

Child maltreatment: an attachment theory perspective

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Abstract

This paper offers reflections about the relationship between child maltreatment, attachment disturbance and psychopathology in Bowlby’s attachment theory perspective. Child maltreatment is a complex and frequent phenomenon that has pretty clear implications on the developmental outcomes of its juvenile victims. The areas most affected by the experience of maltreatments suffered during childhood are to refer especially to self-development and to the ability to structure healthy and stable relationships. This is the reason that justifies the choice to make the phenomenon to be figured out in the Bowlby’s perspective, who has always underlined in his works the importance of the role of attachment relationships structured during the first few months of life in order to define the psychological and relational development of the subject. In this regard, we discuss a single case to underline the effects that maltreatment has on children psychological structure in the short and long term, trying to comprehend the subject symptomatology presented in view of the attachment theory perspective.

Key words: attachment, child maltreatment, impulsivity, emotional dysregulation, mentalization.

Introduction

Child maltreatment is one of the most huge social problems that involves children, adolescents and their families too. Society has been aware of the existence of child neglect since the earliest years of the 20th century. On the other hand, societal awareness of the physical and sexual abuse of children has been more recent – within the last 40 years (Trickett , Negriff, Ji & Peckins, 2011). The new dossier of the international federation "Terre des Hommes" (<http://terredeshommes.it>) has recently been published in relation to the condition of girls in the world. This dossier, called "Indifesa 2016", reports a section dedicated to the incidence of child abuse in Italy also. The figures for the last five years (2011-2015) compared to crimes committed and reported to minors have increased the number of juvenile victims since they went from 4,946 victims in 2011 to 5,080 in 2015, where 60% of these are girls who have suffered abuses and violence, especially sexual abuse. The aim of this work is to emphasize how a maltreatment of the family is deleterious to the development of the child ability of staying in a relation. Relational aspects, the formation of attachment bonds in the first place, are essential for the child's healthy growth and development.

Conceptual frame

According to the WHO (World Health Organization, 2016), child maltreatment includes all types of abuse and neglect affecting children under the age of 18. Child maltreatment includes all forms of physical and/or emotional maltreatment, sexual abuse, negligent treatment or neglect and commercial or other exploitation, resulting in actual or potential harm to the child's psycho-physical health, survival and development in the context of a relationship of responsibility, trust and power. The definition of child abuse and neglect includes both qualitative and quantitative aspects. It includes single events, repeated events, or a pattern of interaction that is characteristic of the relationship between the abuser, in this case often a parent or primary carer(s), and the child (Glaser, 2000). The common types of maltreatment, according to the Child Protection Register are: physical abuse, psychological or emotional abuse, neglect and sexual abuse.

Child Maltreatment classification*

P H Y S I C A L A B U S E	S E X U A L A B U S E	P S Y C H O L O G I C A L O R E M O T I O N A L M A L T R E A T M E N T	N E G L E C T
<p>This type of maltreatment is generally defined as any non-accidental physical injury to a child (resulting from such acts as striking, kicking, burning) perpetrated by a parent or caregiver</p>	<p>A type of maltreatment that refers to the involvement of the child in sexual activity to provide sexual gratification or financial benefit to the perpetrator, including molestation, statutory rape, prostitution, pornography, exposure, incest or other sexually exploitative activities</p>	<p>This type of maltreatment refers to acts or omissions, other than physical abuse or sexual abuse, that caused, or could have caused, conduct, cognitive, affective, or other mental disorders. Psychological or emotional maltreatment frequently occurs as verbal abuse or excessive demands on a child's performance</p>	<p>A type of maltreatment that refers to the failure by the parent or caregiver to provide needed, age-appropriate care although financially able to do so or offered financial or other means to do so. This includes deprivation of adequate food, clothing, shelter, medical care, or supervision. In many states this also includes failure to educate</p>

