental role and duty. However, the parents' self-anchoring does not grow of itself, out of the depths of the parents' minds. We argue that it has four major sources: structure, presence, support, and self-control.

Structure

Structure is created when parents define rules and routines that guarantee and protect the activities of the family and the child. Structure refers also to the parents' organization of protective boundaries, for example, to their room, their work, and their various leisure

and life spheres, as well as those of the child. In addition, it refers to the definition of roles, jurisdiction, accessibility, and rights of the different family members. Structure plays a crucial role in promoting a stable and secure frame for family life (Minuchin, 1974).

Structure is fundamental for any concept of authority. Traditionally, structure served first and foremost for the creation of distance. The authoritarian figures of the king, the community dignitary, and the "pater familias" were hedged in by unassailable boundaries. Not only was the authoritarian parent unapproachable (except by the strict rules of protocol), but also every other member of the family had his or her own strictly defined place with its attendant rules of behavior. Most of today's parents, however, no longer want to have rigid rules on how and when their child should approach them (Omer & Schlippe, 2010). However, in their eagerness to reject any semblance of a formal and distant style, many of those parents opt for an ideal of absolute availability and spontaneity, which often entails a lack of structure and permissiveness that may compromise the child's sense of clarity and stability (Baumrind, 1971). As Minuchin cogently argued, the boundaries of secure parental functioning may fail in two opposite ways: by being impermeable, or too permeable. Good structural therapy should address both conditions.

The damages of low parental structure are illustrated by research on the link between parental accommodation and functional impairment in children with obsessive-compulsive disorder (Garcia et al., 2010; Storch et al., 2010). Parental accommodation—the readiness of parents to yield to the demands of the obsessive-compulsive child regarding structure—is consistently linked to larger functional impairment as well as individual and family distress. These findings suggest that the anxious child's need for a parental anchor is not being met. Specifically, parents who give in to the anxious waves by yielding on all points of routine, boundaries, and demands exacerbate the child's anxiety by sending a message that they too are unable to stand up against it. Instead of serving as a dam, the parents amplify the flood. In our counseling program for parents of children with anxiety problems (Lebowitz & Omer, 2013), we have witnessed two attitudes, in line with Baumrind's (1981) conceptualization of authoritarian and permissive styles, both linked to parental failure to help the child: (1) a strictly demanding stance, which pushes the child without providing support, and (2) a yielding stance, allowing the anxiety to set the rules for the child, the parents, and at times—the entire family. We found that when parents begin a process that assists them to re-anchor themselves, safeguarding daily routines and family structure from the child's anxious demands, the child's distress and symptoms recede (Lebowitz & Omer, 2013).

A parallel process has been demonstrated with the parents of children with Attention Deficit Hyperactivity Disorder (ADHD). One of the common complaints of these parents is that the child's hyperactivity destabilizes not only the life of the child but of the whole family, restlessness and conflicts becoming endemic (e.g., Barkley, 2003; Campbell, Simpson, Boldry, & Kashy, 2005; Lange et al., 2005; see Deault, 2010, and Johnston & Mash, 2001, for reviews). Rather than feeling able to provide an anchoring function for the child, these parents feel tossed about by the child's restlessness. We have found that helping parents to develop "routine anchors" and to guarantee "safe spaces" for themselves, the affected child, and the other children in the family leads to significant reduction in parents' feeling of helplessness and depression, as well as to a marked improvement in the child's attention problems (Ollefs et al., 2009). This finding supports the notion that parental self-anchoring lends stability to the child, reducing his or her level of attentional and emotional lability.

Presence

Parental presence is conveyed by acts and attitudes that show the child that their parents are available and responsive (Ainsworth, Blehar, Waters, & Wall, 1978). While this has typically been described in the context of the child's distress, we claim that parental

presence is manifested also when the parent exercises authority, for instance—in the vital task of supervision (Omer, 2004, 2011).

Parental vigilant care (e.g., "supervision" or "monitoring"[1]) has been shown to be the best preventive measure to a great variety of risk behaviors in children of all age groups (Fletcher, Steinberg, & Williams-Wheeler, 2004; Frick et al., 1992; Petit, Laird, Dodge, Bates, & Criss, 2001). In their meta-analysis, Loeber and Stouthamer-Loeber (1986) found that in addition to positive parental involvement, monitoring and supervision were the dimensions most strongly associated with reduced aggressive and destructive behavior in the child.

The importance of parental vigilance for the development of a secure relationship has been highlighted by authors who concern themselves with the parent-child interaction beyond the toddler years. Thus, while during infancy parents have a rather direct control over the child, in later years children's engagement in independent activities increases, and the child spends more and more time beyond the parents' field of vision (Guttmann-Steinmetz & Crowell, 2006; Waters, Kondo-Ikemura, Posada, & Richters, 1990). In their extension of attachment theory to later childhood, Waters et al. (1990) suggest that the value of the parents' protective care does not decline but takes a different form, becoming increasingly dependent on the child's cooperation, as parents and child develop the shared goal of maintaining mutual access. However, the child's cooperation in this respect may not be self-evident. To exercise effective vigilant care, parents must assume the responsibility and maintain their presence even in face of the child's opposition. Vigilant care is therefore manifested both in the parents' sensitive watchfulness regarding the child's signals of need and distress (Ainsworth et al., 1978) and by their determination to stay close, even when the child tries to keep them at bay (Loeber & Stouthamer-Loeber, 1986). Both functions are needed to give the child security.

