TITLE:
"AN ISSUE OF GRACE ¹ ": MENTAL REPRESENTATIONS OF SELF AND OTHERS IN EMERGING YOUNG ADULTS EXPOSED TO DOMESTIC VIOLENCE IN CHILDHOOD. BY CARLA DURBACH
A PHD THESIS COMPLETED IN 2015, AT THE UNIVERSITY OF THE

 $^{\rm 1}$ Statement made by Jane, participant 5 in this particular study

WITWATERSRAND

DECLARATION

	day of		, 2015
Carla Durbach			
Johannesburg. It has not examination at another unive		before for	any degree of
degree of PhD in Psycholo		-	
I declare that this is my own	n unaided work.	It is being s	ubmitted for the

Dedication

This study is dedicated to my Lord, Messiah and Saviour Jesus Christ of Nazareth. When all else fades, You remain.

Acknowledgments

- 1. I would like to thank my Father in Heaven, YHWH, for all the blessings in my life, for keeping me safe and for all the growth opportunities afforded me.
- 2. I would also like to thank my husband, Shane for his selflessness and support and for his humour which kept me going even when I felt like panicking and/or procrastinating.
- 3. To my supervisor who demonstrated diplomatic patience and generosity of spirit I would like to say a big thank you.
- 4. To all the participants who volunteered for this study: I am extremely grateful for your willingness to let me in, for a short while, into your personal world of childhood. I know it wasn't always easy but this work records your voice too. To participant 4: I hope that this work will serve to honour, in some small way, the memory of your mother as well as that of other women who have lost their lives (literally and figuratively) to domestic violence.
- 5. I am very grateful to the Faculty of Humanities for providing financial support during the write-up of this thesis.

"When we see a crowd we see exactly that, a crowd. Filling a stadium or flooding a mall. When we see a crowd, we see people, not persons, but people. A herd of humans. A flock of faces. That's what we see. But not so with the shepherd. To him every face is different. Every face is a story. Every face is a child. Every child has a name."

Max Lucado, from "When God whispers your name", p1.

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Abbreviations list

AAI: Adult Attachment Interview

GRR: Generalised resistance resources

SOC: Sense of Coherence

OLQ: Orientation to Life Questionnaire

u/d: Undifferentiated/disorganised

PTSD: Post traumatic stress disorder

Abstract

Exposure to domestic violence in childhood is believed to have deleterious effects upon child development and long term adult functioning. The implications for disturbed relating and intergenerational transmission patterns of violence are considerable, yet few studies thus far have comprehensively examined the personal stories of young adult South Africans exposed to domestic violence in childhood with a view to understanding the effects of this domestic violence from their perspectives, and how they have made meaning of these experiences. The individual case studies of seven such adult women are investigated within this study through a psychoanalytic lens which explores attachment states of mind through the Adult Attachment Interview, object representations through the psychoanalytic research interview and sense of coherence through administration of the SOC-29. Experiences of domestic violence in childhood by participants were characterised by role reversal dynamics between parents and children as well as diminished quality of parenting at times. Adaptation to this entailed marked caregiving and protective roles being adopted by children which extended into adulthood relationships. Earned security of attachment was present in most cases, with expressed fears of intimacy and compromised trust in others. The latter being made evident in the exploration of outlook on life and sense of coherence scores. Forgiveness for parents and memories of benevolence characterised oscillations between paranoid-schizoid and depressive positions, this being a developmental transition process for participants, which appeared to have been made more complex by the domestic violence and the relational trauma that ensued.

CHAPTER 1

INTRODUCTION

1.1 Not 'a small and normal marital problem'2

...my husband came to the flat and beat me badly for having left home. My little son saw this and (still) remembers the incident (Lesley, in Park, Fedler and Dangor, 2000, p. 292).

Although the abuse of women and children is a universal phenomenon, in South Africa this has been described as endemic in that it seems to remain ingrained in the very social fabric of society (Vogelman & Eagle, 1991).

The overall South African rate of female homicide is 24,7 per 100,000 which is over six times the global rate of 4 in 100,000 (Abrahams, Jewkes, Martin, Mathews, Vetten & Lombard, 2009) with at least 50% of women homicide victims in South Africa being killed by their male partners (Pringle, 2010), a crime which is often designated as 'intimate femicide'. The majority of these women are usually below the age of 45 years (Abrahams et al., 2009), placing them in their child bearing years and increasing the likelihood that many young children will potentially witness and suffer the murder of their mother and its aftermath. Like Lesley, in the quote above, abused women are often unable to protect their children from both witnessing and directly experiencing domestic violence (Fedler & Tanzer, 2000).

Family life, being the intensely private space that it is, functions within, and is influenced by the larger social, historical and cultural context of this country. Violence within this space is often relegated to the private family domain and tends to be perceived as a justifiable method of male dominance to the point of being legitimised by societal structures and individuals (Abrahams & Jewkes, 2005; Kubeka, 2008; Ohlsson, 2010; Vetten, 2000). This violence undermines not only women and children but also men in the sense that it has the potential to become destructive to the larger society in denying freedom from violence and agency to both genders.

Despite South Africa's constitutional dispensation and consequent legislative focus on human rights issues (one of these being domestic violence³), at a grass roots level, this constitution does not appear to be a lived reality in many family homes thus enhancing the divide between constitutional and personal life, in this country. Abrahams and Jewkes (2005) report on the normalising of domestic violence by South Africans, especially in cases where no physical injuries can be seen. It is as if without bruises and scars the recurrent

² This is from a comment made by a woman who experienced others as minimising her experience of domestic abuse, in Park, Fedler and Dangor (2000, p. 240).

³The term 'domestic violence' although 'worn smooth with use' (Mcintosh in Holt et al., 2008, p. 798) is deemed to refer, in this paper, to intimate relationships involving adults within which one partner is abused by the other (Buchanan, 2008).

violence in family homes remains invisible, slowly enhancing the widespread ignorance of how these acts undermine the family, this society and our very democracy.

South Africans seem to be largely desensitised to this type of violence and regard it as the expected norm in everyday life (Pringle, 2010). However, in rural areas in particular, the disempowerment of women and children may be further compounded by physical, geographical and social isolation as well as the lack of accessibility to adequate community services and even consistent schooling (Davis, Taylor & Furniss, 2001).

The Domestic Violence Act of 1998 does make provision for the maximum protection of victims of domestic violence and aims to reduce the number of such cases in South Africa (Domestic Violence Act, 1998). It outlines how the victim may access assistance and lay a criminal charge against the perpetrator as well as apply for a protection order, should they wish to. The act does acknowledge psychological, emotional, sexual and economic abuse between persons who are in a relationship. It also recognises acts of intimidation, harassment, stalking, damage to property, controlling or abusive behaviour and forced entry into residences without consent of the other. Overall it appears to comprehensively cover the uppermost range of requirements of domestic volence cases. However, current domestic violence statistics in South Africa suggests that, in many cases, practice does not conform to legislature, on a personal level. Currently, the levels of crime in South Africa are far above those of similar countries, with high levels of corruption plaguing the police force (Pringle, 2010). One would imagine that this consequently impacts effectiveness in combating violent crime especially.

According to the Independent Complaints Directorate (ICD, in Barnard, 2011), up to 65% of police stations are not compliant with the domestic violence act, making them unable to provide adequate assistance to victims. In the year 2011, 53% of domestic violence victims were misinformed that they could not lay a charge after being physically abused. 96% of domestic violence victims were also not given information on their right to apply for a protection order and lay a criminal charge concurrently.

Furthermore, the Domestic Violence Act may only be enforced in magistrates or family courts (Curran & Bonthuys, 2004), leaving women and children who are subject to African traditional and customary law⁴ without much recourse. In some rural areas women are not permitted to attend customary court hearings or to represent themselves and their interests are therefore not appropriately considered during a family dispute (Alliance for Rural Democracy, 2012). Such courts often do not have regulatory procedures in place to address domestic violence issues. Judgements often favour the husband, and although difficult to believe, given our Constitution, the woman may be further victimised by being

African Traditional Customary Law which favours polygamy.

⁴ These are written and unwritten rules which have developed from customs and traditions and which are usually applied in disputes by the Community Chief and elders (Alliance for Rural Democracy, 2012; Curran & Bonthuys, 2004). South Africans residing in rural, semi-rural or even in some urban areas may adhere to

required to perform forced labour as a result of the customary court's decision (Alliance for Rural Democracy, 2012). Due to the trauma suffered and fear of further violence, many victims are also not likely to demonstrate the assertiveness that is required to report the assault to the police or other authorities nor to seek legal action (Monyela, 2010).

Domestic violence, in South Africa, is also entrenched in the power differential existent in a patriarchal society within which gender roles are strictly demarcated and acted out (Vogelman & Eagle 1991). Women's subjugation is ultimately impacted by financial dependency, widespread belief systems (including those of women) and attitudes of entitlement regarding women and children which are perpetuated by the political powers that be and remain a significant part of traditional 'legislation'. This is exemplified by the president, Mr Jacob Zuma's, comments on customary law: "Let us solve African problems the African way, not the white man's way. Let us not be influenced by other cultures and try to think that lawyers are going to help" (The Telegraph, 4 November 2012). The difficulty lies in the fact that domestic violence in South Africa remains typified by its repetitive nature and perpetual states of captivity invariably cutting across the divides of geographical location, race, class and culture (Herman, 2001; Park, Fedler & Dangor, 2000), and customary law seems to be impotent with regards to changing the status quo.

1.2 Issues of power, intrapsychic dynamics or both?

Despite all of the valid rhetoric which assigns domestic violence to socio-political issues, this may not be sufficient to change the climate of gender based violence in this country because it fails to address the deep rooted causes of the phenomenon which serve to maintain it. Also, gender differences are not necessarily inherently malignant although these may certainly be portrayed as such by stereotypes which have been well cultivated in this society. However, when relationships go wrong, they may not do so simply because of societal stereotypical and pathological definitions of masculinity or femininity or because of power dynamics but also perhaps due to internalised, damaged object relations and attachment injuries. Societal patriarchy and gender hierarchies may also be symptoms of a deeper disturbance in human beings which perpetuates personal patterns of woundedness, and ultimately the destructive choices that adults make. These patterns of violence are expressed in attitudes and behaviours which are adopted by some but not by others, as is evident in individuals and families that escape such violence despite past experience.

Therefore focusing on issues of power and subservience, although relevant and a valid point of departure, may not be sufficient in addressing the inner reality of the abuser, the abused and their children. In making the woman the martyred victim and the man the incarnate demon (Haaken, 2008), researchers and clinicians also play into the societal propensity for splitting and polarisation. As suggested by Haaken (2008) this is most often observed in popularised culture expressed in films such as "What's love got to do with it?", "Sleeping with the enemy" and "Enough" where the virtuous, victimised woman eventually makes her escape from the evil, predatory man and, occasionally, kills him. The danger, as Haaken

(2008) points out, is that the protagonist is portrayed as an excessively good and angelic object, as if this would be the only way to empathise with her as a victim of violence. The fact that women bring with them their own damaged internalised objects into a violent relationship does not make them any less of a victim of assault. Consequently, Haaken (2008) poses the question: why is there such a need to deny the personal side of domestic violence?

The roots of domestic violence may very well be embedded in the psyche of men and women and getting hold of these roots may require a much more complex and multidimensional approach. Solt (1996) makes the observation that sociological theories also fail to motivate men to surrender their positions of power and that gender cannot be 'restructured away' (p. 35). He maintains that: "A psychological shift must occur before men stop hurting themselves, other men, and women" (Solt, 1996, p. 35). I suggest here that this psychological shift must occur in the minds of South African women as well so that they may also cease from perceiving themselves and their children, as appropriate recipients of male violence.

1.3 Exposure to domestic violence

Domestic violence in SA, often entails pushing, shoving, slapping, beatings with objects or fists, stabbings, murder, marital rape and contravention of protection orders (Machisa, 2011). It also includes being spat upon during altercations at home, being beaten while naked in front of the children and community as well as experiencing miscarriages due to physical assault by a partner (Davhana-Maselesele, Myburgh & Poggenpoel, 2009). Children in the home will not only witness this but, at times, may also experience the violence directly.

