

Adult Attachment Style as a correlate of Distorted Thinking in Young Adults with Adverse Childhood Experiences

¹Dr. Suyesha Singh, ²Dr. Prashasti Jain, ³Ms. Sheron Singh

ABSTRACT--*The study aims to investigate the relationship between cognitive distortions and attachment styles in young adults. Experiences in early years of life play a pivotal role in the psychological and social development of an individual. The current study aimed at studying the role of cognitive distortions in shaping the attachment styles of an individual. The sample for the study comprised young adults both males and females of 18-25 years of age. Adverse Childhood Experiences (ACE) Questionnaire by Felitti et al., (1998) was used as a screening tool. Thereafter the screened sample of 220 subjects was administered the Cognitive Distortion Scale by Briere (2000) and Adult Attachment Scale by Collins & Read (1990). A significant relationship was found between cognitive distortions and adult attachment styles.*

Keywords-- *Adverse Childhood Experiences, Cognitive Distortions, Attachment Styles*

I. INTRODUCTION

The term Adverse Childhood Experiences connotes a cluster of negative experiences faced by children in early years of life. The nature of these experiences may entail abuse (physical, sexual, emotional or psychological), parental neglect, witnessing domestic violence and household substance abuse, living with a family member with a mental disorder, parental separation or incarceration of a family member. Several researches have indicated that individuals who have had adverse and rough childhood experiences become more vulnerable and susceptible to psychological problems, mental health issues, substance abuse, addictions, self-harm and high propensity for indulging in risky behaviours.

The long term effects of adverse experiences may influence the health and wellbeing of an individual in the later years of life. Such experiences can hamper the social, emotional and cognitive development of children and the manifestation of these may get reflected in the way cognitive schemas and beliefs are shaped.

In human society relatedness, belongingness and attachment with others are necessary for surviving and thriving. An individual's personal, professional and social success depend a lot his/her abilities and competence to adjust well and form cordial, trusting alliances. Any traumatic or painful experience is potent enough to nudge an individual towards dysregulated patterns of behaviours across a wide array of situations. Distorted beliefs tend to make us emotionally reactive.

¹ Assistant Professor, Department of Psychology, Manipal University Jaipur.

² Assistant Professor, Department of Psychology, Manipal University Jaipur.

³ Student, Department of Psychology, Manipal University Jaipur.

Attachment is a deep and enduring emotional bond that connects one person to another across time and space (Ainsworth, 1973; Bowlby, 1969). Presently in brain research, the hypothesis of connection can be applied to different attachment, for example, fellowships, passionate undertakings, sentimental or dispassionate, and so forth. The attachment hypothesis was at first concentrated during the 1960s and 1970s basically with regards to parent-youngster and was later stretched out to grown-up connections during the 1980s.

Presently attachment doesn't need to be responded from the other individual also. The connection is portrayed by explicit practices in youngsters, for example, looking for nearness to the attachment figure when vexed or compromised (Bowlby, 1969).

Cognitive distortions are the influenced point of view that we take on ourselves and our general surroundings. They are silly thoughts, convictions that we fortify after some time and unknowingly on us.

Now these come in many forms, but they all have few things in common:

- patterns for believing
- that are false
- and always causes psychological damages to us

There are numerous individuals who speck suffer in their day by day lives by these contortions however it appears as though nobody can totally get away from these distortions either.

These distortions have been indicated to side effects of melancholy, implying that where intellectual contortions proliferate, side effects of sorrow are probably going to happen too (Burns, Shaw & Croker, 1987).

Attachment can be explained as the emotional bond between two individuals. It is the affection that is developed with a passage of time and strengthens the relationship between two individuals.

Negative experiences in childhood may include various forms of child abuse for instance, sexual abuse, physical or emotional abuse (Dube et al. 2010), violent crime, unstable home life (many caregivers and relocations) (Douglas et al. 2010), poverty and family stress (Wickrama & Noh 2010). Riggs (2010) proposed a model according to which emotional abuse in early childhood can cause insecure attachment, which influences emotional regulation, leading to negative perception of self and others. This causes coping responses which are maladaptive in nature and interfere with social functioning and the individual's capacity for establishing healthy adult attachments. The sources of adverse childhood experiences also vary among families' internal environment (Noll et al. 2007) or social environment excluding families (Wickrama & Noh 2010). Other sources may be enlisted such as exposure to domestic violence, emotional neglect, mental illness, substance abuse, separation of parents etc.

Childhood marks the formation of cognitive schemas which are based primarily on experiences of an individual. The schemas thus formed may be positive or negative depending upon the subjective experiences of the individual.