**Trickett et al., 2011*

Child maltreatment victims disproportionately exhibit a range of adverse outcomes during both childhood and adulthood' (Font & Berger, 2015). In addition, some longitudinal researches show the long-term effect of child maltreatment on the physical health in the adulthood, as such chronic fatigue syndrome, chronic pain syndromes, irritable bowel, fibromyalgia, obesity, type II diabetes and cardiovascular disease (Springer, Sheridan, Kuo & Carnes, 2003 - Cicchetti & Toth, 2015 - Slep, Heyman & Foran, 2015). Therefore, child maltreatment has dramatic impact on the children's development and sometimes it is associated with severe mental health outcomes and aggressive or delinquent behaviour and also maladaptive traits and behaviours as well as impulsivity (Teisl & Cicchetti, 2007 - Font & Berger, 2014 - Hovee et al., 2015). Indeed, areas such as cognitive development or emotional regulation ability and also the formation of attachment relationships are strongly damaged. According to Linehan (1993), invalidating environments during childhood fail to teach the child how to label and regulate arousal, how to tolerate emotional distress and when to trust one's own emotional responses as reflections of valid interpretations of events (Gaher, Arens & Shishido, 2015). As such, studies have shown that overt family conflict and anger, deficient nurturing, unresponsive or unsupportive parenting, and family environments characterized by stress, instability, and turmoil are associated with emotional and behaviour problems in children (Turner et al., 2012). Since infancy, the infant has an innate tendency towards the formation of ties, especially the tie with parental figures, which is adaptive, as it guarantees the child safety and protection. The bond with the parents is also functional to cognitive and psycho-affective development and consequently is involved with structuring the image of the self, emotional recognition and regulation, the ability to learn from experience and the formation of a good self-confidence.

Formation of attachment relationships

According to attachment theory (Bowlby, 1969, 1973, 1980, 1982), the function of attachment relationship is to increase the infants chances of survival (Morton & Browne, 1998). Bowlby (1973) defined attachment relationships as: 'Any form of behaviour that results in a person attaining or maintaining proximity to some other differentiated and preferred individual, usually conceived as stronger and/or

wiser' (Bacon & Richardson, 2001). Then, Bowlby underlines that the attachment is a behavioural system activated by a physical or environmental threats and in the case of separation from the attachment figure. Many infant behaviours – such as crying, smiling and crawling - have the function to keep close to the caregiver. The attachment figure or caregiver is a “secure base” from which the infant can explore the world around them. Bowlby hypothesised that security of attachment derives from caregiver’s reliable and sensitive provision of love and comfort, as well as food and warmth (Levy, Johnson, Clouthier, Wesley Scala & Temes, 2015).

A secure attachment is crucial also because allows the integration of cognitive, affective and behavioural skills that influence the future relationships. Indeed, children create their self-image based on the real relationship with their attachment figure and above all, the ability of emotion regulation. According to Cicchetti and Valentino (2006), adequate emotion regulation serves as a foundation for the development of secure attachment relationships, an autonomous and coherent self-system, and effective relationships with peers, whereas early affect-regulatory failures increase the probability that a child will develop future insecure disorganized attachment relationships, self-system impairments, and peer difficulties. Stern (1995) added the important concept of “selective attunement”, an intuitive process by which the caregiver’s responses regulate the intensity of the child’s affective state and shape the child’s experience of self and other.

According to Cicchetti and Toth (2015), the establishment of a secure attachment relationship between an infant and his or her caregiver represents a primary task during the first year of life.

Depending on how the parent responds to his or her requests, the child builds an acceptable or unacceptable self-image. The quality of attachment depends on the ability of the caregiver to be responsive and available to accommodate the physiological and psychological needs of the child and, in turn, this propensity depends primarily on the attachment relationship experienced by the parent

during their childhood. On the other hand, other researchers underline the role of the infant in the formation of the attachment relationship. In particular, infant temperament may influence the quality of attachment. Thus, the attachment relationship is a bidirectional process, with the mother exerting the most influence and infants responding in a way that serves to maintain the mother's behaviour (Morton & Brown, 1998).

