



Childhood traumatic experience and attachment styles among young adults

Aslesha Ranjan, Dr Roopali Sharma

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ABSTRACT

The long-term effects of childhood stress can be especially hard on the mental health and relationships of adults. Using the theory of attachment as a guide, this dissertation looks at the complicated link between different types of attachment in adults and stressful events in childhood. By doing a full literature review and quantitative research, this study aims to put light on the types of childhood trauma that have the most lasting impact on how people form attachment patterns as adults. This study also looks at the social, cognitive, and neurological ways that stressful events in childhood can make it harder to form solid bonds. This study aims to fill in important gaps in knowledge and guide personalized treatments for people who have been through traumatic events as children in order to help them heal, become more resilient, and improve their relationships.

Keywords: Childhood trauma, attachment theory, adult attachment styles, psychological mechanisms.

I. INTRODUCTION

The years we are growing up are like threads in the complicated tapestry of human development. They shape who we become as adults. One of these events that shapes people deeply is trauma in childhood, which changes the way people attach to others and leaves lasting psychological marks. Attachment theory was first put forward by John Bowlby. Mary Ainsworth and others built on his work to say that a person's main interactions with caregivers shape how they think about relationships in general. These models show how someone's attachment style changes as an adult. This dissertation looks into the complicated web of links between different types of attachment in adults or traumatic events in childhood. It has been known for a long time that bad experiences in childhood can have psychological effects, but researchers are still trying to figure out how trauma in early childhood affects attachment styles. Through looking into this link, the study hopes to give

important information for therapeutic treatment and intervention methods by shedding light on the subtle ways that past trauma can affect how people interact in their current marriage. The study is important because it can shed light on the long-lasting effects of traumatic events in childhood and help guide specific ways to lessen those effects. This study looks at how different kinds of trauma (like abuse, neglect, and loss) change attachment patterns in order to learn more about how early trauma can affect a person's life later on. This study wants to look at how different people's resilience, coping strategies, and social support networks affect their mental health and well-being in order to learn more about the complicated link between trauma and attachment and how it affects mental health and well-being.

The main idea of this dissertation is to look at the complicated processes of attachment formation and the role of childhood trauma by using a framework that combines ideas from psychology, neuroscience, and social work. By combining data from longitudinal studies, clinical observations, and theoretical points of view, this study aims to give a more complete picture of how early trauma affects attachment styles and relationship patterns as an adult.

The results of this study may shed light on how traumatic events in childhood affect attachment styles as an adult. This, in turn, could help guide efforts to stop the passing on of trauma from one generation onto the next and encourage better relationships. The aim of this research is to help create better ways to heal, be resilient, and recover by showing how past experiences affect how people feel about their current attachments.

This dissertation looks into the complicated link between adult attachment styles and childhood trauma in order to help us learn more about how early trauma can affect relationship patterns and mental health over time. The purpose of this study is to add to what is already known about attachment theory and trauma-informed practice by looking at clinical outcomes, empirical research, and



theoretical analysis. It wants to give researchers, practitioners, and policymakers new ideas that will make these areas better.

1.2 BACKGROUND OF THE STUDY

The attachment theory proposed by John Bowlby in the mid-twentieth century provides a critical framework for understanding the complexities of human interactions, particularly the bond between infants and their primary caregivers. According to Bowlby, the quality of a person's early attachments determines how they behave in social and emotional contexts and how they develop as individuals. These concepts were further elaborated by the ground-breaking work of Mary Ainsworth on attachment patterns in conjunction with the Strange Situation Procedure. The latter classifies newborns into three attachment types based on their reactions on caregiver separation and reunion: secure, insecure-avoidant, and insecure-anxious. This seminal research sought to answer the question, "Do attachment tendencies persist into adulthood?" and the theory that emerged from it is known as adult attachment theory. Individuals' internal models of relationships are shaped by their attachment experiences in infancy, according to this theory. These experiences give rise to four distinct attachment styles: secure, avoidant, anxious-preoccupied, and disorganized. The way adults perceive themselves, manage their emotions, and cope with interpersonal intimacy and conflict are all influenced by their attachment type.

While attachment theory has helped us better understand relationships, many questions remain, such as how early childhood trauma impacts attachment styles in adulthood. Our approach to patient care and the extent to which we step in to improve their lives might be significantly impacted by this new information. Childhood trauma includes exposure to traumatic events, physical, emotional, or sexual abuse, violence, the loss of a primary caregiver, and dysfunctional family dynamics. In addition to making it more challenging to form healthy attachments, these experiences can lead to relational issues, emotional dysregulation, and maladaptive coping mechanisms that persist into adulthood. Research shows that individuals who experience childhood trauma are more likely to have insecure attachment patterns. These patterns are characterized by distrust, aversion to closeness, emotional instability, and difficulties in forming and maintaining intimate relationships. Factors such as the nature, severity, and timing of the trauma exposure may impact whether a person exhibits anxious, concerned, avoidant, or dismissive

attachment behaviors. To address the complex needs of individuals who have experienced early hardship, it is crucial to comprehend the complex connection between adult attachment types and childhood trauma. Clinicians and researchers need to know how trauma changes attachment patterns so they can help people become more resilient, build more secure attachments, and lessen the impact of trauma on mental health and relational functioning in the long run.