II. CURRENT RESEARCH

Attachment in children can be seen in terms of the bond between child and the mother or any other caregiver. The initial bond between the child and the significant others play an important role in the socio-emotional development of an individual. Children may have negative experiences in their initial years of life in terms of their relationships within family, peer group, neighbourhood, school and other immediate surroundings. Such

experiences may indirectly or directly influence the formation of their attitudes, belief patterns and perception towards the external world. Researches have been conducted on the negative impact of traumatic experiences during childhood on general health and wellbeing throughout adulthood. Also there are some studies which have explored the positive impact of distressful events which can mould a person to become more empathetic, gritty and resilient. Not many studies in Indian setting have investigated how cognitive distortions are formed due to adverse experiences during childhood, their prevalence throughout adulthood and its subsequent impact on interpersonal relationships. Understanding interpersonal relationship dynamics in the context of faulty beliefs which are an offshoot of past adversity in life is crucial since it's a well-established fact that we learn to be "human beings" and "social beings" only in the context of our relatedness with our close ones like family, spouse, relatives, friends and co-workers. Our identities are shaped by these social connections.

This study intends to explore the relationship between distorted thinking and attachment styles in young adults who have had adverse experiences during early years of their lives. This understanding can pave the way for appropriate intervention for young people to rectify distorted beliefs, bring coherence and enhance the quality of their relationships and life.

III. OBJECTIVES

- Screening of individuals with adverse and distressful experiences during childhood
- To study the relationship between cognitive distortions and adult attachment style in young adults with ACE's

HYPOTHESES

H1 – There will be a negative relationship between cognitive distortions and dependent attachment style in young adults with adverse childhood experiences.

H2- There will be a negative relationship between cognitive distortions and close attachment style in young adults with adverse childhood experiences.

H3- There will be a positive relationship between cognitive distortions and anxious attachment style in young adults with adverse childhood experiences.

SAMPLE OF THE STUDY

The sample for the study comprised of young adults both males and females in the age range of 18-25 years. Adverse Childhood Experiences (ACE) Questionnaire by Felitti et al., (1998) was used as a screening tool. After screening, 220 subjects out of 509 were included in the sample for the study. There were 100 males and 120 females participants in the screened sample. Purposive sampling technique was used for sample selection.

IV. MEASURES

The Adverse Childhood Experiences (ACE) Questionnaire (1998)

The Adverse Childhood Experiences (ACE) Questionnaire by Dr. Felitti and colleagues was used to screen the occurrence of any adverse experience in the individual's life. The measure consisted of 10-items which assessed

childhood adversity in three areas: abuse (physical and emotional), physical neglect, and abuse perceived by living in a dysfunctional household. Each item can be answered as a “yes” or “no”. All yes responses are scored as 1. All subjects who scored on ACE were included in the sample.

Cognitive Distortion Scale by Briere (2000)

The cognitive distortion scale (CDS) is a brief, 40-item test of dysfunctional cognitions. The scale of the CDS assess 5 types of cognitive distortions:

- 1) Self-criticism - example putting yourself down, hating yourself, etc
- 2) Self-blame - example being mad at yourself for getting hurt by someone else
- 3) Helplessness - example feeling helpless to improve your situation
- 4) Hopelessness – example thinking that things will never be good for you
- 5) Preoccupation with danger – example expecting bad news or thinking that someone might hurt you

The alpha reliability coefficients range from 0.89 to 0.97 for all the subscales. The scale has adequate convergent and discriminant validity (0.60-0.75) in general as well as clinical populations.

Adult attachment scale (Collins & Read, 1990)

The scale consists of 18 items divided into three subscales, viz close, dependent and anxiety. The close scale is used to measure the degree to which a person feels comfortable with intimacy and closeness. The depend scale assesses the degree to which the person feels that he can depend on others in time of need. The subscale of anxiety assesses the person’s worries about being unloved.

V. PROCEDURE

In the first phase of the study the Adverse Childhood Experiences (ACE) Questionnaire by Felitti et al., (1998) was administered to young adults in the age range of 18-25 years belonging to various cities of India. A total of 220 subjects out of 509 were included in the sample for the study after screening procedure. The following inclusion criteria were taken into consideration for sample selection along with the ACE score:

- Both male and female young adults were included in the sample for the study.
- The participants belonged to upper-middle class.

After the screening in the second phase the selected sample was administered with the cognitive distortion scale by Briere (2000) and adult attachment scale by Collins & Read (1990).

The statistical analysis of the data was done using SPSS 21. Mean, standard deviation and Pearson correlation was calculated for investigating the relationship between cognitive distortions and attachment styles.

