sal, it should be pointed out that this attachment is culture-specific. For instance, in the United States, 60% of children have at least a mild degree of attachment to a soft, inanimate object some time during their life, and 32% exhibit strong attachment (Passman and Halonen, 1979). The incidence of attachments to soft objects in the Netherlands, New Zealand, and Sweden is comparable to that in the United States. Korean children have substantially fewer attachments to blankets (18%) than do American children, but Korean-born children living in the United States display an intermediate percentage (34%). Only 5% of rural Italian children have transitional objects, compared to 31% of urban Romans and 62% of foreign children living in Rome. However, just 16% of Londoners’ children have a special security object.

Developmental trends

In a cross-sectional investigation surveying the mothers of almost 700 children in the United States through their first 63 months of life, R. H. Passman and J. S. Halonen (1979) examined children’s attachments to various classes of objects. The percentage of children who are not attached to any object remains relatively stable throughout the first three years, averaging around 40%, with a low of 28% at three months of age. From 33 months, it rises consistently to a high of 84% at 63 months. The number of children having at least a slight attachment to a favorite hard toy (like blocks or a toy truck) remains steady and low through the first four years, averaging approximately 14%, but then drops swiftly toward 0% through 63 months. Attachment to a pacifier peaks early at three months, with 66% reported as having at least some attachment. Pacifier usage declines quickly through the first 18 months, after which attachments are extremely unusual (averaging under 3%) through 63 months. Attachment to blankets begins at a later age than it does to pacifiers. Mild attachment to a blanket is rare at 3 months (8%), but increases somewhat through 15 months (22%), peaks rapidly at 18 months (60%), stays near this level through 39 months (57%), tapers off to 40% at 48 months, and falls suddenly to 16% through 63 months. Simultaneous attachment to both a pacifier and a blanket is infrequent; it rises from 4% at 3 months to 12% at 9 months, remains at a relative plateau through 21 months, then drops sharply, averaging about 1% thereafter. Passman and Halonen also investigated children’s intense attachments to these objects and found similar patterns with respect to age. At three months, 16% are strongly attached to pacifiers. Strong attachment to blankets peaks at 18 and 24 months (32%), stays near this high level through 39 months, and diminishes steadily to 8% through 63 months. Generally in the United States, attachments to various objects are now regarded as conventional throughout the first five years of life.

Advantages of having security objects

Being attached to a security object can be beneficial to a child. Left in an unfamiliar playroom with a supportive agent (mother or transitional object), children played, explored, and refrained from crying more so than did children who had their favorite hard toy or who had no supportive agent available (Passman & Weisberg, 1975). Thus, children’s attachment to a special soft object is something qualitatively different from their relationship with a noncuddly toy. The blanket provided comfort as well as the mother did—but only if the children were attached to it; nonattached children entering the room with their blanket adapted relatively poorly, with greater dismay. The security blanket, therefore, is aptly named; it indeed provides security to those attached to it.

Because security objects may serve as a substitute for the mother in her absence, they can be employed practically by parents, teachers, doctors, babysitters, and other professionals. Besides facilitating separation from the mother or father, the attachment object can promote interactions with strangers. At bedtime, it can soothe and facilitate sleep. A study by G. J. Ybarra, R. H. Passman, and C. Eisenberg found that during a routine third-year pediatric examination, the security object enhanced rapport with the examining nurse. Children attached to a blanket who were allowed access to it were rated as less distressed and experienced less physiological stress—as evidenced by heart rate and systolic blood pressure—than children undergoing the medical evaluation without their security object. The comfort provided by a blanket in novel situations has even been shown to enhance children’s learning (Passman, 1977).

Alternatives to blankets

A variety of soft objects besides the blanket (e.g., diapers, pillow cases, sheepskins, soft toys, stuffed animals, dolls, napkins, handkerchiefs) may also provide security. Furthermore, research has shown that representations of the mother (e.g., films, videotapes, photographs, audiocassettes) can also help children’s adjustment. Although most children are thought to respond to their special object through touching or sucking, merely seeing (or hearing) it seems sufficient. Even an object as tactile as the security blanket does not have to be touched; visual contact alone evokes its soothing effects. For children too young for an attachment to a blanket, the pacifier seems to share many of the same functional characteristics (although its origins may be different).
Limitations

The positive effects of an attachment to an object have restrictions. If the situation is particularly arousing or threatening, the attachment object can be less effective in providing security than the child’s mother.

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Further Reading


Self-actualization

A prominent term in humanistic psychology that refers to the basic human need for self-fulfillment.

The term self-actualization was used most extensively by Abraham Maslow, who placed it at the apex of his hierarchy of human motives, which is conceived as a pyramid ascending from the most basic biological needs, such as hunger and thirst, to increasingly complex ones, such as belongingness and self-esteem. The needs at each level must be at least partially satisfied before those at the next can be addressed. Thus, while Maslow considered self-actualization to be the highest motivation possible and the essence of mental health, he recognized that most people are too preoccupied with more basic needs to seek it actively.

To arrive at a detailed description of self-actualization, Maslow studied historical figures—including Thomas Jefferson (1743-1826), Jane Addams (1860-1935), Albert Einstein (1879-1955), Eleanor Roosevelt (1884-1962), and Martin Luther King, Jr. (1929-1968)—whom he believed had made extraordinary use of their potential and looked for common characteristics. He found that self-actualizers were creative, spontaneous, and able to tolerate uncertainty. Other common qualities included a good sense of humor, concern for the welfare of humanity, deep appreciation of the basic experiences of life, and a tendency to establish close personal relationships with a few people. Maslow also formulated a list of behaviors that he believed could lead to self-actualization. These included such directives as: experience life with the full absorption and concentration of a child; try something new; listen to your own feelings rather than the voices of others; be honest; be willing to risk unpopularity by disagreeing with others; assume responsibility; work hard at whatever you do; and identify and be willing to give up your defenses.

Carl Rogers also emphasized the importance of self-actualization in his client-centered therapeutic