Interestingly, in the literature on parental monitoring and supervision, no notice was taken of the similarity between the parents' supervisory activity over a teenager's activities and a parent's vigilant care over the baby. Drawing this parallel will clarify the difference between the distant or intrusive kind of supervision characteristic of an authoritarian kind of authority, and the bond-maintaining nature of an authoritative, anchoring one.

Parents change their level of vigilance regarding the baby, continuously and spontaneously. Thus, when the baby is asleep or calm, the parent may remain busy with other tasks, while keeping his or her mind open for any possible signs of distress—a level of vigilance we term "open attention". This parent's level will be raised to "focused alertness" if the parent detects a sign that might signify distress. At this stage the parent is more closely attentive, but still does not undertake protective action, waiting to see if the baby becomes calmer. If, however, the signs of distress persist, the parent goes up a further level to "active protection", taking action to relieve the baby's distress. Moving flexibly between these levels allows the parents to manage their resources in an informed manner, providing protection while minimizing intrusion.

These fluctuations continue to characterize parental vigilant care throughout childhood and adolescence. In fact, we maintain that the greater a parent's ability to shift between the three levels of vigilant care, the more effective is his or her authority (Omer, 2011). Parents who feel unable to raise their level of vigilant care, even in the face of danger signals, manifest a lack of authority. In our view, this parental inability reflects a weakening of the parent-child bond: the parent no longer trusts the bond to withstand the challenge

---

[1]The parental attitude we are aiming at should involve care and presence in a way that is quite different from the inspectional stance connoted by the terms *supervision* or *monitoring*. To emphasize this difference we prefer the term *vigilant care*.

of closer vigilance. This becomes evident when the parents of an adolescent object to the suggestion they should look closer at his or her doings by saying: "He will never forgive me for that!" or "If I do this, she will distance herself even more!"

We believe that although teenagers may protest, they in fact feel grateful when their parents are attentive and ready to become involved in case of need. This is illustrated in what a 16-year-old girl told her therapist about her response to a friend, who bragged that her mother was "cool" and never asked her where she was going or when she was coming back. She had answered her friend: "Really? Doesn't she care about you at all?"

Vigilant care also contributes to the child's developing capacity to watch over him- or herself. In our view, the best way to understand the strong link between parental supervision and reduced risk behaviors is to assume that children who experience the parents' vigilant care gradually internalize it. This is demonstrated in a study of preschoolers and their mothers, which showed that children's attachment security was related to high interest in forbidden toys during a "resistance to temptation" task but lower likelihood of transgressing in the mother's absence (Laible & Thompson, 2000). In addition, children in secure parent-child dyads were more likely to express remorse if they failed to resist the temptation, suggesting that these children are already on their way to a fuller internalization of the ability to watch over themselves.

Flexible vigilant care can thus be likened to an anchor with a long rope. In the back of the child's mind the parental anchor is always there, but the tug of the rope is actually felt only when the child gets into troubled waters. With time, the child no longer needs to get to the very end of the tether, but learns to restrain him- or herself before that—suggesting that the parental anchor has become internalized.

Social Support

Another pillar of the anchoring function is social support, typically based on the marital unit, the extended family, friends, and community groups or institutions (e.g., parents' groups, school, church, etc.). These supportive elements guarantee a broad, legitimate, and transparent base for the parents' authority (Omer, 2011). Traditionally, authority was viewed as a pyramid. The person at the top stood in royal isolation over those beneath. However, free societies have grown exceedingly suspicious of strict hierarchies, in families no less than elsewhere. But can we have an authority that is not structured top-down? Can the boss not really be the boss?

In fact, even the rule of the most traditional *pater familias* was not the product of his isolated power. The father's authority was upheld by the virtually unanimous support of all major sectors of society. Authority, however, has stopped being self-evident or unanimously upheld. Therefore, in order to stabilize parents in their parental role as not only available and responsive, but also as authority figures, we may need a process of re-authorization, in which the parents' authority is reaffirmed by their support system. This process of supportive legitimization by a helping group, including relatives and friends, provides a wider base for the parents' authority, while also limiting the arbitrariness of their power, as the involvement of supporters engenders transparency (Omer, 2004, 2011). Indeed, studies have shown that parents who bolster their authority with the help of a supportive network feel less helpless, are less punitive, and report a decrease in escalating conflicts with their children (Levavi, 2010; Ollefs et al., 2009; Weinblatt & Omer, 2008).