The deleterious short and long-term effects of violence in the home upon child development, is widely reported and is the focus of current research (Devaney, 2009; Erisson, 2009; Holt, Buckley & Whelan, 2008; Ohlsson, 2010). Although witnessing the abuse of a parent constitutes emotional maltreatment and negatively impacts cognitive, affective and interpersonal development, this witnessing is often coupled with the co-occurrence of direct child abuse in many families, thus giving rise to the term 'exposure' as an all encompassing means of describing children's experiences (Holt et al., 2008). Witnessing alone brings with it its own set of traumatic outcomes. For instance, McGee (in Holt et al., 2008), reported that out of 54 children who were participants in his British study, 71% had witnessed physical assaults upon their mother and 10% had witnessed their mother's rape. Violence in the family may also escalate with knives, guns and other objects often being used. Men who abuse their partners have also been found to be more likely to abuse their own children as well (Bancroft, 1998, 2002; Holt et al., 2008). Contrary to popular belief separation does not always bring an end to the violence, quite the opposite, with the risk of fatality increasing for the woman as well as the risk of child abuse and abduction increasing for the children (Bancroft, 1998, 2002; Holt et al., 2008; Stanley, 2011).

The ability of both parents to meet their children's needs in a context of domestic violence is also seriously compromised and is therefore likely to negatively impact the quality of attachment in the child-parent relationship (Levendosky, Lannert & Yalch, 2012). There also appears to be an erroneous perception that infants and very young children are less affected by the violence than older children (Carpenter & Stacks, 2009). Evidence suggests that this is not the case and children of all ages, including infants and adolescents, are significantly impacted. However, early experiences do tend to lay the foundation for basic trust and security and later development, and as such, earlier prolonged exposure does seem to intensify the negative outcomes for the child (Holt et al., 2009).

Ultimately every child is unique and there are a variety of factors that may influence how the child is able to process and respond to what is happening. Factors such as age, frequency of abuse, gender, personality, socio-economic status, role within the family and relationship with family members and others all contribute towards the child's developmental and personal outcomes (Holt et al., 2008; Lohman, Neppl, Senia & Scholefield, 2013; Stanley, 2011). Yet, studies exploring the resilience and fortitude of young adults exposed to domestic violence in childhood are rare. The unique South African context where extended family is extremely valued also allows for some children to have access to replacement maternal figures such as grandmothers, grandfathers, aunts and uncles who can provide attachment security and stability when the primary parents remain unable to do so.

Yet little effort seems to be placed into research studies that tap into the specific experiences of individuals who have been exposed to domestic violence in childhood (Devaney, 2009; Idemudia & Makhubela, 2011; Stanley, 2011). The predominance of quantitative research relegates this experience to statistical occurrences and while worthwhile and informative, only half-heartedly succeeds in its attempts to educate health professionals on how to prevent, intervene and support such families and individuals. Rich clinical case studies in the field of domestic violence are not attempts at replacing widespread research in the field but are instead efforts at enhancing knowledge and can serve to identify 'blind spots' in the conceptualisation of modalities of treatment of affected children and families that are characterised by violence.

Informing theory, launching more studies and informing practice

The dearth of psychoanalytic research on the resilience and hardiness of young adults who have survived such childhood conditions and thrived is apparent. Resilience is closely linked to the individual's ability to use resources in the environment, relationships with others as well as his internal resources to select progressive and potentially health promoting behaviour (Varvin, 2007). There are untapped areas of research in the broad field of exposure to domestic violence and its impact on young adults in South Africa. In particular, a psychoanalytic study that focuses on the possible developmental trajectories of young

adults who demonstrate adjustment to life in general, despite backgrounds of domestic violence, may highlight theoretical understandings that could be of clinical relevance.

Relatively little is known why some children are intensely affected by domestic violence, carrying scars into adulthood while others emerge intact and are resilient (Laing, 2000). There are probably different answers for each individual regarding the foundations of their resilient outcomes. Ultimately, the capacity to experience suffering without denying it or being debilitated by it in adulthood presupposes a more positive prognosis.

Although there are overlaps in young adults' experiences of domestic violence it would be erroneous to assume that impact and outcomes are predictably similar for all (Holt et al., 2008). After all, individuals differ in the manner in which they experience, process and assign meaning to events in their lives (Denham, 2008). The answers to these questions are therefore explored in this research. This context also provides a suitable forum for participants to voice their experiences and promotes the breakdown of barriers of silence that often surround family violence (Anderson, 2010), particularly in South Africa.

Although this study partly arose out of the researcher's own experience of domestic violence in childhood, it also emerged from the researcher's professional work with many university students who had been exposed to domestic violence in childhood and despite their emotional pain and inner struggles, did not appear to be extensively psychologically debilitated or pathologically disturbed. They were often able to discuss their experiences with moderate coherence and were open and acknowledged their, at times, difficult relationships with their parents and their ongoing conflicts. This experience suggested that there are alternative pathways of development for children in violent families and that the reality of exposure to interpersonal trauma is not always as predictable as the literature may tend to suggest.

Due to these observations, this psychoanalytically framed research study emerged as a viable way of presenting clinical case studies which illustrate the unique experiences of several university students (not clients of the researcher) who have been exposed to domestic violence in childhood in terms of their object representations of self and others, their attachment states of mind and their SOC. Although the primary focus of this study is rooted in object relations and attachment theory, the exploration of resilience and fortitude provides a complementary, balanced perspective which highlights particular responses to interpersonal trauma, the relationship contexts of participants and areas of adaptive functioning in adulthood. The combination of these two perspectives (psychoanalysis and resilience) together with the personal narratives of participants provides a refreshing approach to the examination of individual experience of trauma in childhood and highlights areas that are often neglected in studies in this area, such as the person's unique experience of their mother and father and insight into the child-parent relationship.

Since this study aims to explore the impact of experiences in childhood, a developmental focus was used which positions self-development within a context of caregiving relationships. Attachment and object relations theories, which speak strongly to the developmental origins of self within early relational experiences, were used as theoretical frameworks to contextualise the personal spaces of emerging young adults who have grown up in environments of domestic violence. Salutogenesis, as a theory addresses the relevant issue of inner resilience and use of resources by individuals to improve the quality of their personal worlds and as such, this viewpoint forms an integral part of this study. Although the integration of the theoretical frameworks of Attachment theory, Object Relations and Salutogenesis may be perceived as unusual in research, there are interesting overlaps as well as distinct areas of difference in these theories, which can serve to enhance each point of view rather than detract from them.

The use of the Adult Attachment Interview (AAI: George, Kaplan & Main, 1985), the Orientation to life Questionnare (OLQ: Antonovsky, 1987) and the psychoanalytic research interview (Cartwright, 2002) as cooperative methods of data collection are also not commonly found in research studies of this nature and highlights this study as a new and informative attempt to provide comprehensive information on this particular topic within the broader framework of domestic violence. It should be noted that the OLQ or SOC-29 is predominantly used in quantitative research (McCubbin, Thompson, Thompson & Fromer, 1998) and seldom features in qualitative enquiries. Despite this, the three components of the SOC questionnaire are particularly useful in determining individual responses to trauma in terms of exploring inherent resilience and were therefore found to be exceptionally valuable in this study.

1.4 Chapter breakdown

This thesis is comprised of ten chapters which demarcate and identify the body of work involved in this South African research study.

Chapter two clarifies the rationale for this study and highlights gaps in the current research on domestic violence. It also points out the aims and objectives of this research.

In chapter three a literature review of research on domestic violence and particularly, on exposure to this in childhood, is undertaken in order to set an historical and current framework for this study. Issues of compromised caregiving by parents involved in domestic violence and effects of such exposure upon individuals are reviewed, in particular, as are protective factors associated with resilience.

Since the emphasis of this thesis lies in the understanding of personal experience of domestic violence from the perspectives of now adult children, through a psychoanalytic lens and with a focus on resilience, chapter four delineates the central, relevant tenets of

object relations, attachment theory and salutogenesis pertaining to psychological development, adaptation and adult intrapsychic and interpersonal functioning.

Chapter five provides a depiction of the research methodology used in the conceptualising of this study, data collection methods and how the analysis of findings was undertaken. This includes a description of the methods and instruments used to gather data such as the Adult Attachment Interview, the Sense of Coherence Questionnaire (or Orientation to Life Questionnaire) and the Psychoanalytic Interview.

The findings of this explorative study are split into three chapters to provide greater structure and for ease of scrutiny given the abundance of data yielded. In Chapter six, four cases are analysed due to similarities in participants' object representations and attachment states of mind. Chapter seven portrays the remaining three cases which are also grouped together by virtue of similarities in depicted attachment states of mind. Chapter eight deals with common or shared themes which were identified across all cases such as exposure to cumulative trauma, separation anxiety, interpersonal responses and themes of resilience.

In chapter nine, theoretical perspectives, current relevant research and the findings of this study are integrated in a discussion which encompasses the intrapsychic and interpersonal space of individuals affected by domestic violence in childhood.

Finally, chapter ten concludes this thesis through provision of final thoughts, proposed areas for further research and a concise appraisal of the limitations of this study.

CHAPTER 2

RATIONALE, AIMS AND OBJECTIVES OF STUDY

2.1 Rationale for the study

Research conducted thus far proposes that the effects of exposure to domestic violence in childhood negatively impact children's development of sense of self and their long-term capacity for secure attachment to others (Henderson, Bartholomew, Trinke & Kwong 2005; Shaver, Mikulincer & Feeny, 2009; Van Den Bosse & McGinn, 2009). Evidence shows that children and adolescents growing up in violent and aggressive families are at an elevated risk for a wide range of psychological, cognitive, behavioural and social problems in adulthood (Levendosky, Bogat, Theran, Trotter, von Eye & Davidson, 2004; Idemudia & Makhubela, 2011; Renner & Slack, 2004;). The list of potential pathology is endless, ranging from internalising and externalising behaviours such as depression, anxiety, physical aggression, acting out behaviours, trauma symptoms, violence in dating relationships, insecure attachment styles, personality disorders etc. (Bryant & Spencer, 2003; Devaney, 2009; Holt et al., 2008; Idemudia & Makhubela 2011; Imhonde, Aluede & Oboite, 2009; Kernsmith, 2006; Osofsky, 2003). This exposure not only affects children across multiple modalities of development but also increases the risk of child abuse (Holt et al., 2008; Osofsky, 2003).

2.2 Gaps in current research

Paradoxically, for all of these outcomes, research which explores the experiences of children and adolescents that have been exposed to domestic violence is not often undertaken (Idemudia & Makhubela 2011), and if it is, it tends to be based on quantitative methodologies which produce statistical generalisations. In doing so the available research focuses predominantly on particular themes. For instance, the rate of prevalence of violence in intimate relationships and its intergenerational transmission (Kernsmith, 2006; Renner & Slack, 2004), the assessment and treatment of women who have suffered domestic violence, (Huth-Bocks; Johnson & Benight, 2003; Levendosky, Lynch & Graham-Bermann, 2000; Levendosky, et al., 2004) and experiences of children removed from the environment and residing in shelters with their mothers (Holt et al., 2008; Johnson, 2009; Margolin & Gordis, 2004; Ohlsson, 2010; Pakman, 2004).

Research with adults that have survived environments of domestic violence in childhood seems to be noticeably scarce. Attention is also focused on children's maladjustment, to the detriment of issues of resilience and survival, pertaining specifically to young adults that have overcome environments of family violence, in various facets of their lives. Individual stories or narratives of experience of children or of young adults in violent family contexts is

rarely explored or documented (Levendosky et al., 2012; Stanley, 2011). Their personal experiences with parents who are involved in domestic violence are not well understood and literary work on this dimension often focuses on the parents' personality deficits (Salisbury, Henning, Holdford, 2009; Stanley, 2011). Levendosky et al., (2000) did investigate mothers' internal representations of their children and the quality of their relationships yet not much is known regarding the adult child's experience of their parents or the relationship between the adult child and caregiver, neglecting the investigation of how attachment and internal representations have been affected or perhaps revised in later years.

Several criticisms have also been levelled at the current research on the influence of domestic violence on children, specifically citing the over reliance on child behaviour checklists which fail to discriminate between distinctive impacts of witnessing violence, as well as the fact that mothers' subjective reports on their children are expected to exhibit limited accuracy (Holt et al., 2008). Studies of this nature also tend to involve children who have relocated and are living at shelters with their mothers, who are possibly manifesting reactions to separation from their fathers and the lack of familiarity to the environment which may augment traumatic symptoms, confounding findings.

