



Research article

Attachment style as a mediator between childhood maltreatment and the experience of betrayal trauma as an adult



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ABSTRACT

Previous research has demonstrated a positive association between child maltreatment and adult interpersonal trauma (Arata, 2000; Crawford & Wright, 2007). From a betrayal trauma theory perspective, evidence suggests that the experience of trauma high in betrayal (e.g., child maltreatment by parents or guardians) increases ones risk of betrayal trauma as an adult (Gobin & Freyd, 2009). However, the mechanisms explaining these associations are not well understood; attachment theory could provide further insight. Child maltreatment is associated with insecure attachment (Baer & Martinez, 2006; Muller et al., 2000). Insecure attachment is also associated with deficits in interpersonal functioning and risk for intimate partner violence, suggesting insecure attachment may mediate the relationship between child maltreatment and the experience of betrayal trauma as an adult. The current study tested this hypothesis in a sample of 601 college students. Participants completed online questionnaires including the Child Abuse and Trauma Scale (CATS), the Experiences in Close Relationships – Revised (ECR-R) and the Brief Betrayal Trauma Survey (BBTS). Results indicated that child maltreatment is associated with adult betrayal trauma and anxious attachment partially mediates this relationship.

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Introduction

Child maltreatment, such as neglect, physical abuse, emotional abuse, and sexual abuse is unfortunately all too prevalent in our society; in 2013, child protection agencies across the United States responded to an estimated 2.1 million reports of child maltreatment (United States Department of Health and Human Services, 2015). Child maltreatment is associated with negative outcomes such as adult traumatic stress symptoms (Evans, Steel, & DiLillo, 2013), underage alcohol use (Dube et al., 2006), illicit drug use (Lo, Kim, & Church, 2008), violent behaviors (Hosser, Raddatz, & Windzio, 2007), attention problems (Thompson & Tabone, 2010), depression (Turner, Finkelhor, & Ormrod, 2006), suicidality (Taussig, Harpin, & Maguire, 2014), and anxiety (Anda et al., 2006). In addition, children who are maltreated are more likely to experience interpersonal traumatic events in adulthood, such as intimate partner violence (Crawford & Wright, 2007), sexual revictimization (Messman & Long, 1996), assault (Desai, Arias, Thompson, & Basile, 2002) and psychological maltreatment (Messman-Moore & Long, 2000). While the link between maltreatment in childhood and victimization as an adult is well reported, the mechanisms underlying the connection are not well understood. Evidence suggests that individuals who have experienced interpersonal trauma both as children and again later as adults display more negative outcomes, such as self-blame (Babcock & DePrince,

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2012), post-traumatic stress symptoms (Arata, 2000), increased risk for HIV (Miner, Flitter, & Robinson, 2006), and suicide attempts (Lau & Kristensen, 2010) than individuals who have experienced one traumatic event. Therefore, it is important to further explore possible factors that could place victims of child maltreatment at risk for revictimization as adults.

Betrayal Trauma Theory

The theory of betrayal trauma states that the way information about a traumatic event is processed differs depending on the nature of the relationship between the perpetrator and the victim. When the perpetrator is someone the victim cares for, relies upon, or trusts, this is considered to be a trauma high in betrayal. Previous research suggests that survivors of traumatic events are less likely to remember events high in betrayal than they are those low in betrayal (Freyd, DePrince, & Zurbriggen, 2001). Betrayal trauma theory proposes that this phenomenon, known as betrayal blindness (Freyd, 1996), occurs in order to maintain the attachment bond between the perpetrator and the victim. Generally, it is advantageous for individuals experiencing trauma to distance themselves from the source of the trauma. However, for individuals who are dependent upon the perpetrator of the trauma for survival (such as children who are maltreated by their caregivers) it may be more beneficial to forget that the trauma occurred and maintain proximity to the caretaker. Although this ensures the immediate survival of the victim, in the long run trauma high in betrayal is associated with physical illness (Goldsmith, Freyd, & DePrince, 2012), depression, anxiety, and dissociative symptoms (Freyd, Klest, & Allard, 2005), as well as other symptoms of posttraumatic stress disorder (Martin, Cromer, DePrince, & Freyd, 2013; Tang & Freyd, 2012). While betrayal trauma is not synonymous with child maltreatment, it could be considered an interpersonal lens through which maltreatment and other types of trauma can be viewed. Betrayal trauma theory posits that the violation of trust by the perpetrator can augment or exacerbate damage caused by the actual act of abuse.