In this context, it is important to note that the almost exclusive dyadic focus of attachment theory (e.g., Bowlby, 1982, 1988) has perhaps obscured the role played by social support in the development of the parent-child bond. Even in the first year of life, attachment is not strictly dyadic, but often triadic (mother-father-child) or even *n-adic* (Sydow, 2008). The support system strengthens the parents, making them more confident and better able

to convey their expectations to the baby in delicate situations, for instance, when they try to reduce the frequency of nightly feedings or to make the transition to solid foods. Indeed, social support for first-time mothers was found to be significant for both enhancing maternal self-efficacy and reducing depression in mothers of newborns (Leahy-Warren, McCarthy, & Corcoran, 2012).

The importance of social backing for parental functioning has also been demonstrated with older children. Parents who were willing to receive social support, particularly from the extended family, were found to be more involved with their pre-school child, co-parented more consistently, and used less physical punishments (Coyl, Newland, & Freeman, 2010). Social support thus strengthens the parents, while also setting limits on inappropriate ways of exercising authority.

The establishment of a support system is emblematic of the way the parents' self-anchoring enables them to serve as an anchor for the child. The anchor image is here particularly apt: A small anchor can stop even a very a heavy ship by virtue of its spikes. An anchor of one spike (the isolated parent), no matter how big, would make the task infinitely more difficult. As the child grows, the fact that the parents are anchored in their support system makes their demands more valid and acceptable. In one of our cases a 14-year-old teenager reacted to her mother's demand that she tell her where she was going and when she planned to return, with the usual protest: "You are the only mother that makes such demands!" The mother answered: "I have talked to three other mothers in your group, and we are in this together" (Omer, 2011). This social validation gives the mother broader shoulders, while also lessening the girl's sense of defeat in accepting the ruling. After all, accepting a common rule is less demeaning than bowing to a single will. Moreover, parents' connectedness contributes also to the child's sense of security, as others may step in to relieve them in case of need. Members of the extended family, especially grandparents, may play a crucial role in this respect. Indeed, in families with an involved grandparent, adolescents are in less risk of anti-social behaviors (Dornbusch et al., 1985).

This is particularly relevant when parent-child confrontations escalate rapidly, as not all problems have to be solved in direct confrontation between parent and child. Thus, an aggressive girl, who is able to "take a rest" from an all too demanding interaction with her parents, by spending some time with her uncle may experience more degrees of freedom in her relationship with the parents. The uncle may then also offer to act as a mediator. This may have a positive influence on the parents' authority, especially if the uncle also conveys to his niece that the parents have the duty to resist her violence. Such a supportive network may also help the child internalize a more flexible interpersonal working model, in which relational crises can be solved not only by direct confrontation, but also by the help of others in the immediate environment.

Self-control

Finally, parents anchor themselves through self-control and persistence. By avoiding escalation in the interaction with the child, by facing intimidation without surrendering, and by resisting contagion by the child's negative feelings, parents add ballast to their presence. Self-control is not exhausted by the avoidance of negative reactions, but is also manifested by the parents' positive ability to endure and persevere. Through these the parents add a time dimension that gives depth to their authority. This is the very opposite of the shallow might of authoritarian parents who build their power on immediate punishments (Omer, 2011).

Traditionally a parent's authority was reflected in his or her ability to achieve complete control over the child. However, this attitude turns the relationship into a power struggle, where the only possible outcomes are controlling or being controlled. Parents may then tend to extreme reactions, when they feel the latter is the case (Bugental, Blue, &

Cruzcosa, 1989; Bugental, Lyon, Krantz, & Cortez, 1997). We therefore propose that parental authority should be viewed as a function of the parents' *self*-control, rather than of the attempt to control the child. This conceptualization follows from the notion that parents who develop self-control gain stability and strength in the process, while also opening space for cooperation. Self-control is also manifested when the parents persist in a non-domineering way in their parental duty, even in the face of opposition. By doing this without assuming an authoritarian, controlling stance, they relieve the child from "the obligation to resist". In fact, parents who underwent our program, which has a strong emphasis on self-control, became less submissive, were less involved in power struggles, and improved the quality of their relationship with the child (Levavi, 2010; Weinblatt & Omer, 2008).

Authority based on self-control offers the child a much safer relational frame than authority that is based on control and total obedience, as the parent-child bond is not conditional and the child is not threatened with the annihilation of his or her will. Internalizing a controlling interaction with a parent may result in a dominance-oriented working model for future relationships. In contrast, the quiet strength conveyed by the parent who exercises self-control may allow the child to use the parent as a stabilizing anchor. Such interactions allow for the formation of a positive working model for interpersonal relationships, as well as enhancing the child's development of self-regulation.

The difference between control and self-control involves also a contrasting attitude regarding time, for the parent no longer feels obliged, as the authoritarian parent may, to react immediately when the child does not comply. The urge to retaliate immediately creates a situation in which confrontations invariably occur at the height of arousal. The parent-child relationship then runs the danger of drowning in escalation. In contrast, when the parents become anchored in their self-control, time itself becomes a source of strength. In our program, we coined three time-related phrases to help parents mitigate their sense of urgency and improve their self-control: "You don't have to win, but only to persist!", "Strike the iron when it is cold!", and "Mistakes are inevitable, but can be corrected!".