Most of the studies also focus on samples of latency aged children ranging from the age of 6 to 12 years of age (Holt et al., 2008), although some studies on the impact on adolescents are beginning to surface such as Evans, Davies and DiLilto (2008) and Idemudia and Makhubela (2011). There are also difficulties in the current research with regards to teasing out effects of factors such as the frequency of the violence, bidirectional violence and severity, all of which may impact differently upon children, adolescents and young adults. The majority of current studies are also not longitudinal (Levendosky et al., 2000).

Emerging young adults exposed to persistent domestic violence during their childhood years, seem to inhabit the shadows of the social science research world despite carrying within them a potentially altered sense of self, but also answers pertaining to resilience and protective factors. Apart from a few research efforts which involve and encourage more diverse, in-depth studies, amongst them Anderson (2010), Van Den Bosse and McGinn (2009) and Waldman (2006), the subjective experience of the South African emerging adult who has been exposed to domestic violence and his/her conceptualisation of childhood and interpretations thereof remains unexplored. This study is purposed to alter and hopefully change this status by beginning to address this gap in research.

2.3 Pathology and Resilience

When research focuses exclusively on pathology, the unfortunate significance for the individual is that this fortifies the protagonist's position of being a powerless victim (Anderson, 2010) and reinforces states of subjective powerlessness in individuals exposed to trauma (Cartwright, 2002). This is what Anderson (2010) refers to as the 'experience of

being without options', when in reality this is not necessarily so. When considering the sample for this study, it was argued that an emerging adult choosing to pursue further education in a university context could hardly be perceived as being out of options. This is particularly relevant regarding a university that maintains more stringent requirements regarding admission than others. It is feasible that students who have been exposed to domestic violence in childhood and yet successfully navigated their first two years at such a university, exhibit some form of resilience or at least a keen ability to think about and learn from experience.

Previous general research on protective and resilience factors, although rare, has produced conflicting results. For instance, a study by Kitzman, Gaylord, Holt and Kenny (2003) suggested that 63% of domestic violence exposed children presented with symptomatology whereas Spilsbury, Kahana, Drotar, Creeden, Flannery and Friedman (2008) found that in a community sample, 69% of the exposed children were without significant clinical symptoms. More to the point, a longitudinal study by Hauser (in Varvin, 2007) conducted around early hospitalized youths who had experienced serious family dysfunction (including domestic violence), demonstrated that they had achieved a relatively satisfying life in spite of their childhood environment, thus demonstrating resilient outcomes. In Hauser's study it was apparent that the resilient youths did not show normative development and that their lives had not been easy, being manifest with unwise choices. Yet what characterized these persons was an ability to learn from past experience. Another study by Kaufman and Ziegler (in Margolin & Gordis, 2004) echoed these same findings and revealed through retrospective studies that 70% of children exposed to violence do not become abusive adults and that the cycle of violence is not inevitable. Still, we are left with statistical numeracy and very little in depth understanding of how this is so.

2.4 Psychoanalytic case studies

The most pertinent question that arises from this situation is: Are developmental trajectories always so clear cut? The value in studies such as this one lies in the recognition that there are untapped areas of research in the broad field of exposure to domestic violence and its impact on young adults in South Africa. In particular, a psychoanalytic study that focuses on the possible developmental trajectories of young adults who demonstrate adjustment to life in general, despite backgrounds of domestic violence, may highlight theoretical understandings and serve as a point of departure for further research that may inform practice. Also, it is important to consider that although maladaptation may be more apparent in certain individuals than in others, this does not preclude the presence of adjustment and good enough functioning in various facets of that person's life such as academic performance and/or relationships.

The evidence supporting the need for a different approach to research on exposure to domestic violence and development is therefore substantial. Purely quantitative research, although undoubtedly valuable, would be ineffectual in this particular case since it would

undermine the phenomena reducing it to measurement and trivialising the complexity of personal experience (Hollway, 1989). Therefore, a rigorous case study research method based on participants' accounts of their experiences, explored through both structured and unstructured dialogues would address the complexity and uniqueness of people as well as offer a more comprehensive understanding of the human experience (Hollway, 1989; McAdams, 2006), particularly at this specific stage of development.

According to Mishler (in Riessman, 2001) stories are used by people to make sense of the incoherence of trauma and how this influences the development of self. Hesse and Main (2000) have also explored the significance of narratives and the coherence thereof in relation to adults' attachment states of mind. McAdams (2006) highlights the integrative power of people's stories in restructuring the past and the perceived future, thus creating a sense of meaning and purpose which can defy the expectation of 'personality disturbances'.

Emerging adulthood is a crucial developmental phase because it allows for the person to reflect on their own family experience and to make crucial decisions about plans for the future while developing a, still malleable, coherent sense of self (Schwartz & Finley, 2010). Thus, a narrative analysis of these young adults' stories may allow for a focus on how they have managed to integrate experiences of domestic violence into their identities and self-concepts in ways that have been useful for them, or perhaps how they have failed to do so. University students, in particular, may find themselves in a transitional space where they are not yet in a committed partnership such as marriage or parenthood, being pre-nuclear family, so to speak. An exploration of this transitional space could provide a wealth of information on how a sense of self develops as childhood experiences are integrated prior to major and more permanent life decisions being made.

As psychoanalytic studies involve the intense examination of human lives, the psychoanalytic narrative is particularly useful here (McAdams, 2006). It is essentially construed out of a shared space between researcher and participant constituting conscious and unconscious mental representations, transference and countertransferance (Hunt, 1989; Parker, 2003). This method of inquiry facilitates dialogue on how participants make meaning out of their lives without limiting them to what may be considered useful or relevant in research. Through the use of object relations and attachment theories this study hopes to facilitate a deeper understanding of the research material. The use of Antonovsky's (1987) SOC premise also addresses the dimension of resilience and adaptation. This study will further seek to make new links between the coherence in narrative, emphasised in the AAI (George, Kaplan & Main, in Hesse, 2000), with Antonovsky's concept of SOC in his theory of salutogenesis. As far as the researcher is aware, this will also be first time that the AAI is directly linked to a SOC framework in a study that explores the internal representations of young adults exposed to domestic violence in childhood, in South Africa.

It is evident that domestic violence exposure negatively affects children, adolescents and adults. In this particular project the researcher will look at theoretical assumptions in the

field and at how these apply and coincide, or perhaps do not, with the experience of participants who have volunteered for this research inquiry. An attempt will also be made to identify possible mediating factors that produced resilience in these particular participants, incorporating both intra-psychic and interpersonal elements, which should in the long run be reviewed and tested by further research and possible applicability to larger samples in terms of socioeconomic backgrounds and different levels of education.

2.5 Aims and Objectives

Ramphele (in Waldman, 2006) quite aptly states that "...the complexity of the lives of ordinary people defies tidy concepts" (p. 44). This study would therefore seek to overcome the tendencies which may simplify the individual's internal experience.

True to qualitative case study research, this study would seek to explore the following aims:

- The assigned meaning and understanding that the individual has of his/her childhood experiences with domestic violence
- To explore how this has influenced their internalised mental representations, search for self and connectedness to others.

The following objectives are also considered:

- To determine how the emerging adult has moved along the continuum of a sense of well-being and pathology, after experiences of domestic violence in childhood.
- To determine the coherence of the individual's life story which also reflects the quality of their attachment and relationships with others, and an analysis of the way this story is told becomes crucial to evaluating this coherence.
- To determine the intrapsycic and interpersonal experiences of such individuals.
- Lastly, this study seeks to determine the ways that these young adults have survived and found meaning in their experiences.

Therefore attention will be paid to how they resisted⁵ environments of oppression in childhood, specifically that of the experience of domestic violence in the home, or how have they not, and the perceived impact upon their 'sense of self' and their outlooks on their lives.

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⁵ Resistance in this context is analogous to life affirming energies and to opposition to oppression and its consequences. It is not equivalent to the term used within psychoanalytic circles where it is synonymous with barriers to therapeutic progress and to the emergence of unconscious material in therapy sessions.

By exploring the complexity of lives lived, it is hoped that this study will enhance understanding, provide a safe space for recollection and contribute towards new avenues of thinking and dialoguing about the topic.

CHAPTER 3

LITERATURE REVIEW

3.1 Introduction

A great deal seems to be known about the long term psychological detriments of exposure to domestic violence in childhood yet not a great deal is currently documented about the personal experiences of individuals in such contexts (Stanley, 2011). This appears to be a somewhat incompatible arrangement since it is these individuals' experiences which can add knowledge and better inform preventative measures, community intervention and individual treatment in cases of family violence. Exposure to domestic violence is also an intensely personal experience because it happens in the context of close relationships and within the framework of the child's complete dependency upon his/her parents/ caregivers.

Therefore, in this particular study the term 'domestic violence' has been chosen, as an alternative to other terms which refer to the same phenomenon, in order to convey the deeply personal nature of growing up within a violent family and the environment that children, in these contexts, are exposed to. It is common for researchers on this topic to use the term intimate partner violence which is perceived by the researcher as focusing exclusively on the violent couple to the exclusion of other family members exposed to the violence. Alternatively, domestic violence, as a term, is seemingly more inclusive of the entire family's experience and of the personal context of the family as being 'domestic', and is thus the term of choice for this research study.

Because domestic violence often entails physical, psychological and emotional harm (Buchanan, 2008; Langhinrichsen-Rohling, 2005; Semple, 2001) it became important to initially but briefly address general concepts around violence, aggression and destructiveness, in relationships, as a precursor to the examination of exposure. Domestic violence is prevalent globally, although South African rates of this, in particular, remain alarming (Davhana-Maselesele et al., 2009; Idemudia & Makhubela, 2011; Vetten, 2005). Prevalence rates are therefore part of this discussion followed by a detailed definition of children's exposure to domestic violence. The effects incurred by such children, intrapsychically and interpersonally, at different levels of development and into adulthood are the focus of this study and as such are considered next. It was noted that most of the research seems to address this from a largely pathological lens, focusing on the detrimental effects it has on family relationships and child development, and this is perhaps due to the fact that domestic violence is inherently pathological. This review of the research on effects of exposure is thus followed by an exploration of the intergenerational transmission of violence and of societal, gendered and cultural factors which contribute towards perpetuation of domestic violence in South Africa. Because individuals are also perceived to be inherently capable of resilient responsiveness under trauma (Antonovsky, 1987; Walsh, 2003) and due to the fact that this seems to be a largely neglected area of research in domestic violence, a discussion on protective factors as well as an introduction to the concept of SOC, as engendered by Antonovsky (1979, 1987), concludes this literature review.

3.2 Violence, aggression and destructiveness

Yakeley and Meloy (2012) define violence as behaviour which involves the body and which crosses body boundaries where physical injury may occur. With regards to aggression and destructiveness however, words and threatening behaviour can be clearly used to emotionally break down another person and possibly control them (Semple, 2002). For instance, verbal threats towards a parent, the child or even a pet may form part of the context of domestic violence. Violence, aggression and destructiveness are therefore perceived as forming part of the dangerous cocktail of the family characterised by domestic violence.

Many authors maintain that violence in particular has symbolic meaning and is usually a response to environmental trauma and loss (Fairbairn, 1952; Winnicott, 1971). There are others, such as Melanie Klein (1932), who regarded violence as being predominantly instinctual rather than simply a response to trauma. These views are not deemed to be necessarily incompatible in this study. Aggression, destructiveness and violent capacities are believed to be existent in all individuals but perhaps become particularly disturbed and disturbing states of mind in contexts of persistent trauma and traumatic loss. ⁶

What is of particular relevance to this study, however, is the impact of such disturbance to the internal representations of the child exposed to domestic violence within the context of caregiving by individuals involved in this. From a psychoanalytic viewpoint, when the object taken in by the child cannot tolerate emotional experience, is overwhelmed, unprotective or malevolent, the child is likely to experience difficulty in internalising a good, robust object that makes emotion not only tolerable, but understandable. It is therefore likely that domestic violence, in whatever form, consequently complicates the internal representations that develop in the individual. The difficulty, however, in understanding the true impact of domestic violence lies in narrowing down its specific effects since it is a complex phenomenon that appears to be widespread. What this implies is that although the overall effect of domestic violence is assumed to be inevitably traumatic, individuals react to such trauma differently, therefore making some generalisations about such effects potentially unreliable.

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⁶ Fonagy (2003) for instance perceives violence as being unlearned by security of attachment. This study does not intend to unravel opposing views of where violence and destructiveness originate, but is predominately concerned with the effects of such violence on those exposed to this within their families.