There is still a need to fill certain gaps in understanding, despite the increasing amount of study in this field. We need to conduct longitudinal studies to learn how attachment changes with time after trauma, develop strategies to strengthen resilience to lessen the impact of trauma on attachment, and design culturally competent treatments to aid trauma survivors in all their varying manifestations. The purpose of this research is to fill these gaps in our understanding of the complicated relationship between adult attachment styles and traumatic experiences in childhood. We can only hope that this will eventually result in treatments backed by evidence that aid individuals recovering from early trauma in their relationships.

1.3 ATTACHMENT THEORY

A foundational paradigm for understanding the complexities of human interactions, attachment theory was developed by British psychologist John Bowlby in the mid-twentieth century. It focuses on the bonds formed between infants and their primary caregivers. By showing how formative experiences affect our emotional and relational relationships as adults, Bowlby's groundbreaking study shook up conventional wisdom on child development. At the heart of attachment theory is the attachment behavior system, an innate mechanism that directs distressed or scared infants to seek solace in the arms of a caring adult. According to Bowlby's theory, toddlers develop a sense of safety and trust in their environment through these early attachment bonds, which allow them to explore their surroundings without fear. A person's expectations and behavior in subsequent interactions with others are significantly impacted by the caliber of care they received as an infant, according to this theory. Individuals and their connections are reflected in these mental representations, which serve as working models. Mary Ainsworth expanded on Bowlby's work by conducting innovative research on the patterns of attachment in infants. By using observational studies such as the Strange Situation technique, Ainsworth found that infants exhibit different attachment types based on the attentiveness



and availability of their childcare providers. Attachment theorists who built upon Ainsworth's work identified four primary attachment types:

- **Security of the Attachment:** Children with secure attachments cry when separated from their caregivers but immediately seek solace when reunited. They also exhibit a moderate level of curiosity and a desire for intimacy. Because they have a solid internal model of themselves as well as others, people with secure attachment styles tend to have fulfilling relationships as they grow older.

- **Emotional ties that are uncomfortable or conflicted:** Adversely affected by their caregivers' responsiveness and availability, children with anxious attachment disorder experience heightened distress when separated and struggle to find solace upon reunion. Relationship difficulties including insecurity, clinginess, or an excessive need for approval may persist into adulthood for people with anxious attachment.

- **Separation Anxiety:** A child with an avoidant attachment style may show less distress when separated from a caretaker and may even be less likely to seek comfort when reunited. As adults, they may exhibit emotional distance or aloofness due to their tendency to overlook the importance of personal connections and the value placed on emotional independence and self-reliance in their internal working models.

- **Problems with Attachment that Cause Anxiety:** When approaching a caregiver, a youngster with an attachment disorder may act scared or confused. This attachment pattern often develops as a result of trauma, abuse, or inconsistent caring. Among the many challenges that adults with disordered attachment may encounter are unresolved trauma, difficulties with emotional regulation, and difficulties in forming reliable relationships. Researching how different attachment styles emerge throughout childhood may provide light on how adult relationships and mental health function. According to research, one's ability to form and maintain strong relationships, manage conflict, and cope with stress are all significantly impacted by one's attachment experiences in early life. Caretakers and therapists may aid individuals of all ages in building resilience and enhancing relationship quality by considering the influence of attachment styles on interpersonal dynamics.

1.4 TYPES AND FORMS OF CHILDHOOD TRAUMA

Forms of childhood trauma can include a wide range of stressful experiences that occur during a child's formative years. Understanding the many kinds and forms of childhood trauma is essential for acknowledging its prevalence, evaluating its effects on child development, & discovering intervention and support options.

Use of excessive force:

Child physical abuse occurs when an adult within a position of power knowingly injures or otherwise harms a child's body. Aggression manifesting physically as hitting, punching, kicking, burning, or any other violent act can be a consequence of this type of trauma. In addition to causing physical harm, abusive physical contact teaches children to fear, feel weak, and humiliated. If a child experiences physical abuse on a regular basis, it can make them feel unsafe, which can make them distrustful of people, which can lead to behavioral and emotional problems.

Not understanding mental health:

When children do not receive the love, acceptance, and emotional support they need from their caregivers, it is a form of emotional neglect. Neglecting a child's emotional needs can take many forms, such as avoiding eye contact, showing little interest in the child's feelings and experiences, or both. Those kids who don't get the love and care they need as kids are more likely to struggle with feelings of worthlessness, isolation, and loneliness as adults. In the long term, issues with self-regulation, trusting relationships, or identity formation may result from ignoring one's emotional needs.

Sexual Assault:

Sex abuse occurs when a dominant adult coerces a submissive or younger person into sexually intimate contact against their will. This might involve engaging in physical contact, penetrating another person's skin, or molesting them, or it could simply involve viewing pornographic and otherwise explicit material. Victims of sexual abuse endure not only the physical harm but also the invisible psychological wounds, such as sexual identity crisis, guilt, and shame. As a result of the trust that is broken during the abuse, sexual abuse can ruin a child's ability to form healthy relationships and establish boundaries. This can lead to issues with intimacy, sexual dysfunction, or chronic trauma.



The Sad Parting Ways With Caregivers:

Loss of a main caregiver, whether through death, separation, divorce, or other life changes, can have a significant impact on a child's attachment development & sense of safety. When a primary caregiver passes away, it can cause a child to experience a variety of negative emotions, including loss, abandonment, and severe insecurity, as well as damage to their attachment relationships. Children who have experienced the loss of a loved one may struggle to form reliable relationships and control their emotions if they have not dealt with difficult emotions such as anger, sadness, or guilt.