The ability to persist, delay responses, and, if necessary, make amends for one's mistakes creates new conditions for relating. Persistent parents provide an emotional guarantee that they are continuously available for the child; parents who postpone and weigh their response allow the child leeway to reconsider; and parents who can offer the child reparation for an inappropriate act demonstrate to the child that ruptures can be mended. In fact, our clinical experience revealed that parents' courageous willingness to make amends for an inappropriate act, far from weakening their authority, actually reinforced it. Such a parent becomes able, when the occasion arises, to lead the child in making amends for his or her own offenses (Omer, 2011).

Time itself is a crucial aspect of these parent-child interactions. Viewed from an authoritarian perspective, every confrontation with the child must have an immediate outcome: either the child obeys, is punished, or "wins". The present kind of authority, in contrast, unfolds in and through time. The authority figure accrues depth and weight by virtue of his or her willingness to persist, delay response, and perform or demand reparation for damaging acts. The child who experiences the parent's persistence learns to feel the parent as present, even when no immediate reaction is forthcoming.

CASE

In the following vignette we italicize uses of the different aspects of the anchoring image in the therapist's work with the parents.

Mia and Joe, parents of 10-year-old Sid, were seen at our clinic for treatment due to their son's OCD and ADHD. When they came into the first session, they described a series

of rules Sid has imposed on the family, on account of his fears of contamination and feelings of disgust. Many of these were directed at his 5-year-old sister Cindy (e.g., Cindy was not allowed to be in the kitchen when Sid was there, nor could she sit together with him at table, and when Sid left his room in the morning he would phone his mother to make sure he would not see Cindy before leaving for school). Other rules were for all family members, regarding meals, entrance into and leaving of the house, such as wiping the feet 16 times before coming in. These demands were enforced by screams, tantrums, and extreme threats. Sid would also pull his mother's hair, scream in her ear, and prevent her and Joe from sleeping. He had had one session with a therapist but refused ever to come again. He adamantly refused to see a psychiatrist or take medication. He was also very restless, and Joe described living with him as being at the mercy of a tornado.

The therapist explained to the parents that the purpose of treatment would be to regain *weight and stability* as parents, so that they might serve as *an anchor*, which would help Sid and the whole family from being *swept along* by Sid's problems. They would start by *anchoring themselves* in a few basic family rules and by *connecting themselves* to a number of supporters. The parents chose to focus first on resisting Sid's violence and threats and his humiliating rules regarding Cindy. The therapist helped them prepare a written announcement, stating they would no longer put up with those behaviors or keep their problem secret, but would get the help of anybody who could help them. When Sid tried to argue with them and threaten them that it would not help, they said: "*We cannot control you, but we can control ourselves.* We are your parents and will stay your parents! *You cannot discard us or divorce us*!" They got up to leave the room, whereupon Sid tore their written announcement to shreds. They said: "You are not required to agree! These are our decisions and we thought it only fair to communicate them to you. Abiding by our decisions is our job!" With the therapist's help they built a support group of ten people which included grandparents, uncles, and a number of close friends. The supporters were informed of the situation and were asked to contact Sid, whenever the parents told them about violent or humiliating occurrences.

The next day Cindy was sitting at the table during breakfast against all previous regulations. Sid tried to attack her, but Mia came in between them, getting the blows instead of her. She kept herself from escalating the situation and said to Sid: "Your violence is unacceptable! I will think about it with your dad and we will decide how to react!" During the day two uncles called and Sid's grandfather sent him an e-mail from Moscow. They told Sid that they cared for him and believed he would overcome his difficulties, but that the violence had to stop. Sid was furious with his parents and accused them of betraying his secret. They said: "We will not stay alone anymore! We are *connected* to the family and this makes us stronger!" Sid came into his parents' room when they were not there, destroyed the bed cover and cut up two dresses and one suit of his parents into small bits. He also tore apart Cindy's beloved doll. The parents documented the destruction and sent the photos to the support group. They came into his room and performed a "sit-in", telling him: "We will sit here until you come up with a solution so that this never happens again." They continued sitting quietly for 45 minutes, refusing to react to his provocations. They were told by the therapist that the sit-in is a *weighty manifestation of presence.* They were told that the sit-in would not change Sid directly, but would change them, adding *weight* to their parenting. At the end of the sit-in they told him: "We still have not found a solution, so we will *weigh our reaction* and tell you later on!" Mia, who already had a good understanding of the anchoring function, said: "That's good! Instead of giving him spur-of-the-moment reactions, we give him *a long-winded one.* We are building a *shelter against the whirlwind*!" Three days later they came to Sid and told him: "We've decided that you have to help pay for the damage. You are a child and you don't have to pay for it all, but we will also consider partial payment as valid. Do you want to come up with an idea alone,

or do you prefer that we decide what the payment will be?" Sid refused to volunteer a suggestion. The parents told him they had *plenty of time and* would *delay* their decision for a few days. Next day Sid's grandfather called him and told him: "Don't be a fool! If you make a proposal, even a modest one, they will accept it and they, and I too, will be satisfied! If you don't, they will hit your pocket badly and maybe even sell your computer!" This appeal to self-interest was effective. Next day Sid offered to wash the family car every week for a month. The parents agreed to the suggestion. Another supporter sent Sid an e-mail, telling him he had been smart and had succeeded in getting out of a tough spot. From then on Cindy ate together with the family and had no more limitations on her movement. At the beginning Sid refused to eat with them, but at least she was no longer segregated.