3.3 Prevalence

Africa appears to remain a continent in crisis with regards to the abuse of women and children within contexts of domestic violence. This observation is made in relation to the current statistics indicating prevalence rates of domestic violence of 46% in Uganda, 60% in Tanzania, 42% in Kenya, 40% in Zambia and 81% in Nigeria (Idemudia & Makhubela, 2011).

In South Africa 25% of women are assaulted by their boyfriend or husband at one time or another and suffer domestic violence on average 35 to 39 times before seeking outside intervention (Davhana-Maselesele et al., 2009; Idemudia & Makhubela, 2011). Domestic violence is one of the most common crimes in this country despite the statistics being unreliable due to under reporting as well the incompetent ways such cases are handled by the authorities (Vetten, 2005). However, a community based study by Jewkes, Penn-Kekana, Levin, Ratsaka and Shcrieber (1999) revealed that 26,8% of women in the Eastern Cape, 28,4% of women in Mpumalanga and 19,1% of women in Limpopo had experienced physical violence by a current or ex-partner. This violence often takes place in the presence of children and adolescents who reside with their parents (Idemudia & Makhubela, 2011).

In the period 2008-2009, 15 307 cases of domestic violence were reported in Gauteng and 12 093 of these cases involved a female victim. A national survey conducted in 2010 by the Medical Research Council (MRC) in collaboration with Gender Links revealed that, of the 998 men and women interviewed in Gauteng (Machisa, Jewkes, Morna & Rama, 2011):

- Almost 80% of the men admitted to perpetrating some form of violence against women.
- The most common form of violence against women was emotional abuse such as being insulted, intimidated, threatened with violence or humiliated in the presence of others.
- Women were also commonly isolated and were stopped from having access to their friends or families.
- Women were frequently exposed to their partners' boasting of or bringing home other women.
- Physical violence was the second most common form of violence reported but most of the women in the sample suffered more than one form of abuse in their relationship.

Although current and up to date statistics on prevalence in South Africa are notoriously scarce, domestic violence in this country appears to be most prominent in the 21-25 years age group (Hoque, Hoque & Kader, 2009) but this could be due to the fact that younger South African women may be more likely to report an assault by their partner than older women, who may be more traditional in their view of marriage and marital violence. In a sample of 340 randomly selected pregnant women in rural SA, 31% reported experiencing domestic violence. In Botswana, the prevalence of domestic violence in the population is

nearly 50% but the prevalence of reported cases to the authorities is only 13,2% (Zungu, Salawu & Ogunbanjo, 2010). Considering that domestic violence, in whatever form, is underreported in this country as well, the prevalence rate in South Africa could potentially be similar to that in Botswana.

Sometimes men are victims of domestic violence, although the pattern and motivation of female perpetrated violence is different from that of male violence (Williams, Ghandour & Kub, 2008). By far, the vast majority of victims are women as well as children who are exposed to violence within the family home (Holt, Buckley & Whelan, 2008; Park, Fedler & Dangor, 2000). The emotional and physical impact of such abuse is therefore likely to be greater for women and children.

Despite many parents negating the fact that their children are aware of violent incidents between them, most children are present when such violence occurs and are aware of after effects such as injuries, broken furniture and palpable tension (Lieberman, 2007; Ohlsson, 2010). Van Den Bosse and McGinn (2009) define exposure to domestic violence as being within sight or sound of violence but also as including forcing the child to watch assaults or to participate in the abuse and even using the child as a spy through interrogation about the mother's activities. However, exposure may extend further than this. In a recent research study conducted in Sweden it was reported that 95% of children were present during domestic violence altercations, 77% were present in the same room and 62% had sustained injuries themselves during the abuse (Ohlsson, 2010). An example from a local South African newspaper, the Sowetan, on 12th September 2011 speaks to the exposure of South African children to domestic violence in the home. In the reported case, Bossie Phungula admitted to stabbing his wife 5 times before pouring petrol over her and setting her alight. All this was done in front of their children and domestic worker. Phungula's wife, Annie, died four months later due to her injuries and despite medical assistance. He walked free, apparently due to a 'lack of evidence' (Machisa, 2011).

Since domestic violence is not an isolated experience but occurs amongst other types of adversity such as poverty, parental substance abuse and mental illness it remains imperative to keep this context in mind when researching the topic (Widom, 1989). For children growing up in such environments the long term repercussions could therefore be considerable (Devaney, 2009; Holt, et al., 2008; Margolin, 2005). Yet they are often referred to as the bystanders, as if indirectly related to the trauma (Holt et al., 2008; Ohlsson, 2010). It has also been reported that children who witness and experience such violence are seldom the focus of research (Idemudia & Makhubela, 2011).

Children's exposure to domestic violence remains a complex and recurrent worldwide phenomenon. Research by the World Health Organisation estimates that in the year 2002, 31000 children under the age of 15 years died globally as a result of domestic violence (Lepisto, Luukaala, Paavilainen, 2011). A Canadian study at a general hospital revealed that 59% of children injured during a domestic dispute were below the age of 2 years and were

being held by their mother at the time of the assault (Laing, 2000). Although it is estimated that in South Africa 1 in 4 women experiences domestic violence, this prevalence doubles for women between the ages of 17 to 23 years (Abrahams & Jewkes, 2005), this being the beginning of child bearing years for many South African women. Conclusive research on the rate of exposure to domestic violence by South African children does not seem to be regularly undertaken (Abrahams & Jewkes, 2005), yet it seems reasonable to deduce from prevalence rates that this estimate must be of considerable proportion. It is estimated that between 3 and 17.8 million children worldwide, are exposed to at least one incident of domestic violence each year (Idemudia & Makhubela, 2011). Unfortunately, children who are exposed to this are seldom the focus of domestic abuse research in Africa (Idemudia & Makhubela, 2011) as are the long-term effects on these children as adults.

In some countries family law has made provision for children's opinions and views to be considered in legal disputes pertaining to family violence, yet, according to Eriksson (2009) this approach is not often put into practice. The classification of domestic violence as a form of child maltreatment in the new South African Children's Act could be perceived as a step forward in intervention, yet in cases where social workers do intervene often it is the child who is removed and has to adjust not only to a new living arrangement but to new caregivers and very often, to a new school, leaving behind all that provided a semblance of security and familiarity⁷ (Park, et al., 2000). Domestic violence is not only child abuse, but it is also a predictive risk factor (Devaney, 2009; Holt et al., 2008) and the research conducted thus far mitigates for it being both.

Exposure to domestic violence is documented as being profoundly harmful to children with potentially long lasting adverse effects and in the last 30 years international researchers have begun to demonstrate some interest in exploring this impact (Idemudia & Makhubela, 2011). Children may also be indirectly negatively affected due to the impact that domestic violence may have on the quality of parenting and availability of the caregivers to meet the child's needs under such circumstances (Levendosky et al., 2012; Stanley, 2011).

3.4 Definition of exposure to domestic violence in childhood

Physical violence is often perceived as being the dominant factor in domestic violence, however researchers are becoming aware that such exposure encompasses much more, such as, for instance, different forms of psychological and verbal abuse which also present as critical variables in this area (Langhinrichsen-Rohling, 2005). In addition, the presence of psychological abuse occurring within the first 18 months of marriage has been shown to predict physical aggression in the relationship one year later, increasing the likelihood that

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⁷ The researcher was often made aware of such arrangements between families, South African courts and social workers, particularly in the context of the researcher's work with children in residential care in Johannesburg, SA. Children were often removed from abusive home situations while the abuser remained in the home.

children will be exposed to escalated violence at some point in the relationship (Langhinrichsen-Rohling, 2005).

In turn, psychological abuse has been found to correlate with and to be a precursor to physical assault and there is also evidence that it is just as damaging to the psychological well being of the individual as physical abuse (Henderson et al., 2005). Furthermore psychological abuse seems to be predictive of relationship deterioration and is considered to be an ongoing pattern of behaviour that causes fear in the recipient (Semple, 2001). It may be composed of emotional abuse such as humiliation, undermining of the self-esteem of the partner or perfectionistic and unrealistic demands and it may also include elements of physical isolation, jealousy, possessiveness and intimidating behaviours. Often violence is also threatened against property, pets or other significant persons to the recipient as well as attempts to remove children, verbal attacks and economic control. This further highlights the extent and excessiveness of rage and anxiety potentially experienced by violent couples and in turn elicited in their children.

Buchanan (2008) defines domestic violence as ongoing physical, financial, social and/or sexual abuse which is used to exert control by one partner on another in an adult relationship. She further considers this to endanger women's mental and physical safety but the reality is that it endangers children's physical and mental safety too. The research also suggests that there is a strong correlation between family violence and the physical and sexual abuse of children (Gewirtz & Edleson, 2004; Herrenkohl, Sousa, Tajima, Herrenkohl & Moylan, 2008). Studies on this topic yield a median co-occurrence of 41% between child abuse and domestic violence, making it difficult to disentangle the two variables.

Duration, intensity and frequency of domestic violence pose certain risks to children. Lower intensity of violence and reduced frequency have been associated with fewer maternal mental problems and therefore with better emotional regulation in children as well as with better social skills (Howell, Graham-Bermann, Czyz & Lilly, 2010).

Holden (2003) developed a taxonomy of children's exposure to domestic violence which posits possible levels of exposure and experience thereby giving rise to differing responses in children. However, this taxonomy has been critically appraised by Stanley (2011) due to the fact it only takes into account physical assault to the exclusion of psychological abuse as well the impact of exposure to acts of cruelty that are imposed upon the mother other than physical abuse. Despite this, Holden's taxonomy is useful in categorising possible areas of exposure that allow for an enhanced understanding of children's experiences within the domestically violent home and as such will be included below.

EXPOSURE TYPE	DEFINITION	EXAMPLE
Prenatal exposure	Real or imagined effects on the developing infant	Pregnant mother lives in fear, infant assaulted in utero
Intervenes	Child verbally or physically attempts to stop the assault	Attempts to defend the mother, asks parents to stop
Victimised	Child is verbally or physically assaulted during the incident	Child is intentionally abused, child is accidentally hit
Participates	Child is forced or voluntarily joins in the assault	Coerced to participate, used to spy on mother, joins in the abuse of the mother
Eyewitness	Child directly observes the assault	Watches physical assault or is present during verbal abuse
Overhears	The child overhears the assault but does not see it	Hears yelling, threats, breaking objects
Observes initial effects	Child sees the immediate consequences of the assault	Sees bruises or injuries, police, ambulance, damaged property, intense emotions
Experiences the aftermath	The child experiences changes in their life as a consequence of the assault	Experiences maternal depression, change in parenting, separation, relocation
Hears about it	The child is told or overhears conversations about the assault	Learns of the assault via the mother or a sibling, relative or someone else
Ostensibly unaware	Child does not know of the assault	Assault occurred away from the home or when the child was away from the home

(Holden, 2003, p. 152; Stanley, 2011, p. 28)

Holden, (2003) specifically defines exposure to domestic violence as involving a multitude of factors which are considered in greater detail below with relevance to the South African context in particular. For instance witnessing refers to incidences taking place in front of the child especially where living quarters are cramped such as one roomed houses in some townships or through overhearing sounds of violence in the next room or through witnessing it outside in the presence of other members of the community.

Intervening refers to children placing themselves in harm's way in an effort to protect the mother⁸. This is often the case with older school age male children or adolescents (Kubeka, 2008) but may also include very young children (Kitzman, Gaylord, Holt & Kenny, 2003).

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⁸ Research studies are emerging which comment on the fact that either parent can take on the role of the abuser (Williams, Ghandour & Kub, 2008). Currently, however, most reported cases of domestic assault appear to be perpetrated by males. Therefore, for the purposes of this study the term 'mother' will be used when referring to the abused parent and father when referring to the perpetrator.

Victimisation includes children being verbally and physically attacked themselves or being caught in the middle of the dispute when objects are being thrown and the child might be used as a shield. Sometimes these assaults on the children are intentional ways of intimidating the mother and at other times they are accidental. Some mothers are assaulted with weapons such as knives or guns (Abrahams et al., 2009; Holt et al., 2008) and the child is seriously injured when they attempt to intervene or as an act of revenge on the mother.

Observation of after effects such as bruises, broken furniture, hospitalisation and police involvement also form part of exposure. Domestic assault in SA may be particularly violent in some cases, as seen in the high rate of intimate femicide in the country (Davhana-Maselesele et al., 2009; Vetten, 2005) as well as the ease of availability of weapons in South African society. As a result, many SA children may witness the attempted murder of their mother or even the culmination of the act. Caregiving forms part of exposure in that it is synonymous with looking after the injured parent or siblings and includes the experience of the break- up of the family unit and/or relocation in cases where the parents separate.