Surviving a Domestic Violence Incident:

Observing domestic violence between family members or caregivers can cause children significant trauma, regardless of whether they are physically hurt. By subjecting them to crippling fear, helplessness, and confusion, domestic violence robs children of any sense of safety or security they may have had growing up. As a result like internalizing feelings of shame, blame, or responsibility, children who witness domestic violence may struggle to form stable relationships, exhibit problematic behavior, and experience emotional instability.

These various forms of childhood trauma can have far-reaching effects on a child's development, including problems with attachment, emotional regulation, and social interactions. Helping children who have experienced trauma heal, become resilient, and get back on their feet is the goal of trauma-informed practices that educators, caregivers, and clinicians can employ. Recognizing the prevalence and impact of childhood trauma paves the way for this.

1.5 MECHANISMS OF INFLUENCE

Attachment patterns in adulthood are influenced by traumatic experiences in childhood through a complex web of interplay between psychological, cognitive, and neurobiological mechanisms. This information is crucial for understanding the long-term effects of childhood trauma on people's capacity to control their emotions and their patterns of interpersonal interaction.

Internal Operations Models:

Traumatic experiences in childhood can have a lasting impact on how an individual views themselves, others, and their relationships (also known as "internal working models"). These models are useful for influencing one's assumptions, worldview, and behavior in social situations.

Experiencing trauma can alter one's internal working models, leading to irrational beliefs about oneself and others, a lack of trust in others, and difficulties in forming meaningful relationships. If a person experiences abuse as a child, it can lead to internalized beliefs regarding the unworthiness of love and the trustworthiness of others. These beliefs can then influence their attachment patterns in an adult.

Building a Model:

A person's cognitive schemas influence their way of perceiving and making sense of the world around them. These schemas may be impacted by traumatic experiences in childhood. Traumatic experiences may lead to the development of maladaptive schemas characterized by themes of abandonment, suspicion, and exposure. In turn, these schemas impact how people see themselves and how they attach to others, as well as the dynamics of their relationships. A child's emotional deprivation schema might develop when they are neglected, and as an adult, they might seek out relationships that perpetuate the pattern of rejection and neglect.

Approaches to Dealing:

People who have endured trauma in childhood often struggle to manage strong emotions and maintain a sense of control. These coping mechanisms have the potential to mold people's attachment behaviors and relationship patterns, and they can become deeply embedded with time. Avoidant coping mechanisms, like emotionally withdrawing or numbing, can be a protective mechanism for people who have experienced trauma. These methods make it harder for people to form secure attachments and for adult relationships to be intimate.

Understanding How the Nervous System Operates:

Attachment, emotion processing, & stress management regions of the brain are particularly susceptible to the long-term effects of childhood trauma. Dysregulation of the HPA axis, which can occur after extended exposure to stress and adversity, may lead to changes in cortisol levels and stress response systems. Trauma may alter the structure and function of brain regions that are involved in memory storage, threat detection, and emotional regulation, including the hippocampus, the prefrontal cortex, and the amygdala. Hypervigilance, increased emotional reactivity, &



difficulties forming stable relationships are possible outcomes of these neurological changes.

Researchers and therapists need to breakdown these influencing processes to understand the complex relationship among attachment types in adults or traumatic experiences in infancy. The development of more effective treatments for trauma survivors' attachment issues could be guided by our understanding of the mental, emotional, & biological factors that contribute to these issues. Through trauma-informed treatments such as attachment-based therapy and mindfulness-based therapies, individuals may cultivate greater self-awareness, resilience, as the capacity to form stable attachments in spite of early adversity.

1.6 LONG-TERM CONSEQUENCES AND INTERPERSONAL RELATIONSHIPS

The enduring impacts of childhood trauma permeate every part of an individual's life and have a profound influence on their adult relationships. Problems with vulnerability, trust, and intimacy may persist into adult relationships if childhood trauma disrupted the development of secure attachments. It is critical to comprehend these outcomes in order to identify the challenges faced by trauma survivors in order to develop targeted treatments that promote healing in relationship well-being.

Issues related to trust: Childhood trauma can impair an individual's ability to trust other people and form healthy relationships. People who have experienced traumatic events in childhood, like being abandoned, abused, or betrayed, might develop a belief in the insecurity of human relationships and an inability to trust others. People who have experienced trauma as adults may be hesitant to form relationships for fear of reliving the trauma. They have trouble opening up and forming strong relationships because they can't let their guard down and are extremely sensitive to rejection and betrayal.

Experiencing trauma as a child can have long-lasting effects on a person's ability to form healthy relationships as an adult, including difficulties with intimacy. People may have developed a protective aversion to being vulnerable and too close to other as a result of traumatic experiences. It can be challenging for people having this disorder to form emotional connections, express their needs, and open up emotionally. People may emotionally withdraw, fear being alone, or struggle with relationship pursuits when they experience negative emotions due to intimacy. This makes it more challenging to have honest conversations and build genuine relationships.

One typical consequence of childhood trauma is the development of coping mechanisms to avoid emotional pain and vulnerability. These defense mechanisms may have worked for you when you were a little younger, but they can get in the way of developing healthy relationships now that you're an adult. Individuals may develop patterns of emotionally dulling, self-sufficiency, or emotional withdrawal as a defense mechanism. On the flip side, these strategies might make it harder for partners to be emotionally present and responsive to one another's needs, which can impede the growth of deep, meaningful relationships.