The next goal was to reduce the parents' services that were connected with Sid's OCD. Sid cried inconsolably when they gave him a new message informing him that they would stop a whole list of inappropriate services. Mia became very frightened by Sid's reaction and considered backing down. The father mailed the therapist, who gave them an extra meeting devoted to helping Mia understand that if she got *swept over* by Sid's anxiety, she would multiply the anxiety, whereas by *steadying herself against the pull of anxiety,* she would be offering him *an anchor* to secure him from his fears. Thereupon, Sid was visited by his grandmother, who invited him to stay in her house for a few days. He agreed, although in the grandparents' house, none of the compulsive rules were held. After a few days, the parents and Cindy came over and ate together with the grandparents. Sid participated during a small part of the meal. He was brought home the next day by the grandparents, who stayed with him at the parents' home, while Joe and Mia went out for the weekend. Cindy stayed at home and while the grandparents were there Sid started to sit at table with her. The grandparents thus served as a *transition anchoring point* allowing Sid to achieve goals he would have difficulty achieving in the presence of his parents. When they returned, Sid gradually relented and agreed to sit with the family during meals. Treatment continued for another few weeks. Sid still had rituals, but he no longer involved the family in them. The violence and humiliation stopped. Three years later Sid experienced a worsening of his fears, but this time he agreed to undergo CBT. Treatment was slow, but additional progress was made.

CONCLUSION

In the present model, parents foster a secure parent-child bond by fulfilling not only safe haven and secure base functions but also an anchoring function. This function can be viewed from two standpoints: that of the parental attitudes, connections, and acts that make it possible (the parent's "self-anchoring"), and that of the impact upon the child (the "anchoring" itself). The parents' self-anchoring is manifested when they: (1) create a structural framework that allows for a protected and stable family life; (2) stay present and involved in the child's life; (3) steady themselves through their supportive network; and (4) base their strength on self-control, persistence, and endurance. Each of these gives the parents a hold, enabling them to function as an anchor for their child.

Viewed from the child's perspective, the anchoring function is manifested in three major ways: (1) by contributing to the child's sense of security through safe and protective limits; (2) by offering the child a stable and non-controlling relational frame; and (3) by furthering the internalization of self-care skills and of a positive working model of relating (Mikulincer & Shaver, 2004).

Although we have described authority as dependent mainly on the acts of the parents, the experience of authority is not linear but reciprocal (Tuttle, Knudson-Martin, & Kim, 2012). This can be illustrated if we consider the different ways in which authority develops

with children with different dispositions. Thus, a child with a risk-seeking tendency (Byrnes, Miller, & Schafer, 1999) will elicit completely different patterns of parental supervision than one with an anxious temperament (Perez-Edgar & Fox, 2005). A poor match between the parent's supervisory activities and the child's needs (e.g., a parent excessively monitoring the activities of an anxious child), may exacerbate, rather than mitigate problems (Lebowitz & Omer, 2013).

The reciprocity of authority relations does not, however, preclude unilateral interventions, as was made clear by Patterson (1982): his classical model of coercive interactions is circular, but the interventions he developed are parent-initiated. The parents' unilateral steps, however, bring about not only changes in the child's behavior but on the whole interactive cycle, as exemplified by a pronounced reduction in power struggles and reciprocal negative emotions as a result of our intervention (e.g., Levavi, 2010).

As mentioned earlier, our program has been implemented, with adaptations, with parents from various social, ethnic, and religious backgrounds. Thus, parents who hold to a very traditional concept of authority have to be addressed differently from parents who hold that every solution should be achieved only through dialogue. The anchor image, however, is relevant for both. With more traditional parents, the therapist should stress that the treatment aims at strengthening them; the strength, however, is not that of sheer force, but rather an anchor, which is characterized by persistence, steadfastness, and support. Those parents can be helped to understand that in the society they now live in, attempts to implement the kind of power that parents in their original society usually held are bound to arouse opposition. Those parents are usually amenable to arguments pointing to the danger they will incur if they lose control and use physical punishments. In contrast, the strength they are being offered in the counseling will not only reinstitute their lost respect, but bring them support instead of antagonism. With liberal minded parents, who trust dialogue as a panacea for all ills, the therapist should emphasize that there are kinds of dialogue that are not only unproductive, but actually perpetuate the problem (e.g., endless arguments with the child about his or her rights to unlimited privacy). Those parents can be asked if their child tends to turn every question into a never-ending legal discussion. They can then be helped to understand that putting a stop to a fruitless argument is like anchoring a drifting ship.