Single parent households are common in SA and in cases where the mother has left the father due to domestic violence, this may be accompanied by a serious loss of income and economic deprivation (Park, et al., 2000). The mother and her children are also in danger of becoming homeless as a result and of incurring further 'punishment' from the abuser for leaving. Sometimes children are abducted by the abuser and in other cases the woman is murdered by her partner for making attempts to leave the abusive relationship (Park et al., 2000; Vetten, 2000).

All of these factors may have considerable impact on the child's ability to develop a strong sense of self and in terms of regulating emotions, concentration at school and social competence. Imbedded in domestic violence is relational trauma for the child exposed since it involves the deep sense of loss of security, normalcy and physical and psychological safety (Huth-Bocks, et al., 2004). This is especially the case since domestic violence is usually chronic, tends to escalate and is unpredictable despite its repetitiveness.

Of necessity, the impact of exposure to domestic violence has largely taken on a pathological focus in the literature, due to associations made with cumulative trauma and potential harm to the individual in the long run. Such empirical findings will therefore be discussed first. However, themes of resilience and coping despite trauma will also be explored throughout this thesis to provide a more relevant and balanced exploration of alternative developmental pathways for the young adult who has experienced domestic violence in childhood.

3.5 Effects

Children are negatively impacted by familial violence both directly and indirectly. They are the direct victims of exposure through witnessing the conflict and violence as well as its sounds, after effects and consequences (Holden, 2003). Very often children are also physically hurt during the altercations between parents. They are impacted indirectly because domestic violence reduces the quality of the parenting of both the mother and father as well as the stability of the relationship between the parents (Stanley, 2011).

Domestic violence is known to have long-term effects on child witnesses, the gravity of which is indicated often by its duration and severity (Fonagy, 1999a). Tacit societal approval of such violence facilitates this and may ensure that possible patterns of intergenerational transmission which have developed, are perpetuated. However, intergenerational transmission is not a complete explanation as it does not account for men who are violent and yet never witnessed domestic violence while growing up (Fonagy, 1999a). Likewise intergenerational transmission fails to account for individuals who have witnessed domestic violence and do not repeat these patterns in adulthood. Therefore the intra-psychic dynamics of different types of individuals necessitates evaluation and insight because it suggests that the origin of domestic violence and its maintenance is complex and far from being fully understood (Dutton, 1994).

When contextualising the possible impact of domestic violence on children raised under these conditions, an in-depth understanding of the possible effects of exposure becomes necessary. This assists clinicians and researchers to understand and address the milieu that children are exposed to in their developing years and consequences upon their internal world, and can serve to validate the experience of the child brought up in domestic violence and who becomes the young adult, and happens to be the subject of this particular study.

In this chapter domestic violence is viewed primarily through the lens of maladaptation and this is necessarily so because domestic violence is deemed inherently pathological and because there is a need to understand how it affects child rearing. However, this does not make intergenerational patterns of domestic violence inevitable, only possible.

3.5.1 Parenting in contexts of domestic violence

Traumatic outcomes for children exposed to domestic violence have been found to be mediated by decreased parental warmth and caring (Knutson, Lawrence, Taber, Bank & DeGarmo, 2009). In order for the consequences of exposure to be better understood, it is therefore essential to consider the effect that domestic violence may have on parents' quality of parenting and attitudes towards fulfilling the child's needs.

a) Mothering

Domestic violence hurts everyone within the family with severe negative consequences to victims, including the mother and her perception of the unborn infant and capacity to parent the developing, growing child. Part of these consequences may be a lowered sense of competence in the woman (Davhana-Maselesele et al., 2009). Davhana- Maselesele et al. (2009) report on the painful experiences encountered by Limpopo (Northern South African

province) women living with domestic abuse. Some of these include physical injuries, emotional trauma, financial problems, spiritual emptiness and social isolation.

Many of the women in the above South African study reported having to seek medical attention for broken bones or other injuries, including miscarriages, as a result of the violence. Emotional trauma often included pain associated with frequent verbal attacks leading to strong feelings of shame, anger, fear and self-recrimination, as well as the experience of not being taken seriously when attempting to discuss this. Some reported deep feelings of humiliation and loss of dignity. One respondent stated: "...I feel so small, I was beaten naked in front of my children and the community" (Davhana-Maselesele et al., 2009, p. 2526). Victims of domestic violence may also depict a lowered self concept and diminished sense of self-efficacy leading to depression, substance abuse and even suicidal thoughts. These women often did not have any control over their finances, over whether to go to church or not, since this was decided by their husband, and were prevented from having contact with their family members and friends. Undoubtedly, all of these factors may negatively and seriously impact the quality of mothering provided by the victim of such violence and control. Living under such conditions makes it near impossible for mothers to manage caregiving and household tasks (Stanley, 2011). Coupled with sleep deprivation (Humphreys, Lowe & Williams, 2009) and possibly self-medication, parenting capacity is restricted and this is notwithstanding the need to placate the abuser to avoid further violence, which essentially places children's needs second (Stanley, 2011).

Another concerning factor for abused women is the sense of isolation which may be present by overt control imposed by the violent partner and consequent separation from social supports such as family and friends (Stanley, 2011). This contributes to the lowered psychological functioning of the mother and may, of course, be perpetuated when the mother and her children leave the violent situation and are relocated.

On a more intra-psychic level, relatively few studies have focused on the parenting beliefs and practices of women living in contexts of domestic violence (Haight, et al., 2007). The mother's internal working models of self and other are certainly perceived as impacting on her quality of caregiving and even on her prenatal representations of the infant during pregnancy. This is therefore an area deserving of greater attention and exploration. There is evidence that suggests that women's quality of caregiving suffers and is diminished in environments of domestic violence (Haight, et al., 2007; Huth-Bocks et al., 2004; Stanley, 2011). However, there are also indications that, in general, abused women's parenting beliefs and practices are similar to those of other women in the same community (Haight et al., 2007) and that mothers' parenting can recover in the absence of domestic violence (Stanley, 2011).

A compelling study by Huth-Bocks, et al., (2004) revealed that the mother's own experiences in relationships influence the specific representations that they develop of their infants in the gestation process. This is relevant not only for the quality of attachment

developed between the mother and child but also for the quality of attachment developed by the second generation of women who have been exposed to domestic violence in childhood and have become mothers.

Pregnancy is a time during which the woman's old psychological conflicts are revived and during which her relationship with her own mother is reorganised. It is also during pregnancy that the mother develops attitudes of her developing infant (Crawford & Benoit, 2009; Crowell& Feldman, 1989; Huth-Bocks, et al., 2004). Stern (in Huth-Bocks et al., 2004) suggested three sets of representations which seem prevalent for the pregnant woman. These were representations of her own mother and of her own attachment experiences, representations of her infant and representations of herself as a mother.

These attachment representations will therefore impact and may predict the infant-mother attachment after birth (Huth-Bocks et al., 2004). This premise has been supported by other studies including that of Slade and Cohen (in Huth-Bocks et al., 2004), where mothers in their sample conceptualised and organised their relationship with their babies during pregnancy in ways that were similar to the way they conceptualised their relationships with their own mothers. This implies that the woman's own previous traumatic experiences and insecure attachment will have a bearing on her mental representations of herself as a mother and of her infant.

Domestic violence as a chronic experience in the pregnant woman's life will tend to further negatively impact these states of mind. In itself it induces trauma which is essentially unresolved due to its repetitive nature and may possibly reactivate past traumas, fear, helplessness and un-integrated representations. The mother's state of mind with regards to attachment is impacted leading to problematic caregiving behaviours such as withdrawal and emotional disconnection. This is because she may be responding to her partially dissociated and frightening experiences (Huth-Bocks et al., 2004; Levendosky et al., 2012).

The infant may be perceived as threatening and to invoke aspects of the trauma associated with her partner (Huth-Bocks et al., 2004). Even harmless acts by the infant such as movement may trigger the attachment system and dysregulated emotions if these resonate with her experiences of trauma. The women in the study who had experienced domestic violence tended to perceive their infants in less open, coherent and sensitive ways and tended to see themselves as less competent caregivers than the women who had not been in violent relationships. They also expressed more negative feelings such as anger and depression while talking about their infants. Their attachment style to their infant was also more likely to be classified as insecure (Huth-Bocks et al., 2004).

In domestic violence contexts where miscarriage may be a consequence of the violence, a woman's capacity to parent and protect her living children may be further compromised by the undermining of her perception of herself as an adequate caregiver and competent mother.

Haight et al. (2007) report on how children depend upon their relationships with their parents in order to have experienced trauma mediated and processed. Yet evidence suggests that some abused women have distorted beliefs about domestic violence and use denial and minimisation as defence mechanisms in order to cope within violent relationships. Although these are necessary conditions for their own survival this may also block positive change and support of their children's psychological recovery (Haight et al., 2007). Mothers may also internalise undermining and berating messages from their partners and lose confidence in their parenting skills (Stanley, 2011). In some cases the children are drawn into unhealthy alliances against the mother by the abuser making discipline extremely difficult. Research suggests that domestic violence impacts negatively upon the woman's ability to develop authority and control over her children and in some cases results in physical aggression by adolescents towards their parents (Holt et al., 2008).

Some women who have experienced domestic violence also project negative characteristics of their partner or of themselves onto their children (Haight et al., 2007). This phenomenon has also been observed and documented by Huth-Bocks et al. (2004) as mothers may perceive their children as being helpless victims like themselves, needing their children to identify with their pain. Alternatively they may perceive their child as aggressive and violent like their partner (Levendosky et al., 2012), despite the behaviour of the child being age appropriate, thus distorting the child's anger. Consequently such maternal representations have a strong influence on the child's representations of the mother and on the child's developing sense of self (Huth-Bocks et al., 2004).

Alternatively, some mothers do reassure their children after violent incidents and provide emotional support for their children as much as possible (Haight et al., 2007). In Haight et al. (2007) mothers emphasised the necessity to reassure their children that they are loved and provided clear information regarding prevention of violence in their own futures, instilled hope and freed the children to love their fathers. Mothers do describe making conscious efforts to protect their children and their parenting from the effects of domestic violence (Stanley, 2011). This suggests that even though they may struggle to do so, these mothers do recognise the need to protect their children.

Of concern however, is the fact that some mothers tended to normalise the abuse, suggesting that violence is a legitimate response to interpersonal conflict. Some mothers also threatened their children after an altercation between the parents and made excuses for their partner's violence (Haight et al. 2007). Some women involved in domestic violence do acknowledge their own difficulty with keeping control when disciplining their children and admit engaging in abusive behaviour towards their children (Stanley, 2011). This often takes place in contexts of fear, the mother and child's heightened behaviour and sometimes after children's abusive behaviour towards their mother. The extensive use of physical punishment as a mode of discipline by abused women on their children is not uncommon (Holt et al., 2008) although this has been found to decrease substantially as women move

away from the abusive relationship and the domestic violence ceases (Gewirtz & Edleson, 2004). Women who have experienced recent domestic violence also tend to report higher rates of physical aggression and neglectful parenting towards their children (Stanley, 2011). This is also true when comparing the parenting of women who have experienced domestic violence to those who have not.

A study by Levendosky and Graham-Bermann (2000) suggests that the experience of domestic violence is associated with a reduction in warmth in parenting but not in authoritative discipline by the mothers. Stanley (2011) also reports that children appear to interact less positively with mothers who have been victims of domestic violence than those who have not. Depression and traumatisation remain risk factors for women experiencing abuse as this compromises the mother's psychological functioning, thus negatively impacting the quality of her parenting (Levendosky et al., 2012). It is important to acknowledge that some women may very well be too traumatised by the violent incidents to be able to relate to and speak to their children about domestic violence in a comprehensive manner (Haight et al., 2007).

The fact that family dysfunction lowers the likelihood of positive discipline, warmth and nurturing behaviours by the parent towards the child as well as consistency in the parents, is documented in the literature (Stanley, 2011). However, there is also evidence that mothers whose children are exposed to the domestic violence, may seek to compensate for these experiences with increased sensitivity and levels of care. In a US study by Casanueva, Martin, Runyan, Barth and Bradley (in Stanley, 2011), mothers who had left their domestically violent relationship scored slightly higher on parenting measures than those who remained in violent relationships.