There is an increased risk of experiencing attachment instability for interpersonal dysfunction as an adult if a person has experienced trauma as a child. Attachment patterns like anxiety, avoidance, and disorganization can manifest in traumatized individuals, making it difficult for them to form safe, trustworthy relationships. These attachment patterns, which manifest as emotional instability, emotional detachment, clinginess, and neediness, can lead to relationship dynamics marked by conflict and instability. A vicious cycle of relationship misery can ensue when people experience attachment insecurity, as their worries and anxieties are frequently magnified and mirrored in their relationships.

Those who work with trauma survivors as therapists, clinicians, or caregivers need a solid understanding of how the impacts of childhood trauma show up in their relationships with others. Acknowledging the vulnerabilities & obstacles experienced by trauma survivors allows practitioners to support healing, resilience, & relationship well-being through trauma-informed treatment and intervention. Treatments that focus on building secure attachment, trust, with emotional intimacy may help people cope with the complexities of adult relationships with greater self-assurance, resilience, and the ability to form meaningful connections.

1.7 STATEMENT OF THE PROBLEM

A common and major issue, childhood trauma has far-reaching effects on the mental health as well as relationships of adults. Even though we know a lot about how trauma in childhood affects adults, very little is known about how this trauma influences attachment types among adults. Attachment theory provides a useful framework for understanding the dynamics of interpersonal relationships, but our understanding of how trauma in childhood influences the development of attachment patterns in adulthood is still rather



limited. One problem is that researchers haven't looked at attachment styles in enough adults to know which types of childhood trauma are most impactful. Extensive research is needed to fully understand the effects of various traumatic experiences on adult attachment styles. These experiences can include physical abuse, emotional abandonment, sexual assault, the loss of a main caregiver, or encounters with domestic violence. In addition, the effects of childhood trauma on the development of attachment styles in adulthood remain largely unexamined. Although theoretical models suggest a number for cognitive, psychological, or neurological mechanisms by which childhood trauma hinders the development of secure attachment relationships and causes attachment dysfunction as well as insecurity in adults, empirical research is required to elucidate these mechanisms in detail.

Closing these knowledge gaps is critical for advancing our understanding of the complex link between attachment styles in adults and childhood trauma. By studying the effects of various types of trauma on attachment formation, researchers can develop more effective, individualized treatments and strategies to help people who have experienced early adversity heal and become more resilient. Strengthened interpersonal interactions & improved well-being throughout life can be achieved by better understanding the underlying processes of impact and developing treatment methods & intervention tactics for trauma survivors.

II. REVIEW OF LITERATURE

This study aims to examine the effects of childhood trauma, including emotional, physical, sexual, & neglectful abuse, on attachment styles, immorality, romantic jealousy, and self-esteem. There were 150 participants total, 91 women and 59 men, representing all stages of life: married, dating, and single. Trauma scores were positively associated with adult infidelity, and the effects on childhood trauma on attachment patterns in adulthood varied significantly, according to the results. Research did not find a correlation between romantic jealousy, low self-esteem, and childhood trauma. **(Geyimci, B. (2010))**

In this study, the researchers sought to determine whether insecure attachment could play a role in the development of somatization in adulthood. A total of 110 couples from the community participated in a battery comprising self-report surveys, covering topics such as relationship health, physical symptoms, childhood trauma,

depression, and conflict tactics, among others. Early life trauma has been linked to an increased risk of somatization and insecure attachment. Individuals exhibiting a style of attachment that is insecure tended to somatize at a higher rate. The results showed that frightened attachment entirely mediated the association between somatization even childhood trauma in women, even after controlling for variables like age, income, even the presence or absence of a recent partner assault. Types of insecure attachment and early trauma independently predicted somatization levels, however this mediation failed to hold for men. The findings provide credence to the idea that trauma experienced as a child can lead to attachment issues as an adult, which can impact woman's somatization levels. The findings point to attachment and trauma as two major independent variables that may foretell the onset for somatization in adult men. Children who experienced trauma as children develop ways of responding to others when they are in distress, which in turn affects their interactions with providers in the somatization process, according to the study's authors. Having data gathered from attachment type tests might help medical professionals create more tailored treatment programs. In **(D. K. (2006))**

The purpose of this study was to examine the interplay between attachment styles and childhood trauma, specifically how the former may influence the latter and vice versa. Undergraduates at Turkey's Mugla Sıtkı Kocman University made up 911 of the participants (492 females and 419 males). For this study, we used the brief screening versions of the Childhood Trauma Questionnaire and the Relationship Scales Questionnaire. The predictive impact of childhood trauma for attachment types was explained by structural equation modeling, and a link between attachment types with childhood trauma was sought using Pearson product-moment correlation testing. There was a positive correlation between attachment styles defined by fear, obsession, and dismissal and physical, emotional, and sexual abuse with neglect during childhood, and a negative correlation between attachment styles that include security and the same traits. Prior research involving attachment types including childhood trauma provided a framework for discussing the results. It is imperative that replications with larger samples be conducted in order to delve further into the correlation between attachment types & childhood trauma. **(Erozkan, A. (2016))**