Ainsworth, Blehar, Waters and Wall (1978) identified and categorized different type of attachment behaviour as secure, insecure-avoidant, and insecure-ambivalent/preoccupied. These patterns of attachment behaviour were identified with a structured procedure during which children are observed in a laboratory situation built to activate the child's attachment and exploration system in an unfamiliar context. The Strange Situation Procedure, aimed to mobilize the infant's expectations about what happens when anxiety about the availability of the attachment figure has occurred in the past, and allowed a viewer to interpret these expectations from observed behaviour (Duschinsky, 2015).

Patterns of attachment*

S E C U R E L Y A T T A C H E D	A N X I O U S - A M B I V A L E N T	A V O I D A N T
Children seek closeness to their caregiver, indicate distress at separation, and show moderate interest in a stranger	Children exhibit heightened distress at separation, are difficult to comfort when the caregiver returns, and require constant attention from and closeness to their caregiver	Children do not appear distressed by separation from their caregiver, may ignore their caregiver on her return, and treat a stranger and their caregiver similarly

**Levy et al., 2015*

Main and Solomon (1990), according to abnormalities in the behaviour of children observed in the Strange Situation Procedure, felt the need to define a

further attachment category within which include all behaviour behaved by children that can't be traced back to any of the three previously identified categories. According to its manifestations, this new category is called Disorganized / Disoriented. Infant behaviour coded as disorganized/disoriented include overt displays of fear of the caregiver; contradictory behaviours or affects occurring simultaneously or sequentially; stereotypic, asymmetric, misdirected, or jerky movements; or freezing and apparent dissociation (Caviglia, 2003 - Caviglia, 2007 - Duschinsky, 2015). The disorganized pattern is actually a failure of the attachment bond structure since the disorganized child is not able to organise a functional behavioural strategy in order to build or keep the bond with its caregiver. For this reason (the child) behaves strange, bizarre behaviour but especially, contradictory such as approaching his caregiver in order to turn for comfort even if they look away. In a real disorganized situation, the attachment system is not collected to help the child in developing a good emotional and behavioural regulation but mostly safety that stems from a secure attachment relationship with the caregiver, may renege (Emiliani & Simonelli, 1997 - Barone & Lionetti, 2013).

Thanks to the concept of "internal working model", the attachment relationship with the caregiver, which all people have structured during their infancy, may influence all the future relationships. Bowlby (1973) described how children build mental representations or 'internal working models' of their own worthiness from experiences and perceptions of caregiver's availability, ability and willingness to provide care and protection (Bacon & Richardson, 2001).

Once organized, these internal working models tend to operate outside of conscious awareness and are thought to be relatively resistant to change. These mental schemas of self and other that guide interactions, provide expectations about interpersonal relations, and generate emotional appraisals and rules for processing or excluding information (Cicchetti & Toth, 2015 - Levy et al., 2015). Consequently, if a caregiver has a consistently responded to the infant sensitively and appropriately, the infant will form a representational model of the caregiver

as responsive and accessible. The infant will also form a model of themselves as worthy and competent in eliciting the caregiver attention (Morton & Brown, 1998).

Experiential Lens'

In order to understand how much maltreatment, of any nature, affects the psycho-affective and cognitive development of children and, above all, it influences the ability to form healthy relationships, we describe and tell the story of a 14 years and 11 months old to whom Matilde's fictitious name was given. The girl has been examined in a legal proceeding in which she was involved as a victim and witness of sexual abuse and subjected to psychological assessment. Through the informations obtained from the story, the study of the acts and the interviews with the child and the study of the graphic material produced by Matilde with the Drawing of the Human Figure (Machover, 1949) and the Family Drawing (Corman, 1976), we have chosen to describe briefly the story of Matilde, under the assumption that she is telling the story:

"I'm almost fifteen years old and I feel different from kids of my own age, but I'm different. I grew up and I didn't know how, there was no one to take care of me. I spent the days waiting for my mother to come home at any moment, but this did not often happen. She went out with lots of different friends every night but she did not seem very happy. My dad was never at home but maybe it was better this way because his only interest was to have a full glass and not to have anyone around him. Because of his 'problem', he became irritable and often violent. I kept myself far from all of this, so I was alone and I had to do it all by myself. I learnt to do it on my own too soon. I went to school until I decided that it was useless to me; I had difficulties with the teachers, I did not understand many things but above all my classmates disturbed me. They were not like me, I was strange and I liked doing 'boy things' and my classmates told me that frequently. Not all of them kept me away, not Flavia. Together we spent a lot of time, she was the only one I wanted to be with because it was fine staying with her. I did not go to school anymore, so I had nothing to do except staying with my best friend. I really cared very much about her. I felt very attached to her. We saw each other and called

every day. I wanted to be the only one for her as she was for me, but it was not like that. This made me feel bad again and so I invented everything to call her and to know where and with whom she was or to ask her to stay with me. I was afraid to be 'the strange and abandoned Matilde' again; I did not want Flavia to leave me for any reason. I often felt strange and did not know what that sensation would bring; I felt sad and then very angry. When I was trying to help me, the only thing I could do was to lock myself in my bedroom and hurt me many times. Then, I was fine. I could not stop, the feeling of calm and peace every time that I injured me was too precious to give up. I did not understand why my family was such a disaster, because I was so different and I did not understand why I was angry and alone. I often tried to find out explanations but in the end I always understood to have a mother unable to help me, a violent and drunken father, and to be strange and alone."

At first observation, the girl has obvious masculine features regarding to clothing, tone and content of communications, while facial expressions and assumed positions show typical ways of the borderline personality. In fact, the girl has a clear identification with the male gender. Matilde's psychic functioning is greatly altered when compared to a reference standard. The typical features of Personality Borderline Disorder seem to look like the classic identity and mood crises that characterize the transition to adulthood, with the significant difference that, in the case of a borderline personality, all comes with a far more devastating and prolonged impact. The areas affected by this disorder are mainly affective and emotional, but have a strong impact on cognitive skills altered by exaggerated emotion also. Relational abilities are deficient because of a marked instability of self-image, mood and self-confidence, but above all because of strong impulsivity.

All this results in self-harm behaviour, chronic feelings of emptiness and uselessness, fear of abandonment, manipulative tendency, compulsions, problems with impulse control and strong irritability. In Matilde all this is perfectly obvious as it can be deduced from the short story that, although imagined, is based on the

real informations derived from the dating reports with the girl. These characteristics are due to the rapid fluctuation of Matilde among intense states of anger, pain, chronic feelings of emptiness and loneliness. Impulsivity, on the other hand, mainly translates into self-directed destruction and behaviour related to altered sexuality, verbal outbursts and altered relational modes. In fact, the contents of all the talks are in regards to narratives of experiences and relational episodes that have created discomfort and disturbance such as to get Matilde to commit serious and repeated acts of self-injury.

Discussion and theoretical perspective

Following the attachment theory perspective, we try to describe which kind of attachment develops within a maltreating family context and what type of deficits derive from a disturbed relationship. The submitted clinical case depicts a guide for the comprehension of the type of alterations that this bond undergoes and the influence it has, in turn on the ability to relate to others. In addition, a disturbed relationship has a negative effect on self-image structuring in relation to the other and on emotion regulation.

The case of Matilde that fully fits into the casuistry of child maltreatments provides a set of data in order to hypothesize the type of psychic functioning of the girl, mediated by an insecure attachment and therefore riddled with gaps, that are mainly clear in interactions with others. Researches have widely shown that people who have experienced maltreatment in childhood associated to the development of an insecure attachment relationship with the caregiver. Then, an insecure attachment is, in turn, associated with the development of many psychopathologies, especially those which are connected to the sphere of personality. In fact, exposed to insensitive and pathological care, maltreated children develop negative expectations regarding the availability and trustworthiness of others, as well as mental representations of the self as incompetent and unworthy (Cicchetti & Toth, 2015).

According to Levy (2005), a large body of empirical research has shown support for the theoretical connection between attachment insecurity and personality pathology; above all, the attention of the researches underline the relation

between an attachment disturbance and borderline personality disorder (BPD). In fact, Rogosch and Cicchetti (2005) found that maltreated children exhibit higher mean levels of potential precursors to borderline personality disorder (emotional lability, conflictual relationship with adults and peers, relational aggression, self-harm) than do non-maltreated comparisons.