Overall these women do appear to demonstrate greater insight into the negative effects that the domestic violence has on their children than do the perpetrators as fathers, the latter which is discussed below. Haight et al.'s (2007) research with 17 working class women in violent relationships revealed that the mothers recognised the harmful effects of the violence upon their children's relationships with family members, their own compromised mothering due to trauma, and described their children's traumatised reactions and enduring behavioural changes such as chronic fear responses and internalised distress.

b) Fathering

Research on the parenting style of men who batter is scarce despite many studies focusing on the perpetrator but excluding his role as father (Levendosky, et al., 2012; Stanley, 2011). Some characteristics of abusive men are common to them, despite the expected diversity, and have to be taken into account since these will inevitably affect their ability to relate to others and therefore their ability to parent. Their histories of childhood abuse, high levels of substance abuse and frequency of personality disturbance are factors that impact their

quality of caregiving (Stanley, 2011). Their ability to acknowledge and take responsibility for their violence is therefore key to how they parent their children.

Salisbury, Henning and Holdford's (2009) survey of 3,234 North American men convicted of domestic violence revealed that these men were aware that their children had been exposed to their violence but on the whole failed to acknowledge or understand the negative impact that their behaviour had upon their underage children. Their denial could also be related to states of intense guilt experienced by their own behaviour and therefore rigid attempts at defending against this. This study, nevertheless, draws attention to the lack of reflective thought exhibited by some of these men. Bancroft (2002) draws on his clinical experience when describing the violent father's style of parenting as authoritarian, neglectful and verbally abusive. He also reports on their likelihood to use their children as weapons against the mother and their undermining of the mother's authority within the home.

Their profile types, depicting a need for control, entitlement, possessiveness and use of manipulation, cast doubt on abusive fathers' motivation for seeking contact with their children post separation suggesting that this is merely an attempt to regain control over the mother (Bancroft, 1998; 2002) and in many cases this does seem to be so. Bancroft (1998) suggests that because of perceptual distortions, the abusive father often perceives himself as being the victim, believing that his violence is justified and being drawn to peers who have similar belief systems.

Research on violent fathers depicts them as being individuals with low self-esteem and a poorly developed sense of identity that results in neediness, dependency and a prominent lack of trust in others (Holt et al., 2000). This may tend to overshadow their ability to see the impact of their violence and can undermine their ability to facilitate identity development in their own children.

Bancroft (1998) suggests that violent behaviour is mostly driven by culture and that most abusers do not have psychological problems. Although they may not necessarily be considered to be certifiably mentally ill in a clinical sense, abusive men do manifest with psychological difficulties. If this were not so, then all men exposed to particular cultures would batter and this is clearly not the case. Individual characteristics and psychology cannot therefore be ignored as these explain not only why some men batter and others do not, but also provides a more balanced perspective on the fact that some men who are abusive towards their partners do want contact with their children and are concerned with their role as a father while others are not. An abusive father's unwillingness to take responsibility for the effect of his behaviour on his children and role reversal expectations also denotes serious psychological deficiencies which may often be present.

Although abusers do tend to exhibit more punitive behaviours and fewer positive parenting behaviours than non-violent men, they do not appear to differ from non violent men in the

amount of time they spend with their children and in the way they monitor their children's behaviour (Stanley, 2011). A study by Perel and Peled (in Stanley, 2011) with 14 Israeli men who had been violent to their partners revealed their perceptions of their parenting styles to be rigid and limited, with parenting being dominated by the mother. These men were concerned with being a 'good father' and expressed a need to be closer to their children. This desire for a closer relationship with their children may motivate abusive men to seek contact with their children upon separation and suggests that such efforts may not always be rooted in attempts to maintain control over their former partner (Stanley, 2011).

There are various types of relationships found between children and fathers who are violent towards the mothers, but research suggests that biological fathers are most emotionally accessible to children while step-fathers who batter, are described as being more abusive towards children and as being more feared by children than biological fathers or unrelated male partners in the home (Gewirtz & Edleson, 2004; Stanley, 2011). Step-father negativity has been related to the development of externalising symptoms in children and to deviant peer associations (Knutson et al., 2009). Some studies have also demonstrated that the presence of an unrelated male in the household increases the risk of child abuse and injuries (Knutson, et al., 2009; Stanley, 2011). In the Knutson et al (2009) study conducted in the United States, fathers were the reported perpetrators in an estimated 71% of physical abuse cases and in 69% of emotional abuse cases that were reported. The relationship of an abusive male to a child directly affects the child's well being without it being dependent on the mother's mental health (Gewirtz & Edleson, 2004).

Harne (in Stanley, 2011) conducted a study with 20 men on a perpetrator programme in England and found that these men spent considerable amounts of time being in sole charge of small children. These fathers described feeling provoked into abusive behaviour by their children, who did not conform to their demands. The implication of this study is that it reveals a lack of understanding of child development amongst such men and points to a dire need for education amongst families on expectations of young children's behaviours. A Norwegian programme for abusers works to educate men on becoming aware of the whereabouts of children when altercations take place in the home and in sensitising them to children's responses to the domestic violence (Stanley, 2011). Research on men's perceptions of domestic violence found that education about the effects of such violence on children was one of the most likely reasons to prompt abusive men to attempt to change their behaviour (Stanley, 2011).

A U.S. research study on contact visitation also indicated that children who had weekly contact with their fathers post separation showed fewer depressive, anxious and somatic symptoms (Stanley, 2011). However, children whose fathers had perpetrated more serious acts of violence had more aggressive and antisocial symptoms regardless of frequency of contact.

Children may refuse contact with their father for good reason as sometimes abusive men do interrogate their children on the mother's whereabouts and living arrangements post separation (Bancroft, 2002; Stanley, 2011). Humphreys and Thiara (in Stanley, 2011) found that sometimes children were charged with giving their mothers abusive and threatening messages from their father and some children were even involved in the father's plan to kill the mother. In this particular UK survey of women using domestic violence services, only four out of 49 women who had contact arrangements in place with the perpetrator did not experience post-separation violence. This suggests that access to children by abusive fathers should be assessed and determined on a case-by-case basis and not in a generalised approach to such contexts.

Harne (in Stanley, 2011) found that abusive fathers participating in her study expressed a sense of entitlement to having contact with their children and also expected their children to provide them with emotional support and love when in contact with them. They reported having difficulty putting their children's needs first and used the time of contact to convey threats to the mother through their children. Separation is clearly a time of great anxiety for all and the abusive father may project his fear of abandonment and his rage onto his children during contact (Stanley, 2011).

The severity of violence as well as its frequency may be important considerations for personnel working with families that are afflicted by domestic violence and may greatly inform considerations regarding assessments of access to children, which cannot be taken lightly. Bancroft (1998) extends this to include the nature of the pattern of cruelty, intimidation and manipulation as crucial factors in evaluating the level of abuse present.

3.5.2) Effects on the child

Although it is clearly evident that exposure to domestic violence has negative consequences for children, the mechanisms by which this takes place remain complex and have not been distinctly explained (Knutson et al., 2009). Domestic violence may also be imbedded in other disadvantageous family circumstances such as poverty and substance abuse. Parental personality dysfunction and psychiatric conditions may also make it difficult for researchers to untangle phenomena. However, it is important to note that not all parents who experience poverty, are unemployed, engage in substance abuse or are mentally ill tend to perpetuate domestic abuse or child abuse.

In the past, understanding of children's outcomes after exposure has also appeared to be either focused on the risk for expressed aggression at different stages of development, as emphasised by social learning theory, or on trauma trajectories leading to anxiety and post traumatic stress symptoms (Kitzman et al., 2003). Currently, more studies have emerged which detail measures of child psychopathology as evident in internalising and externalising symptoms, providing a more encompassing view of the possible impact of exposure. Still, most of the research focuses on measuring psychopathology rather than exploring

children's views and personal experiences of domestic violence (Stanley, 2011), when both are clearly necessary.

Researchers, however, seem to agree that the effects of domestic violence are impacted in part by children's own personal reactions to the violence (Imhonde et al., 2009; Kitzman et al., 2003). The fact that such reactions, despite overlap, can be considerably unique and are defined by the complexity of interplay between multiple factors should not escape detection. This too is evident in research where no clear patterns of age or gender differences have yet emerged leading to the presence of significant individual variations (Kitzman et al., 2003; Spilsbury, et al., 2008).

Nevertheless, the existing research does reveal that some children exposed to domestic violence exhibit more difficulties in the areas of social, emotional and behavioural functioning than non-exposed children (Gewirtz & Edleson, 2004). What follows is an investigation of what has been found to happen in some cases of children exposed to domestic violence, as reported by research studies.

3.5.3) Cumulative Trauma⁹

a) Intrapsychic

According to Lemma and Levy (2004) all external events in an individual's life are assigned meaning inside the mind in terms of deeply personal representations of intimate objects and relationships. Exposure to trauma, therefore, affects what happens internally first since it is in this context that persecutory objects are internalised, that unsafe spaces are created within the individual and where internal beliefs in a safe, benign world are broken down (Cartwright, 2002; Lemma & Levy, 2004; Garland, 2004). Traumatic experiences are thus reinterpreted and assigned meaning in the mind in terms of a relationship with internal objects and the more traumatic the experience the greater the disturbance internally (Lemma & Levy, 2004).

Since the internal sense of goodness and safety is threatened, this is accompanied by distrust and fears of a world that has proved to be dangerous and unsafe, where the sense of persecution is amplified and where it becomes very difficult to trust others (Garland, 2004; Stubley, 2004). Persistent relational trauma then becomes 'an attack on attachment' (Garland, 2004, p.5) disrupting the individual's ability to develop internal integration, intersubjectivity and safe, intimate relationships. This is essentially the derailment of the ability to reflect upon one's own experience and to represent this symbolically in the mind, affecting coherent internal object representations and the ability to extend this understanding towards others (Fonagy, 2008). Trauma leaves the self vulnerable to external experiences and increases the likelihood of extreme defensive processes being adopted in

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⁹ Cumulative trauma is the term given to traumatic experiences that are repeated or prolonged over years and that alter self perceptions and perceptions of others (Herman, 1992; Trappler, 2009).

response to events that may be perceived as persecutory, yet are not necessarily so (Cartwright, 2002).

It is in the context of persistent and continuous trauma that rage and hatred are triggered and augmented, amidst tension between polarised emotions such as love and hate (Klein, 1937; Segal 1973). Internalisations of injury, helplessness and malevolence inevitably take place (Cartwright, 2002; Lemma & Levy, 2004). Victim mentalities may also arise which are often interlaced with identification with aggressors (Lemma & Levy, 2004) and where, in some cases, destructiveness towards others is psychologically justified by the individual against the backdrop of their own experience of abuse. In fact, victimisation and badness may become so interwoven with self that objects of wrath and destruction are sought in adulthood to repeat and re-enact the internal damage experienced (Crabtree, 2009; Zosky, 1999).

Afterwards what may be observed externally are states of depression, overwhelming anxiety, fear of intimacy (Zvělc, 2010), violent relationships and rigid defences. Childhood trauma negatively influences an individual's internal representation of self and others, thereby weakening or distorting these representations (Dutton, 1999) and sabotaging mentalisation¹⁰ capabilities (Fonagy, 2008) and consequently the development of healthier relationships with others.

b) Intrapsychic and interpersonal domains

Meta-analysis of research studies have demonstrated the presence of significant associations between exposure to domestic violence and child emotional and behavioural problems (Gerwitz & Edleson, 2004). Research on trauma has only just begun to highlight the impact that exposure to chronic domestic violence has on the development of children and youth (Laing, 2000). Firstly, children living in such environments are being psychologically abused by virtue of exposure since seeing a parent being physically assaulted is trauma inducing (Trickett, 2002). This is not withstanding the likelihood of neglect, rejection, lack of emotional support and isolation that such children may experience. The fact that the perpetrator is usually known to the child is also said to amplify traumatic symptoms by virtue of the level of dependency and attachment present. Frequency, severity and co-occurrence of different forms of violent behaviour also complicate the expected outcomes of exposure to violence (Holt et al., 2008; Kitzman et al., 2003).