A number of mental disorders have been associated with certain attachment types in adults, which may or may not have any bearing on emotional functioning, personality structure, or the impact of childhood trauma. However, empirical research that investigate the interplay between these concepts are few. This study aims to do just that—to understand how attachment with personality factors effect the relationship between childhood trauma and emotional regulation when one is an adult—because it is crucial to do so. We assessed emotional functioning using the Affective Neuroscience model to evaluate primary emotions, which encompasses desire, fear, anger, sorrow, caring, and play. Six hundred sixteen nonclinical individuals (61.9% female) were included in the sample; their average age was 30 and their standard deviation was 9.53. We used path analysis to investigate the interplay between early-life trauma, attachment types in adulthood, fundamental emotional traits, personality structure, and additional factors. Childhood trauma significantly predicted deficits in personality organization and insecure attachment (all $p < 0.001$). Furthermore, adult connection was a significant predictor of primary emotion dispositions overall, but there was a substantial association between ANGER and a reduced degree of personality classification ($p < 0.001$). Furthermore, personality organization and attachment traits influence the connection between primary emotions and early trauma, according to the results ($p < 0.01$). Lastly, the model could account for 48% of the variance in SORROW, 38% in PLAY, 35% in FEAR, 28% in CARE, 14% in ANGER, and 13% in SEEKING. According to (Unterrainer, H. F. (2019)

Finding out if there is a correlation between attachment type and post-traumatic stress disorder symptoms is the goal of this study, which involves surveying individuals who have reported experiencing childhood maltreatment. In all, sixty-six people took out the survey, which included questions on their attachment style, symptoms of post-traumatic stress disorder, and abuse history. Three out of the three insecure attachment patterns were validated by 76% of the participants: dismissive, terrified, and preoccupied. Those who had anxious, overly concerned attachment styles, indicative of a negative self-view, had the highest mean scores for PTSD symptoms, as shown in analyses of variance. While poor self-perception was positively linked to PTSD symptoms across correlational studies, negative self-image had no such effect. Regression analysis revealed that a history of physical abuse was the strongest predictor

for PTSD symptoms, followed by a negative self-perception. Furthermore, a negative view of other individuals was not associated with PTSD symptoms in the regression analysis. (Lemieux, Georges E. (2000)

It was the primary objective of the study to identify the kind of insecure attachment that is associated with physical abuse experienced as a kid. College students' attachment patterns and histories of childhood abuse were among the topics covered in questionnaires completed by 552 female and 294 male students. We have completed the regression analyses. The association between attachment avoidance and a history of physical abuse persisted even after controlling for other forms of childhood maltreatment. There is some evidence to support the concept that there is a correlation between physical abuse and attachment anxiety. A control variable known as social support was a strong predictor of both anxious tendencies and attachment avoidance. Adult love relationships may be less affected by a background of physical violence if there is social support. In 2014, (Luca, R. V.)

This effort was driven by two objectives. Concerning attachment styles and traumatic childhood experiences, we first aimed to assess the performance of a control group as well as women suffering from mental illness. We also wanted to see whether there was any connection between the attachment styles of moms and their children and traumatic events in childhood as a secondary goal. According to attachment theory, a series of unfortunate events may trigger insecure attachments when trauma occurs in a formative relationship. This descriptive study utilized a case-control approach and ran from May 2013 for March 2014. There were sixty-three mothers and their children with a history for mental illness who took part. A total of 63 moms and their children were determined to be mentally healthy in the control group. Researchers administered the Adult Attachment Style Scale and the Childhood Trauma Questionnaire to both children and their mothers in order to compile data for this study. Data analysis included descriptive statistics, comparative statistics, and a Pearson correlation. Mothers and children of women with mental illness performed worse on tests of childhood trauma versus the control group. Compared to the control group, children whose mothers suffered from mental illness had fewer secure attachment patterns. Mothers and children with insecure attachment patterns were more likely to be victims of abuse, according to the study's



authors. To summarize These results suggest a connection between attachment type and childhood trauma. Their results also provide credence to the idea that this relationship might be inherited. The significance of medical care This research adds to what is already known about the link between attachment and adverse childhood events. Mental health patients and the difficulties they face as parents are two sides of the same coin that psychiatric nurses must pay close attention to. **(Tomruk (N. B 2016)**

This study set out to examine adolescent and young adult participants' experiences with post-traumatic stress disorder (PTSD) and adult attachment styles. A total of 328 intermediate-level Danish students were given the following assessments: the Harvard Trauma Questionnaire (HTQ), a Revised Adult Attachment Scale (RAAS), the Trauma Symptom Checklist (TSC), the Conflict Support Scale (CSS), a Coping Style Questionnaire (CSQ), and the World Assumption Scale (WAS). On average, the students were 29.2 years old. Type of attachment was associated with somatization, emotional resilience, social support, quantity of post-traumatic stress disorder symptoms, negative affectivity, et emotional coping. The relationship between attachment style and post-traumatic stress disorder symptoms may be seen as having an unidimensional distribution. **(A. Elklit (2008)**

An previous research found that when interacting with clinical professionals, individuals with breast cancer who acknowledged a history of childhood abuse were more unlikely to report feeling fully supported than those without this background. We set out to verify this effect, then see whether surgeons' attachment style mitigates the effect of abuse on patients' and surgeons' views of the relationship, and lastly, find out whether the relationship between abuse or patients' perceptions of less support mediates patients' feelings of support. One hundred primary breast cancer patients completed self-report questionnaires measuring emotional distress, adult attachment (self- or other-models), parental care during childhood, and sexual, emotional, and physical abuse that happened before the age of 16. These women were undergoing surgery to remove the cancer. The surgeon's support as the surgeon's evaluations of the patient's relationship issues were assessed by self-report questionnaires that were completed by both the surgeon and the patient three weeks after surgery. Although emotional discomfort was taken into consideration, the probability that the

surgeon offered insufficient support was almost seven times higher among patients who reported past experiences of abuse compared to those who did not. As compared to patients did did not recall abuse, surgeons found it more difficult to form relationships with those who did. Surgeons' evaluations of challenges were unaffected by abuse, but patients' perceptions of inadequate support by attachment (a weak self-model) were. **(P. Salmon's 2011)**