VI. RESULTS AND DISCUSSION

The study aimed to explore the relationship between cognitive distortions and attachment styles of young adults who have had adverse experiences during childhood. The results obtained are as follows:

Table 1: Mean and Standard Deviation Cognitive Distortions and Adult Attachment Styles of young adults with Adverse Childhood Experiences Descriptive Statistics (N=220)

	Mean	Std. Deviation
Close attachment	19.94	3.86
Dependent attachment	17.68	4.59
Anxiety attachment	18.79	6.10
Self-Criticism	19.57	9.13
Self-Blame	20.62	8.69
Helplessness	20.42	9.58
Hopelessness	23.68	3.35
Preoccupation with danger	17.35	7.81

Table 2: Pearson Correlation for cognitive distortions and adult attachment styles in young adults with adverse childhood experiences

	Dependent Attachment	Anxiety Attachment	Close Attachment	Self-criticism	Self-blame	Helplessness	Hopelessness	Preoccupation with danger
Dependent Attachment	1	-.531**	.320*	-0.237	-.0169	-0.178	-0.064	-0.226
Anxiety Attachment		1	-.288*	.430**	.352*	.319*	.331*	.417**
Close Attachment			1	-0.24	-.0169	-0.178	-0.064	-.289*
Self-Criticism				1	.872*	.902**	.425**	.925**
Self-Blame					1	.893**	.455**	.808**
Helplessness						1	.388**	.859**
Hopelessness							1	.409**

*Correlation is significant at the 0.05 level.

**Correlation is significant at the 0.01 level.

Pearson's correlation coefficients were calculated to the relationship between the attachment styles and cognitive distortions. Table 1 presents the mean scores and standard deviations for close attachment style (X=19.94; SD=3.86), dependent attachment style (X=17.68; 4.59), anxious attachment style (X=18.79; SD=6.10),

self-criticism ($X=19.57$; $SD=9.13$), self-blame ($X=20.62$; $SD=8.69$), helplessness ($X=20.42$; $SD=9.58$), hopelessness ($X=23.68$; $SD=3.35$) and preoccupation with danger ($X=17.35$; $SD=7.81$).

Analysis of the results obtained as shown in Table 2 indicate a negative relationship between dependent attachment style and the subscales of cognitive distortions namely, self-criticism ($r=-0.237$), self-blame ($r=-0.169$), Helplessness ($r=-0.178$), Hopelessness ($r=-0.064$), Preoccupation with danger ($r=-0.226$). The results support the first hypothesis. Distorted thoughts are mostly automatic in nature, and resistant to change (Beck, 2002; Türkçapar, 2013). Understood in the information processing approach, these thoughts result from the way individuals construct their worlds (Calvete & Connor-Smith, 2005). Most of the time they are associated with depression, anger and worry (Türkçapar, 2013; Leahy, 2010). Distorted cognitions about relationships involve beliefs related to avoidance of proximity, expectations and often result in interpersonal misperception. Such cognitions might result in interpersonal rejection creating negative expectations about others (Hamamcı & Büyüköztürk, 2003).

The second hypothesis is supported by the results which indicate that a negative relationship exists between close attachment style and the subscales of cognitive distortions i.e. self-criticism ($r=-0.24$), self-blame ($r=-0.169$), Helplessness ($r=-0.178$), Hopelessness ($r=-0.064$), Preoccupation with danger ($r=-.289^*$). Anxious individuals worry about feeling of not being loved and rejected by significant others. They also have difficulties in developing intimate and close relationships with others (Collins & Feeney, 2004). There is ample research to prove that anxious individuals have great difficulty in maintain positive relationships with attachment figures (Hazan & Shaver, 1994; Shaver & Hazan, 1987).

The findings also indicate that a positive relationship was found between anxious attachment style and subscales of cognitive distortions i.e. self-criticism ($r=.430^{**}$), self-blame ($r=.352^{**}$), Helplessness ($r=.319^*$), Hopelessness ($r=.331^*$), Preoccupation with danger ($r=.417^{**}$). These results confirm the third hypothesis. According to Bowlby (1959) separation from mother during early childhood adversely effects the individual's development. The effect can be seen on various domains including cognitive functioning.

VII. CONCLUSION

The results of the study indicate towards a relationship between cognitive distortions (self-criticism, self-blame, helplessness, hopelessness and preoccupation with danger) with adult attachment styles. Cognitive distortions formed during early years of life can persist for a long time if not handled properly at the right time. These distortions can hamper the overall functioning of an individual. Future research can investigate the multidimensional impact of distortions, cognitive schemas, and beliefs on interpersonal relationships. The findings of this study can provide valuable insights and indicate that counsellors and mental health professionals should consider and analyse their clients distorted patterns for understanding the difficulties in their social life and interpersonal relationships. The attachment and cognitive patterns are interwoven and also developing during early adulthood and taking into consideration the history of experiences during childhood can contribute in developing effective intervention plans.