Thus, if we consider the case of Matilde, the combination between attachment disturbance and personality disorder is strongly clear. Matilde is a maltreated child in every way; in fact, besides the fact she has experienced sexual abuse, throughout her stories, we can understand her childhood has been mainly characterised by loneliness, neglect and violence. Therefore, Matilde's attachment relationship cannot be defined as a secure one, because of her disturbed psychic functioning. By Matilde's psychological assessment, we can deduce that it is all about borderline personality. Among Matilde's symptoms, the one which more attracts attention is her strong impulsivity mainly declined in repeated and very serious self-harm injuries.

People with a borderline personality functioning often suffer from a strong negative affect that they are not able to manage. So, in order to cope with this problem, they use destructive behavioural strategies turning to themselves and others, hence their impulsivity (Liotta, Mento, & Settineri, 2015). Indeed, according to Gaher et al. (2015) we use the concept of negative urgency to define the impulsivity of Matilde because negative urgency refers to the tendency to cope negative affect with impulsive behaviours such as deliberate self-harm, aggression, disordered eating and substance use-related problems.

Emotional dysregulation has, as an important consequence, the state of alexithymia that is a cognitive-affective construct refers to the inability in recognizing and describing feelings and externally oriented cognitive style. Furthermore, the study of Gaher et al. (2015) has underlined that alexithymia mediates partly the connection between child maltreatment and negative urgency. Subjects who suffered from child maltreatment are more likely to develop alexithymia. Emotional dysregulation, alexithymia and impulsive behaviours

negative effects on the ability to build relations throughout life. Attachment theory perspective claims that an attachment disturbance may be the basis for everything (Kim, Sharp & Carbone, 2014). The function of affective mirroring, played by the parents in connection with the child is the ability to contain mentally emotional states which are not tolerated by the child, giving them back in the form of a comprehensive type. This function allows the improvement of child emotional state and the development of mentalized affectivity (the representation of emotional states). All of this, in turn, promotes the healthy emotional regulation and impulse-control. Furthermore, emotional regulation, i.e. the capability to modulate emotional states, is connected to mentalization. Mentalization is a concept to refer to the ability to think about oneself and others as psychological beings and to consider underlying mental states and motivations when interpreting behaviours in attachment contexts (Berthelot et al., 2015). According to Fonagy and Target (2003), this ability gradually develops within a relational environment like one of attachment type, thanks to interpersonal communications between child and caregiver. In fact, the attachment must provide the child an environment in which the understanding of mental states of self and other can promote the mentalization (Fonagy & Target, 2003).

The resulting limitations of infant regulation will, on the contrary, undermine the development of effortful control and the development of a robust understanding of others as motivated by mental states. According to many authors, the development of borderline personality disorder may occur through different pathways defined by interaction between environment and biological factors, ranging in severity from individuals who are deficient in mentalization to individuals who are characterized by an inhibition of mentalization because of experiences of child maltreatment (Caviglia, Perrella, Sapuppo & Del Villano, 2010 - Fonagy, Luyten & Strathearn, 2011 - Perrella, Semerari & Caviglia, 2013 - Zarrella, Lonigro, Perrella, Caviglia & Laghi, 2016 - Perrella, Del Villano & Caviglia, 2016 - Zarrella, Russolillo, Caviglia & Perrella, 2017 - Perrella, Russolillo, Tammaro & Caviglia, 2017 - Perrella & Caviglia, 2017 - Perrella, 2017).

In sum, the story and the clinical case of Matilde, which have been submitted in this work, show how a secure attachment relationship with parental figures could play a protective role and how detrimental it could be. Matilde, in fact, in the wake of an insecure and disturbed relational model, result of her maltreating childhood, shows lots of troubles, which are all connected to the sphere of identity and emotional stability, with impact on relational ability especially.

NOTES

Please notes that Matilde is a pseudonym, and any identifiable details have been removed to protect the subject's confidentiality.

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