Arata (2000) and Crawford and Wright (2007) found a positive correlation between childhood maltreatment and adult interpersonal trauma. Researchers in the area the betrayal trauma theory found that people who had endured high-betrayal trauma in children, such as sexual or physical abuse by parents or guardians, were more inclined to experience betrayal trauma as adults (Gobin & Freyd, 2009). The mechanisms behind these connections remain a mystery, but attachment theory may help shed some light on the matter. Baer and Martinez (2006) and Muller et al. (2000) found that attachment insecurity was a sign of childhood maltreatment. Interpersonal dysfunction and an elevated risk to intimate partner violence are associated with insecure attachment, which may moderate the relationship between childhood maltreatment and adult betrayal. In this study, 601 students were used as a sample to assess this hypothesis. Participant data was collected using online surveys that included measures such as the Child Abuse Trauma Scale (CATS), the Summary on Betrayal Trauma Scale (BBTS), and the Experiences in Close Relationships - Revised (ECR-R). Results show that apprehensive attachment modulates the link between maltreatment in childhood and subsequent betrayal in adulthood. According to **(Surette (2016)**

This study aimed to examine the relationship between attachment insecurity and dissociation in adulthood, specifically as it pertains to certain forms of childhood maltreatment. In this study, 115 outpatient mental health patients who sought care in a trauma center were included. The Childhood Trauma Questionnaire, the Revised Adult Attachment Scale, and the Dissociative Experience Scale were used to collect the data. Structural equation modeling and route analysis set aimed to investigate how attachment insecurity mediated the relationship between childhood trauma and adult dissociation. There was no correlation between higher levels of dissociation and more severe childhood trauma when individuals suffered from



attachment anxiety. Path analysis of trauma subtypes reveals that attachment anxiety fully mediates the relationship between adult dissociation and psychological abuse, beatings, and physical neglect. Dissociation and attachment disorders work hand in hand to amplify the effects of sexual abuse. The direct and indirect effects of emotional neglect on dissociation were shown to interact in a contradictory way; attachment insecurity attenuated the indirect effect of psychological neglect in dissociation. Certain characteristics of attachment insecurity may provide insight into the relationships between certain forms of childhood trauma and adult dissociative symptoms. Therapeutic interventions that zero in on certain sources of attachment instability may help patients exhibiting dissociative symptoms who have experienced trauma as children. In (2018, Kim (N. H.)

Prolonged absence from parental support is a risk factor for psychopathology. The effects of brief parental separation on attachment patterns and PTSD in children were the focus of this study. Children ($n = 806$) and controls ($n = 725$) affected by one of the greatest bushfire disasters in the nation's history in 1983 were evaluated using parental reports of trauma exposure vs. separation from children during the flames. The children's ages ranged from seven to eight years old. There was a follow-up assessment of 500 individuals after 28 years, this time measuring attachment security with the Experiences using Close Relationships scale and PTSD with the PTSD checklist. Divorce from parents was significantly associated with an avoidant attachment style as an adult ($B < -3.69$, Southeast < 1.48 , β a -0.23 , with a p -value of 0.013). Those who exhibited avoidant attachment were more likely to have signs such as re-experiencing, avoidance, & numbness ($B = 0.03$, $B = 0.01$, $\gamma = 0.31$, $p = 0.045$, $p = 0.001$, $\gamma = 0.30$, $p < 0.001$, and $\gamma = 0.30$, p a 0.001, respectively). Anxious attachment the data ($B = 0.05$, S.E. equals 0.1, $\beta = 0.43$, which is which are $p < 0.001$), numbed ($B = 0.03$, which is $\beta =$ a value of 0, S.E. = 0.01, in a probability for < 0.001), and re-experiencing symptoms were also found to be associated with anxious attachment. (Nickerson 2017)

Finding a link between attachment styles, learned resourcefulness, and childhood trauma is the driving force for this study. The following questions were administered to 485 first-year students at a public university in Turkey: how they now feel about connection, how resourceful they are, and

whether or not they had experienced any traumatic events in their formative years. In two different investigations, researchers looked at how resourcefulness is affected by attachment patterns and by early trauma. We also examined the effects of childhood trauma on adult attachment styles. Children who suffered trauma as infants were less likely to be creative and had less stable attachment styles, according to the study's authors. Attachment security & resourcefulness were strongly correlated. We analyzed the data using attachment theory and studies on abuse. (Demir, I. (2008)

III. METHODOLOGY

AIM OF THE STUDY

The purpose of the study was to investigate the impact of childhood trauma on attachment styles among young adults.

VARIABLE OF THE STUDY

Independent Variable

Childhood Traumatic Experience: This term describes unfavorable incidents or encounters that take place when a person is still a kid and are seen by them as frightening, damaging, or upsetting. A loved one passing away, neglect, domestic violence, divorce between parents, and emotional, sexual, and physical abuse are a few examples of these events. Childhood trauma may have a long-lasting impact on a person's emotional health and psychological development, which might later on in life affect their attachment patterns and interpersonal interactions. The independent variable in this study is the traumatic childhood experience, which stands for exposure to unfavorable occurrences throughout childhood.