REFERENCES

1. Ainsworth, M. (1973). The development of infant–mother attachment. In B. Caldwell & H. Ricciuti (Eds), *Review of child development research* (Vol. 3, pp. 1–94). Chicago, IL: University of Chicago Press.
2. Beck, U. (2002). *Individualization: Institutionalized individualism and its social and political consequences* (Vol. 13). Sage.
3. Bowlby J. (1969). *Attachment. Attachment and loss: Vol. 1. Loss*. New York: Basic Books.
4. Bowlby, J. (1959). Separation anxiety. *International Journal of Psycho-Analysts*, XLI, 1-25.
5. Briere, J. (2000). *Cognitive distortion scales: Professional manual*. Psychological Assessment Resources.
6. Burns, D. D., Shaw, B. F., & Croker, W. (1987). Thinking styles and coping strategies of depressed women: An empirical investigation. *Behaviour research and therapy*, 25(3), 223-225.
7. Calvete, E., & Connor-Smith, J. K. (2005). Automatic thoughts and psychological symptoms: A cross-cultural comparison of American and Spanish students. *Cognitive Therapy and Research*, 29(2), 201-217.
8. Collins, N. L., & Feeney, B. C. (2004). Working models of attachment shape perceptions of social support: evidence from experimental and observational studies. *Journal of personality and social psychology*, 87(3), 363.
9. Collins, N. L., & Read, S. J. (1990). Adult attachment scale. Unpublished manuscript.
10. Collins, N. L., & Read, S. J. (1990). Adult attachment, working models, and relationship quality in dating couples. *Journal of Personality and Social Psychology*, 58, 644–663. [Google Scholar](#)
11. Douglas, S. L., Daly, B. J., O'Toole, E., & Hickman Jr, R. L. (2010). Depression among white and nonwhite caregivers of the chronically critically ill. *Journal of critical care*, 25(2), 364-e11.
12. Dube, S. R., Cook, M. L., & Edwards, V. J. (2010). Peer reviewed: Health-related outcomes of adverse childhood experiences in Texas, 2002. *Preventing chronic disease*, 7(3).
13. Felitti, V. J., Anda, R. F., Nordenberg, D., Williamson, D. F., Spitz, A. M., Edwards, V., Koss, M. P., & Marks, J. S. (1998). Relationship of childhood abuse and household dysfunction to many of the leading cause of death in adults: The adverse childhood experiences (ACE) study. *American Journal of Preventive Medicine*, 14(4), 245-258.
14. Hamamci Z, Buyukozturk, S. (2003). Cognitive distortions about relationships scale: Development and psychometric properties of the scale. *Cukurova University Journal of Education Faculty*, 2 (25): 107–111
15. Hazan, C., & Shaver, P. R. (1994). Attachment as an organizational framework for research on close relationships. *Psychological inquiry*, 5(1), 1-22.
16. Leahy, R. L. (2010). Emotional schemas in treatment-resistant anxiety. *Treatment resistant anxiety disorders: Resolving impasses to symptom remission*, 135-160.
17. Murphy, A., Steele, M., Dube, S. R., Bate, J., Bonuck, K., Meissner, P., . . . Steele, H. (2014). Adverse Childhood Experiences (ACEs) Questionnaire and Adult Attachment Interview (AAI): Implications for parent child relationships. *Child Abuse & Neglect*, 38(2), 224-233.
18. Noll, J. G., Zeller, M. H., Trickett, P. K., & Putnam, F. W. (2007). Obesity risk for female victims of childhood sexual abuse: a prospective study. *Pediatrics*, 120(1), e61-e67.
19. Riggs, S. A. (2010). Childhood emotional abuse and the attachment system across the life cycle: What theory and research tell us. *Journal of Aggression, Maltreatment & Trauma*, 19(1), 5-51.

20. Shaver, P., & Hazan, C. (1987). Being lonely, falling in love. *Journal of Social Behavior and Personality*, 2(2), 105.
21. Türkçapar MH (2013). *Bilişsel Terapi* (7 ed.). Ankara: HYB
22. Wickrama, K. A. S., & Noh, S. (2010). The long arm of community: The influence of childhood community contexts across the early life course. *Journal of youth and adolescence*, 39(8), 894-910.
23. Wingenfeld, K., Schäfer, I., Terfehr, K., Grabski, H., Driessen, M., Grabe, H., Spitzer, C. (2010). Reliable, valide und ökonomische Erfassung früher Traumatisierung: Erste psychometrische Charakterisierung der deutschen Version des Adverse Childhood Experiences Questionnaire (ACE). *Psychotherapie Psychosomatik Medizinische Psychologie Psychother Psych Med*, 61(01). doi:10.1055/s-0030-1263161.