Parents from different cultural backgrounds may also differ deeply on the kinds of support they are able to recruit. Orthodox Jews, for instance, will under no circumstances agree to the convening of a support group from outside the immediate family, as this would badly damage the marriage prospects of all their children. However, given the fact that orthodox Jewish families are usually quite large, there is little difficulty in recruiting help from a number of elder children, sons, and daughters in law. Migrant families are often amenable to two kinds of support networks: members of their own ethnic group (often in their neighborhood) and family members in their countries of origin, who often give excellent support by phone. A special problem is posed by the extremely isolated single parent, for whom a patient process of recruitment among school personnel, a couple of relatives, and perhaps a friend or two may be required. For those parents, the possibility of establishing small groups for mutual support can also be of help. Probably the most peculiar support group we ever recruited was with a family presumably linked to the mafia, who had been obliged to emigrate from Sicily to Germany because the father's life was under immediate threat. The problem was that their 6-year-old boy was violent in kindergarten to the extent that the parents felt a threat to their right of asylum in Germany. In the absence of any support group in their new place, appeal was made to their supposedly mafia relatives in Sicily, who took turns in phoning the child up daily, telling him that when he hit German children in their guest country, he was staining the family's honor. They also told him that, when he came home for vacations, things would of course be different.

Cultural sensitivity is a crucial requirement in any application of parenting models, especially when the anchoring function is considered. After all, parents cannot feel anchored if the parenting model they are asked to implement feels alien to their cultural roots. However, there are very few attempts to rigorously apply an extant intervention to parents from another culture, while attending both to the integrity of the original program and the cultural relevance of the training. Indeed, the work of Cardona and colleagues (2012) shows that this may require considerable adaptive effort. The very duality "authoritarian-authoritative" may work very differently in non-Western cultures. As Chao (1994) has shown, practices that are likely to be classified as authoritarian for most American parents are viewed positively, as "training", by Chinese parents. However, Chao's description makes it clear that, together with her emphasis on "training", the Chinese mother is also very present and close, thus making her authority quite different from the drill of a sergeant-major. We would interpret this mix of closeness with high expectations and demands as a Chinese version of anchoring.

The anchoring concept and the kind of authority it represents, far from excluding the parental warmth and sensitivity that have been usually connected with a stable and secure parent-child bond, actually allows for their better expression. After all, one cannot expect parental love to flourish under harsh developmental storms and in the absence of a well-rooted trunk. Parents must be both strong and sensitive for a dependable bond to thrive.

REFERENCES

Ainsworth, M. D. S. (1991). Attachment and other affectional bonds across the life cycle. In C. M. Parkes, J. Stevenson-Hinde, & P. Marris (Eds.), *Attachment across the life cycle* (pp. 33–51). New York: Routledge.

Ainsworth, M. D. S., Blehar, M. C., Waters, E., & Wall, S. (1978). *Patterns of attachment: A psychological study of the strange situation*. Hillside, NJ: Erlbaum.

Barkley, R. A. (2003). Attention-deficit/hyperactivity disorder. In E. J. Mash & R. A. Barkley (Eds.), *Child psychopathology* (2nd ed., pp. 75–143). New York: Guilford Press.

Baumrind, D. (1966). Effects of authoritative parental control on child behavior. *Child Development*, *37*, 887–907.

Baumrind, D. (1971). Current patterns of parental authority. *Developmental Psychology Monographs*, *4* (1, Pt. 2), 1–103.

Baumrind, D. (1973). The development of instrument competence through socialization. In A. D. Pick (Ed.), *Minnesota symposia on child psychology* (Vol. 7, pp. 3–46). Minneapolis: University of Minnesota Press.

Baumrind, D. (1991). Parenting styles and adolescent development. In R. Learner, A. C. Petersen, & J. Brooks-Gunn (Eds.), *The encyclopedia on adolescence* (pp. 746–758). New York: Garland.

Bowlby, J. (1982). *Attachment and loss: Attachment* (Vol. 1, 2nd ed.). New York: Basic Books. (Original ed. 1969).

Bowlby, J. (1988). *A secure base: Clinical applications of attachment theory*. London: Routledge.

Braunmuehl, E. v. (1983). *Antipaedagogik*. Weinheim: Belz.

Bugental, D. B., Blue, J. B., & Cruzcosa, M. (1989). Perceived control over care-giving outcomes: Implications for child abuse. *Developmental Psychology*, *25*, 532–539.

Bugental, D. B., Lyon, J. E., Krantz, J., & Cortez, V. (1997). Who's the boss? Accessibility of dominance ideation among individuals with low perceptions of interpersonal power. *Journal of Personality and Social Psychology*, *72*, 1297–1309.

Byrnes, J. P., Miller, D. C., & Schafer, W. D. (1999). Gender differences in risk-taking: A meta-analysis. *Psychological Bulletin*, *125*, 367–383.

Campbell, L., Simpson, J. A., Boldry, J., & Kashy, D. A. (2005). Perceptions of conflict and support in romantic relationships: The role of attachment anxiety. *Journal of Personality and Social Psychology*, *88*, 510–531.