Dependent Variable

Attachment Styles: People's attachment styles are the ways they respond emotionally and relationally in intimate relationships, which are shaped by their early experiences with caregivers. Secure attachment, anxious attachment, as well as avoidant attachment are examples of common attachment types. These relationship types affect people's capacity to establish and preserve wholesome connections with others as well as their views, expectations, as well as behaviors in such relationships. The dependent variable in this study is attachment styles, which represent the relationship patterns that young people display as a result of their traumatic childhood experiences.



OBJECTIVES

To explore the impact of childhood trauma on attachment styles among young adults.

HYPOTHESIS

There is no significant impact of childhood trauma on attachment styles among young adults.

PARTICIPANTS OF THE STUDY

The 108 participants in the sample were carefully chosen, with both male and female participants included by purposeful and random sampling. The group's majority of members were in the 18–25 age range.

DATA COLLECTION INSTRUMENTS

The “**Childhood Trauma Questionnaire and the Experience in Close Relationship Scale**,” in addition to a demographic questionnaire, were used to collect the data for this study.

DATA COLLECTION PROCEDURE

Two questionnaires, including the “**Childhood Trauma Questionnaire and the Experience in Close Relationship Scale**,” were utilized to gather the information. After the study’s objectives were described, participants received a package of questionnaires with information about the study, privacy concerns, the researcher’s contact details, and other measurements. After then, participants were invited to take part in the research. It took 10 minutes to describe the instruments.

CHILDHOOD TRAUMA QUESTIONNAIRE

The Childhood Trauma Questionnaire-Short Form (CTQ-SF), a 28-item self-report questionnaire, has been used to measure childhood trauma. It is a shortened version of the seventy-odd item Childhood Trauma Questionnaire (CTQ). The CTQ-SF consists of 25 clinical items and three validity elements. The Childhood Trauma Questionnaire-Short Form (CTQ-SF) has five subscales, each with five items on a 5-point Likert scale. One is for “never true” on the scale, while five is for “very often true.”

RELIABILITY

The Cronbach’s α value for the entire CTQ-SF for this test is 0.852. The scores for emotional neglect are 0.857, sexual abuse is 0.755, physical abuse is 0.713, emotional abuse is 0.666, and physical abuse is 0.491 for each of its five components.

EXPERIENCE IN CLOSE RELATIONSHIP SCALE

The Experience in Close Relationship Scale is sometimes known as the Experiences in Close Relationships Scale-Short Form, or ECR-S. This 12-item test evaluates adult attachment in romantic partnerships. Based on the research on newborn attachment styles by Ainsworth, the ECR-S was created.

RELIABILITY

The test-retest Cronbach alpha value for the Experiences in Close Relationships (ECR) instrument is .95 for the avoidance scale and .93 for the anxiety scale, indicating strong reliability.

STATISTICAL ANALYSIS

In the study, the regression approach was employed with the assistance of SPSS software. Additionally, descriptive statistics were used.

IV. RESULT & DISCUSSION

Abuse, neglect, and dysfunctional families are examples of childhood trauma that can have a significant and long-lasting impact on an individual's attachment pattern as they enter early adulthood. According to attachment theory, people's inner functioning models of relationships are shaped by their early experiences with caregivers, and this has an ongoing impact on their attachment patterns. Clarifying the intricate interactions between early life events and interpersonal connections in adulthood requires an understanding of the link between attachment types among young people and traumatic childhood experiences.

The purpose of this study is to investigate the association between young adults' attachment types and traumatic childhood events. This study looks at the prevalence of various childhood trauma types and how they relate to attachment patterns (secure, insecure-avoidant, insecure-anxious, and disorganized), in an effort to clarify the ways that early experiences shape adult attachment styles. Through the use of a thorough research technique that includes questionnaires and psychological evaluations, this study will explore the attachment patterns that resulted from childhood trauma experienced by young people.



Table 1: Descriptive statistics of all variables

	<i>Childhood Trauma</i>	<i>Attachment Styles</i>
Mean	60.37037	44.23148
Standard Deviation	9.848946	8.270663
N	108	108

The table of descriptive statistics offers important information about two variables: attachment styles and childhood trauma.

First, examining Childhood Trauma, individuals on average had moderate levels of trauma during their childhood, as shown by their mean score of 60.37. A relatively small standard deviation of 9.85, which indicates that the scores are closely concentrated around the mean, lends more credence to this. These results provide a solid grasp of the prevalence of childhood trauma among the research community, with a sample size of 108. Second,

looking at Attachment Styles, the average score of 44.23 indicates that participants may have a moderate degree of attachment insecurity. In a similar vein, the 8.27 standard deviation suggests that the range of scores surrounding the mean is quite small. This suggests that the sample's attachment patterns are somewhat consistent.

In summary, the descriptive statistics offer an overview of the central tendency and distribution of Childhood Trauma as well as Attachment Styles in the sample, emphasizing the frequency and diversity of each.

Table 2: Regression analysis of impact of childhood trauma on attachment styles among young adults.