Due to this exposure being characterised by ongoing trauma in the presence of compromised caregiving, van der Kolk (2005) suggested the application of a new diagnostic construct which could better describe the effects on children. Developmental trauma disorder arose as a new diagnostic category which describes the diverse symptoms in children who have been exposed to cumulative trauma and which takes into account clinical

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 $^{^{10}}$ The ability to understand one's behaviour and that of others in mental state terms (Fonagy, 2008).

differences between groups of trauma-exposed children and the type of trauma experienced (Stolbach, Minshew, Rompala, Dominguez, Gazbara & Finke, 2013). The criteria include exposure to persistent interpersonal violence, affect and physiological regulation difficulties, attention and behavioural dysregulation, impairments in self development and relationships as well as functional disturbance as in scholastic functioning and peer group conflict amongst others. The importance of this construct lies in the fact that children's exposure to cumulative trauma, such as domestic violence for instance, has been recognised as being ultimately capable of derailing developmental processes in children in a variety of domains or in different developmental areas, which were not fully accounted for in prior diagnostic categories or clinical treatment. It has also been suggested that the effects of exposure may be manifested differently for different age groups (Stanley, 2011). Early and prolonged exposure are said to pre-empt more severe problems since this is said to affect progressive development throughout childhood into adulthood (Holt et al., 2008).

c) Early childhood

The accumulated exposure to violence may intersect with the young child's limited capacity to escape the situation or their inability to manage this exposure from an intellectual, verbal or emotional level (Stanley, 2011). Young children are particularly vulnerable to threats aimed at their mother from another caregiver, like the father, because of their utter dependence on their parents (Carpenter & Stacks, 2009; Gewirtz & Edleson, 2004).

Infants are more likely to show symptoms of trauma when their mothers also show symptoms and infants are more likely to be insecurely attached to mothers who are abused by their partners (Gewirtz & Edleson, 2004; Stanley, 2011). Delayed language development and difficulties with toilet training have also been identified in young children exposed to domestic violence (Stanley, 2011). In a study comprised of 100 three to five year olds who had been exposed to domestic violence in the last year, 43% exhibited poorer language abilities than children not exposed (Stanley, 2011).

Pre-schoolers of abused women have been found to be less empathic than children not exposed to violence, and to be more likely to call other children names, to bite, hit or slap their peers during play (Gewirtz & Edleson, 2004). Witnessing domestic violence in the preschool years has also been linked to behaviour problems at age 16 for both genders, even when other confounding factors were accounted for (Yates, Dodds, Sroufe & Egeland, in Gewirtz & Edleson, 2004). Young children exposed to violence may cope by decreasing their attention to new information in their environment and increasing their vigilance, in efforts to protect themselves, filtering the behaviour of others through the lens of exposure to domestic violence. The development of self-regulation is a prerequisite to the development of social skills allowing individuals to negotiate reciprocal relationships (Gewirtz & Edleson, 2004). Exposure to violence in the home attests to dysregulated emotional states from adults which directly affect the child's emotional regulation (Carpenter & Stacks, 2009), perception of how they are approached by others and ability to develop self soothing skills.

Young children exposed to domestic violence also tend to display difficult behaviours oscillating between demanding neediness and uncontrollable aggression (Lieberman, 2007). In documented therapeutic interventions with three and four year olds, children often expressed a fear of the aggressor's destructive parts and a fear of being like them (Lieberman, 2007). Because the environment ceases to be predictable, children often express rage and aggression as a response to the danger and as an effort at self- protection, in an attempt to decrease helplessness. Children in their first five years of life may reexperience their trauma in post-traumatic and repetitive play, nightmares, social withdrawal, night terrors, hypervigilance and an exaggerated startle response (Ososfsky, 1999). Repeated victimisation by parents may modify children's representations of relationships in a way that makes them hypervigilant to signs of threat in other social contexts (Gewirtz & Edleson, 2004).

One of the basic tenets of developmental theories states that when the environment of a child is physically and psychologically unsafe, basic trust, security and healthy attachment are derailed (Bowlby, 1988). Frequently an abused parent may be unable to demonstrate adequate capacity for containment, may come to rely on the child for their own emotional needs to be met and even lash out as anger is displaced and emotional resources become depleted (Kubeka, 2008; Holt et al., 2008). Emotional neglect has also been shown to play a crucial role in the long-term impact on children as it is deemed to interfere with the development of self-esteem, emotional regulation and self-acceptance (Langhinrichsen-Rohling, 2005). A secure attachment relationship is imperative to the development of healthy functioning in the child (Gewirtz & Edleson, 2004) and its development is a key task of the infant, toddler and preschool periods with insecure attachment remaining a risk factor for later emotional and behavioural problems (Egeland & Erickson, in Gewirtz & Edleson, 2004).

Domestic violence may directly affect young children's attachment and feelings towards their caregivers in reducing their trust in both parents as sources of safety and protection as well as leading to mental representations of others as being dangerous (Huth-Bocks et al., 2004). Conflicting feelings such as longing for the abuser and yet being afraid of him may also develop or longing for the mother yet being angry with her and fearing her loss. When parents are living in constant fear or struggle to mediate their feelings of depression and rage, they may also make it difficult for the child to successfully navigate the developmental transitions of childhood and to develop autonomy and independence (Osofsky, 1999).

Bidirectional aggression has also been found to be present in some environments of domestic violence (Langhinrichsen-Rohling, 2005). Typical motivations for women's physical aggression may be self-defence, anger or tension release as well as retaliation for a partner's behaviour. However, if both parents are violent, the child cannot identify with the 'protector' and may have difficulty learning how to express anger in a safe way (Lieberman, 2007).

For children growing up in settings permeated by hostility and instability, trust and safety become rare commodities. Parents come to embody the fears of childhood instead of defeating them (Lieberman, 2007). This shatters the young child's trust in the parent as protector and as a secure base, affecting their identity development and sense of self. The literature certainly points to young children exposed to domestic violence experiencing intense terror, fear of loss, damage and death as well as deep anger and rage (Lieberman, 2007; Shaver et al., 2009; Van Den Bosse et al., 2009).

d) Middle Childhood

Children exposed to domestic violence have been found to be more maladjusted than individuals from non-violent families (Anderson, 2010). The link between exposure and the development of symptomatology in children, teenagers and young adults is well documented (Abrahams & Jewkes, 2005; Anderson, 2010; Holt et al., 2008; Osofsky, 1995; Osofsky, 1999). These include behavioural problems, such as physical aggression, non-compliance, anxiety, concentration difficulties, low self- esteem, somatic complaints, perpetration and re-victimisation (Anderson, 2010). In environments of poor emotional regulation and escalated violence, children and adolescents may in turn struggle with the development of internal control just like young children (Gewirtz & Edleson, 2004). Such effects are observed across the developmental continuum but some symptoms are more prevalent across different developmental stages.

Witnessing domestic violence has been positively associated with conduct disorders in children of school going age (Stanley, 2011). Some of these children are often anxious about keeping their home situation a secret as well as being concerned about being victimised by peers at school. Since domestic violence is enshrouded in secrecy and kept behind closed doors, children are often taught to maintain this secrecy and to suffer in silence thus facilitating repression of the reality of childhood (Miller, 1981; Van Den Bosse & McGinn, 2009).

Pre-adolescent children also tend to implement defensive strategies to minimise negative views of their fathers and to perceive them in a more positive light creating a sense of confusion when required to make choices about their parents (Holt et al., 2008). They also worry about what they could have done to prevent the violence (Osofsky, 1999). Children and young people often carry within them and struggle with ambivalent feelings towards both parents oscillating between fear and empathy for the father and compassion and a need to protect the mother. They are likely to understand more about the intentions behind the act of violence and have a tendency to display even more internalising (withdrawn, fearful, inhibited) and externalising (aggression) symptoms (Gewirtz & Edleson, 2004; Herrenkohl, Sousa, Tajima, Herrenkohl & Moylan, 2008; Osofsky, 1995, Stanley, 2011). Exposure to domestic violence during the school attendance years also may make it more likely for children to come into contact with someone who is likely to be detrimental to

them (Stanley, 2011) such as peers and adults who will facilitate aggression or further victimisation.

Academic performance and social competency tend to be seriously affected in this age group. School age children are also more likely to show increases in sleep disturbance and difficulty in maintaining concentration due to intrusive thoughts (Osofsky, 1999). In a US study involving children aged six to twelve years, a significant link between witnessing domestic violence and the development of nightmares and numbness of affect was reported (Osofsky, 1999). Spilsbury et al. (2008) documented a study by Hughes and Luke undertaken in 1998, with 58 children aged between six to twelve years residing in a women's shelter. This study investigated the internalising and externalising symptoms expressed by the children as well as their self-esteem. The children's symptomatology was classified into five groups:

- 1. Well functioning with low internalising and externalising symptoms and high selfesteem,
- 2. Moderate levels of all three factors
- 3. High internalising and externalising symptoms with low self esteem
- 4. High externalising symptoms (acting out)
- 5. High internalising symptoms (depression)

This study found no significant difference amongst groups by whether direct child abuse had occurred, the frequency of the domestic violence, age or gender. What was significantly different was that children in the high internalising symptoms category had better educated mothers than those in other groups. Groups also significantly differed in duration of the abuse and verbal aggression from mother to father both of which were factors associated with high externalising symptoms in children. A later study also referred to in Spilsbury et al's review (2008) which was undertaken by Grych, Jouriles, Swank, McDonald and Norwood (2000), explored the same factors but with children aged 8-14 years. The two groups demonstrated predominantly externalising symptoms and predominantly internalising symptoms were associated with greater frequency and intensity of aggression from the parents towards the child.

High levels of fear and anxiety are experienced by children exposed to domestic violence (Stanley, 2011). Mullender et al. (in Stanley, 2011) report on a 12 year old's experience of the unpredictability of living with domestic violence: "I have to sleep watching two doors with my back against the wall..." (Stanley, 2011, p. 30). Children who have experienced this also tend to demonstrate more feelings of worry about the vulnerability of their mothers and siblings (Stanley, 2011) which may lead to the development of separation anxiety and school refusal.

e) Adolescence

Exposure to domestic violence is deemed to place adolescents at risk for anti-social behaviours and such relational patterns may endure into adulthood. In essence youth exposed to family violence tend to have complex relationships with both parents (Grych et al., 2000). Through the use of splitting as a defence, children view their fathers in contradictory ways, as the 'good, loved' parent and as the 'bad, frightening' father but both views are not simultaneously maintained. Adolescents also tend to demonstrate high levels of acting out behaviour accompanied by anxiety, school truancy and revenge seeking conduct (Osofsky, 1995). Exposure to domestic violence in childhood is significantly associated with delinquency in teenagers of both genders (Stanley, 2011). A survey study of 4000 American teenagers exposed to family violence found that anger was the most evident symptom that was present (Stanley, 2011). This is often associated with aggression towards peers, with depression, predominantly amongst teenage girls, and with aggression towards the mothers from both genders (Stanley, 2011).

Long lasting effects include the loss of identity, disruption of core beliefs and values, depression and substance abuse (Anderson, 2010; Idemudia & Makhubela, 2011). Feelings associated with exposure to inter-parental violence comprise fear, sadness, loneliness and suicidal tendencies (Stanley, 2011). Idemudia and Makhubela (2011) report on adolescents experiencing identity problems when exposed to domestic violence. It is important to consider that these young people would possibly have been exposed to the violence for a considerable amount of time in their developmental years by the time they reached late adolescence. The authors comment on the possible detrimental impact on gender roles, gender identity development and on self-concept. A Nigerian study comparing adolescents exposed to domestic violence and adolescents not exposed concluded that there was a great deal of variance in self esteem measure between the two groups (Imhonde, et al., 2009). As predicted, adolescents with exposure scored lower on self esteem measures but higher on measures of aggression, authoritarianism and rebellion than the not exposed group. The researchers postulated that in witnessing domestic violence, adolescents may lose respect for authority figures, exemplified by their parents, and this may affect their non compliance.

f) Adulthood

Domestic violence involves the violation of the personal boundaries of safety and trust in the world, if the child does not receive help and the opportunity to work through the experiences in a supportive network of social relationships, the effect and memories can lay dormant until adulthood (Anderson, 2010). There is therefore the likelihood of the development of serious psychological problems such as depression, anxiety, and Post Traumatic Stress Disroder (PTSD).

It is known that traumatised individuals have trouble modulating aggression and exposure to violence in the family of origin seems to be a risk factor for the development of complex PTSD. Complex trauma often results in a poor perception of self (or a loss of the coherent self) and others, a propensity towards re-enacting the patterns of trauma, the inability to regulate mood and adoption of the belief system of the abusers (Dutton, 1999; Herman, 1992; Trappler, 2009). The consistent experience of maternal deprivation may also have farreaching implications for an individual's internalised representation of self and others, leading to low self-worth and a diminished capacity to receive genuine love and friendship in adulthood (Howe & Fearnley, 1999; Maeder, 1989; Winnicott, 1960). This extends to an inability to engage in stable or trusting relationships. Once the cycle of abuse is engaged it may also act as psychological entrapment for both partners making it difficult for them to stop.