Cardona, J. R. P., Domenech-Rodriguez, M., Forgatch, M., Sullivan, C., Bybee, D., Holtrop, K. et al. (2012). Culturally adapting an evidence-based parenting intervention for Latino immigrants: The need to integrate fidelity and cultural relevance. *Family Process*, *51*, 56–72.

Cassidy, J. (2008). The nature of the child's ties. In J. Cassidy & P. R. Shaver (Eds.), *Handbook of attachment: Theory, research, and clinical applications* (2nd ed., pp. 3–22). New York: Guilford Press.

Chao, R. K. (1994). Beyond parental control and authoritarian parenting style: Understanding Chinese parenting through the cultural notion of training. *Child Development*, *65*, 1111–1119.

Coyl, D. D., Newland, L. A., & Freeman, H. (2010). Predicting preschoolers' attachment security from parenting behaviours, parents' attachment relationships and their use of social support. *Early Child Development and Care*, *180*, 499–512.

Deault, L. C. (2010). A systematic review of parenting in relation to the development of comorbidities and functional impairments in children with attention-deficit/hyperactivity disorder (ADHD). *Child Psychiatry and Human Development*, *41*, 168–192.

DeWolff, M. S., & van Ijzendoorn, M. H. (1997). Sensitivity and attachment: A meta-analysis on parental antecedents of infant attachment. *Child Development*, *68*, 571–591.

Dornbusch, S., Carlsmith, J., Bushwall, S., Ritter, P., Leiderman, H., Hastorf, A. et al. (1985). Single parents, extended households and the control of adolescents. *Child Development*, *56*, 326–341.

Fletcher, A. C., Steinberg, L., & Williams-Wheeler, M. (2004). Parental influences on adolescent problem behavior. *Child Development*, *75*, 781–796.

Fonagy, P., Gyorgy, G., Jurist, E. L., & Target, M. (2004). *Affect regulation, mentalization and the development of the self*. London: Karnac.

Frick, P., Lahey, B., Locher, R., Stouthamer-Loeber, M., Christ, M., & Hanson, K. (1992). Familial risk factors to oppositional defiant disorder and conduct disorder: Parental psychopathology and maternal parenting. *Journal of Consulting and Clinical Psychology*, *60*, 49–55. doi: 10.1037/0022-006X.60.1.49.

Garcia, A., Sapyta, J., Moore, P., Freeman, J., Franklin, M., March, J. et al. (2010). Predictors and moderators of treatment outcome in the Pediatric Obsessive Compulsive Treatment Study (POTS I). *Journal of the American Academy of Child Adolescent Psychiatry*, *49*, 1024–1033.

Guttmann-Steinmetz, S., & Crowell, J. A. (2006). Attachment and externalizing disorders: A developmental psychopathology perspective. *Journal of the American Academy of Child and Adolescent Psychiatry*, *45*, 440–451.

Johnston, C., & Mash, E. J. (2001). Families of children with attention-deficit/hyperactivity disorder: Review and recommendations for future research. *Clinical Child and Family Psychology Review*, *4*, 183–207.

Jones, T. L., & Prinz, R. J. (2005). Potential roles of parental self-efficacy in parent and child adjustment: A review. *Clinical Psychology Review*, *25*, 341–363.

Kanat-Maymon, Y., Roth, G., Assor, A., & Reizer, A. (2012). Conditional regard in close relationships. In P. R. Shaver & M. Mikulincer (Eds.), *Meaning, mortality, and choice: The social psychology of existential concerns* (pp. 235–251). Washington, DC: American Psychological Association. doi: 10.1037/13748-013

Koetter, C., & Schlippe, A. von. (2007). Coaching in gewaltlosen Widerstand. In A. v. Schlippe & M. Grabbe (Eds.), *Werkstattbuch Elterncoaching: Elterliche Praesenz und gewaltloser Widerstand in der Praxis* (pp. 269–280). Goettingen: Vandenhoeck & Ruprecht.

Laible, D. L., & Thompson, R. A. (2000). Mother-child discourse, attachment security, shared positive affect, and early conscience development. *Child Development*, *71*, 1424–1440.

Lamborn, S. D., Mounts, N. S., Steinberg, L., & Dornbusch, S. M. (1991). Patterns of competence and adjustment among adolescents from authoritative, authoritarian, indulgent, and neglectful families. *Child Development*, *62*, 1049–1065.

Lange, G., Sheerin, D., Carr, A., Dooley, B., Barton, V., Marshall, D. et al. (2005). Family factors associated with attention deficit hyperactivity disorder and emotional disorders in children. *Journal of Family Therapy*, *27*, 76–96.

Leahy-Warren, P., McCarthy, G., & Corcoran, P. (2012). First time mothers: Social support, maternal parental self-efficacy and postnatal depression. *Journal of Clinical Nursing*, *21*, 388–397.

Lebowitz, E., Dolberger, D., Nortov, E., & Omer, H. (2012). Parent training in nonviolent resistance for adult entitled dependence. *Family Process*, *51*, 90–106.

Lebowitz, E., & Omer, H. (2013). *Treating child and adolescent anxiety*. Hoboken, NJ: John Wiley & Sons.