<i>Regression Statistics</i>	
Multiple R	0.051715
R Square	0.002674
Adjusted R Square	-0.00673
Standard Error	8.298465
Observations	108

ANOVA	<i>df</i>	<i>SS</i>	<i>MS</i>	<i>F</i>	<i>Significance F</i>
Regression	1	19.57449	19.57449	0.284246	0.595047
Residual	106	7299.638	68.86451		
Total	107	7319.213			

Null Hypothesis (H₀): There is no significant impact of childhood trauma on attachment styles among young adults.

Alternative Hypothesis (H₁): There is significant impact of childhood trauma on attachment styles among young adults.

The regression model is not statistically significant at the traditional significance level of 0.05, according to the F-statistic of 0.284246 and associated p-value of 0.595047. This indicates that there is insufficient data from the regression model to rule out the null hypothesis.

Consequently, we are **unable to reject the Null Hypothesis (H₀)** due to the lack of statistical significance as well as the extremely weak association that was seen. Stated differently, the

findings do not **support the Alternative Hypothesis (H₁)**, indicating that childhood trauma has no discernible effect on young adults' attachment types.

V. DISCUSSION

This study provides important new information on the connection between young adults' attachment types and childhood trauma. The regression analysis failed to identify statistically significant data to support the initial assumptions, which suggested that early trauma had a major influence on attachment patterns.

The descriptive statistics gave a thorough picture of the sample's attachment types and the frequency as well as distribution of childhood trauma. The mean score, which suggested moderate



levels of childhood trauma, was accompanied by a modest standard deviation, which demonstrated the constancy of participant experiences. In a similar vein, the sample's average attachment style score, which had a small range of values around the mean, indicated a moderate level of attachment insecurity.

Regression analysis, however, was unable to show a meaningful correlation between young adults' attachment types and childhood trauma. The regression model lacks the statistical significance to reject the null hypothesis, as evidenced by the low F-statistic and the corresponding p-value over the conventional significance threshold. This shows that there is not enough evidence in the data to substantiate the idea that attachment patterns during early adulthood are greatly impacted by childhood trauma.

As a result, even though this study offers insightful information on the relationship between young adults' attachment patterns and childhood trauma, more research and theoretical framework improvement are clearly needed. Future studies can help design tailored treatments and support measures to encourage healthy relationship functioning in people with a history of childhood trauma by clarifying the intricate dynamics underpinning attachment formation.

VI. CONCLUSION

The study's results, as supported by the regression analysis, suggest that early trauma does not significantly affect young adults' attachment types. Given that the regression model's p-value was significantly higher than the usual cutoff of 0.05, it was unable to achieve statistical significance. This shows that the evidence does not support the hypothesis that attachment types in young adults are related to childhood trauma.

Furthermore, at least within the confines of this study, the low R-squared value as well as the negligible F-statistic support the finding that childhood trauma has no appreciable impact on early adult attachment types.

The prevalence of attachment styles and childhood trauma in the sample was indicated by the descriptive statistics, however there was no evidence to show a significant relationship between these variables according to the regression analysis. Therefore, based on the results of this study, the null hypothesis—which states that there is no substantial effect of childhood trauma upon attachment patterns among young adults cannot be rejected.

It's critical to recognize that the methods and sample employed in this study were unique to

the result reached. More investigation using other techniques and bigger sample sizes could shed more light on the intricate connection between attachment styles in early adulthood and childhood trauma.

VII. RECOMMENDATIONS

- **Additional Investigation of Mediating Factors:** Future studies may examine potential mediating factors in light of the study's finding that childhood trauma had little effect on young adults' attachment patterns. Examining factors like coping strategies, social support systems, or personal resilience may shed important light on how people adjust and form attachment types in spite of traumatic early events.

- **Longitudinal Research:** Over time, doing longitudinal research may provide a more thorough knowledge of the dynamic link between attachment types and early trauma. Following people from childhood into early adulthood would enable researchers to document developmental shifts and pinpoint pivotal times when resilience or vulnerability is most needed.

- **Diversity in the Sample:** Adding people from a wider range of cultural groups, socioeconomic classes, and places to the study's sample could make the results more applicable to other situations. The way that childhood trauma as well as attachment patterns appear and are interpreted might vary depending on the cultural norms as well as societal situations.

- **Intervention and Support Services:** Creating focused intervention and support services for young people who have suffered from childhood trauma might be advantageous, according to the study's findings. To lessen the possible detrimental effects of early trauma on attachment patterns, these programs can emphasize building social support networks, encouraging resilience, and cultivating healthy coping strategies.

LIMITATIONS OF THE STUDY

- **Sample Size and Composition:** The 108 individuals in the research may have limited how far the results may be applied. Furthermore, there could not be enough diversity in the sample, which could skew the findings and restrict their relevance to larger groups.



- **Self-Report Measures:** There is a chance that response bias and errors may be present when self-report measures are used to evaluate attachment styles and childhood trauma. To improve the validity of the findings, multi-method techniques such as clinician-administered interviews and observational evaluations might be used in future research.

- **Cross-Sectional Design:** The study's cross-sectional design makes it more difficult to determine the exact causes of the attachment patterns and childhood trauma. To clarify the temporal dynamics as well as causal processes underlying these variables, longitudinal investigations are required.

- **Restricted Variable Scope:** It's possible that additional pertinent factors that might have an impact on how attachment types and childhood trauma interact were not taken into consideration by the research. Investigating other elements, such as peer interactions, family dynamics, or personality qualities, may offer a more thorough comprehension of this intricate interaction.

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