While betrayal trauma theory does not specifically address the causes of revictimization, previous research suggests individuals who experience trauma high in betrayal early in life (e.g., child maltreatment) are more likely to experience trauma high in betrayal as adolescents and as adults (Gobin & Freyd, 2009; Mackelprang et al., 2014). DePrince (2005) and Gobin and Freyd (2009) suggested that victims of betrayal trauma experience damage to the cognitive mechanisms which help individuals to identify breaches of social contracts and signs of betrayal in close relationships, thereby leaving them less likely to take self-protective measures, such as leaving a relationship. However, other interpersonal factors may also play a role in the repeated experience of betrayal trauma. One such factor is attachment style, a pattern of how one relates to others in close relationships.

Anxious Attachment

Attachment theory describes the process by which infants form bonds with their caregivers (Ainsworth, Blehar, Waters, & Wall, 1978; Bowlby, 1969, 1973, 1980). Early attachment theory delineates three main strategies infants use to form bonds, which are often referred to as attachment styles in the literature. A secure attachment style occurs when the infant receives consistent care and is able to return to the attachment figure for reassurance in times of distress; when a child's needs are not met consistently an insecure attachment style is formed. Similar attachment strategies have been identified in adults (Brennan & Shaver, 1995; Hazan & Shaver, 1987) allowing attachment theory to be applied to more salient types of relationships for this age group (such as intimate partner relationships) instead of relationships with caretakers.

Anxious attachment, an insecure attachment style, manifests itself in adulthood as a need for signs of reciprocation, as well as doubts that one can be loved by one's partner (Hazan & Shaver, 1987). According to attachment theory, individuals with an anxious attachment style experience a hyperactivation of the attachment system in order to regulate the intense negative emotions that arise when they perceive threats to their relationship (Mikulincer, Shaver, & Pereg, 2003). This hyperactivation is demonstrated in part by proximity-seeking strategies, with the goal of maintaining both emotional and physical closeness to the attachment figure (Dewitte, De Houwer, Buysse, & Koster, 2008; Guerrero, 1998; Mikulincer, Gillath, & Shaver, 2002). Therefore, individuals who experience trauma high in betrayal as children, and who develop an anxious attachment style in adulthood, may be hypervigilant about signs of rejection within intimate partner relationships. Additionally, they may react to those perceived signs by working to increase intimacy in the relationship, rather than distancing themselves from their partner.

In contrast, avoidant attachment is an insecure attachment style characterized by avoiding intimacy in relationships, and deactivating attachment strategies such as distancing oneself from one's partner (Mikulincer et al., 2003). Therefore, in situations in which betrayal or abuse seems likely, individuals who score high in avoidant attachment may be more likely to withdraw from the relationship, rather than seek proximity or closeness in the relationship, as would individuals who score high in anxious attachment. For this reason, anxious attachment was the focus of this study.

Associations Between Child Maltreatment, Anxious Attachment, and Betrayal Trauma

The relationship between child maltreatment and adult interpersonal victimization has been well reported (Arata, 2000; Crawford & Wright, 2007; Messman-Moore & Long, 2000); this includes the relationship between betrayal trauma as a child and betrayal trauma as an adult (Gobin & Freyd, 2009; Mackelprang et al., 2014). In addition, survivors of child maltreatment often report insecure attachment styles (Muller, Sicoli, & Lemieux, 2000; Unger & De Luca, 2014). For example, reports of

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