Levavi, I. (2010). Reducing escalation between parents and children by non-violent resistance: A systemic controlled evaluation. Doctoral dissertation, Tel-Aviv University.

Loeber, R., & Stouthamer-Loeber, M. (1986). Family factors as correlates and predictors of juvenile conduct problems and delinquency. In M. Tonry & N. Morris (Eds.), *Crime and justice: An annual review of research* (Vol. 7, pp. 129–149). Chicago: University of Chicago Press.

Maccoby, E. E., & Martin, J. A. (1983). Socialization in the context of the family: Parent-child interaction. In P. H. Mussen (Ed.), *Handbook of child psychology* (Vol. 4, pp. 1–101). New-York, NY: Wiley.

Mayseless, O., Scharf, M., & Sholt, M. (2003). From authoritative parenting practices to an authoritarian context: Exploring the person-environment fit. *Journal of Research on Adolescence*, *13*, 427–456.

Mikulincer, M., & Shaver, P. R. (2004). Security-based self-representations in adulthood: Contents and processes. In W. S. Rholes & J. A. Simpson (Eds.), *Adult attachment: Theory, research, and clinical implications* (pp. 159–195). New York: Guilford Press.

Mikulincer, M., & Shaver, P. R. (2007). *Attachment in adulthood: Structure, dynamics, and change*. New York: Guilford Press.

Minuchin, S. (1974). *Families and family therapy*. Cambridge, MA: Harvard University Press.

Moss, E., Bureau, J. F., Beliveau, M. J., Zdebik, M., & Lepine, S. (2009). Links between children's attachment behavior at early school-age, their attachment related representations, and behavior problems in middle childhood. *International Journal of Behavioral Development*, *33*, 155–166.

Ollefs, B., Schlippe, A. V., Omer, H., & Kriz, J. (2009). Youngsters with externalizing behavior problems: Effects of parent training (in German). *Familiendynamik*, *34*, 256–265.

Omer, H. (2001). Helping parents deal with children's acute disciplinary problems without escalation: The principle of non-violent resistance. *Family Process*, *40*, 53–66.

Omer, H. (2004). *Nonviolent resistance: A new approach to violent and self-destructive children*. New York, Cambridge: Cambridge University Press.

Omer, H. (2011). *The new authority: Family, school and community*. New York: Cambridge University Press.

Omer, H., & Schlippe, A. von. (2010). *Stärke statt Macht*. Göttingen: Vandenhöck & Ruprecht.

Parke, R., & Buriel, R. (1998). Socialization in the family: Ethnic and ecological perspectives. In W. Damon (Series Ed.) & N. Eisenberg (Ed.), *Handbook of child psychology. Social, emotional, and personality development* (Vol. 4, pp. 463–552). New York: Wiley.

Patterson, G. R. (1982). *A social learning approach: Coercive family processes*. Eugene, OR: Castalia.

Perez-Edgar, K., & Fox, N. A. (2005). Temperament and anxiety disorders. *Child and Adolescent Psychiatric Clinics of North America*, *14*, 681–699.

Petit, G. S., Laird, R. D., Dodge, K. A., Bates, J. A., & Criss, M. M. (2001). Antecedents and behavior problem outcomes of parental monitoring and psychological control in early adolescence. *Child Development*, *72*, 583–598.

Roth, G., Assor, A., Niemiec, C. P., Ryan, R. M., & Deci, E. L. (2009). The negative emotional and behavioral consequences of parental conditional regard: Comparing positive conditional regard, negative conditional regard, and autonomy support as parenting practices. *Developmental Psychology*, *45*, 1119–1142.

Steinberg, L. (2001). We know some things: Parent-adolescent relationships in retrospect and prospect. *Journal of Research on Adolescence*, *11*, 1–19.

Storch, E. A., Larson, M. J., Muroff, J., Caprono, N., Geller, D., Reid, J. M. et al. (2010). Predictors of functional impairment in pediatric obsessive-compulsive disorder. *Journal of anxiety disorders*, *24*, 275–283.

Sydow, K. V. (2008). Attachment theory and systemic therapy (in German). *Familiendynamik*, *33*, 260–273.

Tuttle, A. R., Knudson-Martin, C., & Kim, L. (2012). Parenting as relationship: A framework for assessment and practice. *Family Process*, *51*, 73–89.

Vanschoonlandt, F., Van Holen, F., & Vanderfaeillie, J. (2012). Ontwikkeling en proefimplementatie van twee ondersteuningsprogramma's voor pleegouders. *Orthopedagodiek: Onderzoek en Pratijk*, *51*, 69–83.

Waters, E., Kondo-Ikemura, K., Posada, G., & Richters, J. E. (1990). Learning to love: Mechanisms and milestones. In M. R. Gunnar & L. A. Sroufe (Eds.), *Minnesota symposia on child psychology: Self processes and development* (Vol. 23, pp. 217–255). Hillside, NJ: Erlbaum.

Weinblatt, U., & Omer, H. (2008). Non-violent resistance: A treatment for parents of children with acute behavior problems. *Journal of Marital and Family Therapy*, *34*, 75–92.