The younger the age at which the trauma was experienced and the longer its duration, the more likely they are to experience adverse long-term effects with the regulation of arousal, anger, anxiety and sexual impulses (Dutton, 1999) in adulthood. There also appears to be an inability to distract oneself when physiologically aroused, thus increasing the propensity for uncontrollable feelings of rage. Clinical trials indicate that some abusers reported high physiological arousal and agitation which manifested in increased heart rates during conflicts, hyperactivity and explosive outbursts (Dutton, 1999). Another pattern described by abusers involved a flat, unemotional display accompanied by decreases in heart rate. Van der Kolk (in Dutton, 1999) suggested that this is a feature of psychic numbing evidenced in emotional constriction and isolation.

Interestingly the largest contributor to abusiveness in adult men was paternal rejection (Dutton, 1995) which raises the notion of how boys are raised to become men. Solt (1996) maintains that in the general sense men are believed to have an undeveloped capacity for intimate relationships and that this is "the expected male condition" (p. 1). Emotional numbness is the result of men being raised to keep going regardless of their feelings. But what has been missing from classical psychoanalysis is an understanding of the manner in which boys are raised and develop emotional connections to others.

Solt (1996) argues that Freud would have regarded the need for connections as a neurotic regression to an infantile state but Fairbairn (1952) would assert that boys and girls equally, have been object seeking from the beginning and that a 'child does not direct rage spontaneously towards his libidinal object in the absence of some kind of frustration' (p109). A boy seeks identification with his father but this is not possible if the father is an unaccessible, mystery person (Solt, 1996). Solt's (1996) explanation of what may happen next is fascinating in terms of development implications for male children and merits further attention. For him, the boy will therefore create his own father from the notions of maleness given by society's stereotypes that support efforts to repress male needs of dependency, intimacy, disclosure and nurturance. If his need for these from other males is

accepted he is at risk of rejection by society. The psychic struggle involves feeling accepted for who they are and sustaining this sense of self in encounters with other men and women. When a boy's sense of masculinity is not supported by his father he defends by repressing this hurt and anger and adapts through his sense self to the external expectations of his father. Harboured beneath the surface are deep feelings of inadequacy which are split off and it is this rageful split off self that is seen in men as they try to dominate someone into complying with their wishes.

Complex PTSD may be a mediating variable between childhood abuse and adult perpetration of domestic violence (Dutton, 1999). In a study by Dutton (1999), 45% of male abusers met the criteria for PTSD although abusers also depicted higher scores on antisocial personality features. Men with PTSD who were not domestically abusive obtained higher scores on anxiety and dysthymia. A possible suggestion is that acting out aggression may serve to dispel depressive feelings (Dutton, 1999) possibly by the process of projective identification where the bad object is expelled and attempts are made to destroy it's embodiment in the female partner.

Another study by Dutton (1995) indicated that in abused boys one of the most prominent sequelae of abuse was hyper-aggression. Abused boys were also more likely to identify with the aggressor and to eventually perpetrate the abuse on their spouse. Girls were more likely to aggress towards themselves and boys against others (Carmen, Riecker, & Mills in Dutton, 1999). For women, the intolerable self representations internalised in early environments of trauma were often projected onto their own bodies, turning the violence into self-harm. For males the victimisation-aggression link may derive from the compulsion to repeat the trauma and from identifying with the aggressor as a means to replace feelings of helplessness with omnipotence. Fromm (1973) did maintain that sadism was "the transformation of impotence into omnipotence" (p. 323).

Overall a combination of witnessing domestic violence, feelings of shame and insecure attachment over prolonged and vulnerable developmental phases constitutes a dramatic and powerful trauma source (Dutton, 1999) for both men and women. This is exacerbated by secure attachment not being available for much needed soothing which is triggered by the violence of parents. The individual's internal models are constantly unconsciously revised within this environment resulting in isolated areas of decision making or behaviours that are inconsistent with other personality attributes, hence the sense of fragmentation and lack of coherence in such individuals.

A possible effect of parental abuse may also be the exaggeration of sex role characteristics as a means of attempting to strengthen the damaged self (Dutton, 1999). The splitting of

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¹¹ A psychological defence whereby intolerable parts of the self are projected onto another and are then reacted against.

gender role characteristics in this way would explain why men tend to carry the aggression and women the victimisation in violent relationships.

On an emotional level, young adults who have been overwhelmed by the family violence may become afraid to feel and to love choosing instead to numb their senses and developing tenuous self- reliance (Fosha, 2002). According to Fosha (2002) the psychological experience of trauma involves the intrapsychic transmission of such trauma from the environment into the self, transforming it into internal experience. This, she maintains, is equivalent to a process by which an individual will treat himself as his abuser did as revealed in patterns of self-sabotage. The self essentially joins the abusers in the traumatisation by repeating patterns of self abandonment, torture and dismissal.

These studies seem to focus predominantly on extreme behaviours while the way that individuals reacted in self-protective ways in childhood and how this may have assisted them in avoiding violent relationships later remains elusive in research studies. Individuals react to trauma in different ways and although there are common areas of impact, each person may also have at their disposal a broad range of intrapsychic and interpersonal resources that would affect the outcome. The significance of unique case studies therefore lies in highlighting such differences and enhancing current knowledge about these processes, which is what this particular research study seeks to do.

3.6 The intergenerational transmission of violence

The intergenerational transmission of violence theory has received considerable, if not the bulk of the attention from the scientific community (Abrahams & Jewkes, 2005; Kubeka, 2008; Margolin & Gordis, 2004; Renner & Slack, 2004; Widom, 1989). The idea that violence begets violence is well referenced and is predominantly based on social learning theories as well as ecological and developmental theoretical frameworks which advocate that children learn that violence is an acceptable method of conflict resolution by being exposed to violence between their parents (Franklin, 2010; Lohman et al., 2013). The hypothesis further suggests that children (particularly males) who are also maltreated are more likely to grow up to become abusive parents than children who are not victimised by family violence (Renner & Slack, 2004). They are also more likely to engage in violent behaviour in intimate relationships when exposed to domestic violence in childhood. This positioning arose out of awareness that many perpetrators of violence had themselves been childhood victims (Langhinrichsen-Rohling, 2005). Parents who engage in violence are perceived as modelling this behaviour to their children who in turn fail to distinguish situations when aggression is appropriate and develop similar behaviours to their parents (Franklin, 2010). Although this position is supported by research studies (Alexander, Moore & Alexander III, 1991; Devaney, 2009; Franklin, 2010), it fails to explain why many childhood victims do not become perpetrators.

According to researchers, young adults exposed to domestic violence in childhood tend to demonstrate a greater propensity towards social and dating aggression (Devaney, 2009; Lichter & McCloskey, 2004). A study conducted by Okour & Hijazi (2009) in North Jordan suggests that witnessing and exposure to domestic violence significantly affected university students' participation in violent quarrels on campus.

Longitudinal studies on delinquency have indicated that young offenders are more likely to have been exposed to domestic violence compared to their non-exposed counterparts and to become involved in anti-social behaviour, substance abuse and violent crime (Holt et al., 2008). This implies that a history of domestic violence in the family of origin influences young men's attitudes and lack of inhibition towards aggression (Reitzel-Jaffe & Wolfe, 2001). A study by Herrera and McCloskey, (2001) found that exposure to domestic violence was actually more predictive of youth aggressive behaviour than earlier child abuse. This speaks to what is known amidst psychoanalytic circles as identification with the aggressor whereby a child will model on the attacker as a means of avoiding being themselves attacked (Lieberman, 2007). The abused becoming the abuser allows the malevolent discharge of pain to take place, protects against feeling and is a way of disavowing unacceptable parts of the self (Lieberman et al., 2005). Since the trauma may be passed to the child through the unconscious assimilation of repressed and unintegrated experiences, identification with the victim role may also take place. The defences originally meant to protect may then become instead pathways to loneliness and fragmentation leading to further victimisation or perpetration (Fosha, 2002).

What most of the studies seem to indicate is that there appears to be a transmission of trauma rather than a transmission of violence per se (Bradfield, 2011; Lohman & Neppl, 2013). In other words violence and victimisation mental states may indeed be transmitted via parent to child as suggested by empirical studies but not simply as learned behaviour. Rather, aggression and violence become internalised traumatic sequelae born and bred within a disrupted relationship between parent and child. Violence and victimisation then, may become a reaction and even defence against unprocessed trauma.

Bradfield (2011) reflects on how the transmission of insecure attachment styles ¹² take place as a second generation effect of unresolved trauma or loss in parents. He maintains that the traumatised mother responds to the child in frightening or dysregulated ways that interfere with the establishment of security in attachment. Since the mother may be struggling with her own trauma she may become distant and emotionally unavailable to the infant leading to the emergence of feelings of abandonment, aloneness and possibly fear in the child. In this way attachment trauma is transmitted in an indirect way across generations.

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¹² The intergenerational transmission of attachment will be discussed in greater detail in chapter 4 of this thesis as it pertains strongly to attachment theory.

The child also witnesses the parents' fear, anxiety and rage (Bradfield, 2011) during domestic violence and this suffering may never be actually articulated or understood which means that the child's experience remains unprocessed. These powerful and overwhelming emotions are then split off from awareness and the experience is not symbolised or given meaning leading to helplessness and an experience of continuous ever present trauma which Winnicott (1971) described as here and now, contextless and timeless. Since the child seeks to maintain the relationship with the parent, greater splits occur in the personality whereby the parent may become idealised and the abusive experience is denied.

A history of family violence has therefore been clearly linked to the transmission of severe trauma and therefore to perpetration by men in adult relationships, however this connection is not as easily understood as it first appears and is also indirectly mediated by the presence of certain factors such as negative gender beliefs and peer associations (Reitzel-Jaffe & Wolfe, 2001). The negative beliefs construct is deemed to be latent and to include measures of attitudes towards women and to various forms of interpersonal violence, which may be acquired throughout the lifespan. Concurrently, a study with university undergraduate students found that male students exposed to domestic violence in childhood were more likely to perpetrate aggression towards their romantic partners when in contact with peers who endorsed various forms of aggression and gender prejudice (Gwartney-Gibbs; Stockard & Bohmer, 1987). There may be something about types of affiliation that could trigger the experience of latent trauma and facilitate violence. Added to this is the complication of the act of 'forgetting' one's childhood or obliterating it from consciousness as Bradfield (2011) describes it, so that the experience is minimised and very little conscious control over it is felt.

Notably, Gelles and Cavanaugh (2005) warn that although a child's experience of violence is, at times, correlated with later violent and anti-social behaviour, such an experience is not the sole determining factor. In fact the connection between child maltreatment and later abusive behaviour is complex (Renner & Slack, 2004). According to Widom (1989) more individuals who were exposed and victimised by violence did not subsequently become perpetrators than those who did. Repeaters of domestic violence are less likely to have had a parent who provided love and support during childhood and also tend to report less supportive partner relationships (Renner & Slack, 2004).

Children's responses to experiencing violence are also heterogeneous with some faring poorly in comparison to non-exposure groups and others faring even better or just as well (Kitzman et al., 2003). The question as to why some parents never repeat with their children the patterns of abuse or why some children, despite extreme conditions, never ally themselves with the abuser, remains to be answered (Lieberman et al., 2005) and may be mediated by a variety of individual and family factors such as propensity to engage in

substance abuse, academic success or failure and parent to child hostility (Lohman et al., 2013).

It is significant to note that much of the research on intergenerational transmission relies upon clinical rather than community samples and is conducted retrospectively leading to overreliance on estimates of abuse across generations (Renner & Slack, 2004). It is therefore evident that the nature and specificity of the transmission process has not been fully explored by researchers (Langhinrichsen-Rohling, 2005). Generalisations regarding transmission may become label-inducing due to their popularity within academic and public circles. Gewirtz and Edleson (2004) highlight the need for prospective longitudinal studies on exposure to domestic violence in order to accurately identify effects on development in the long-term. The use of rich clinical case studies may also positively contribute towards shedding light on the phenomenon of transmission.

3.7 Socio-cultural factors influencing domestic violence

a) Gender

Research on specific gender impact and exposure to domestic violence is uncertain thus far, with studies reporting contradictory findings. For instance, Cummings, Pepler and Moore (in Holt et al., 2008), found that the girls in their sample depicted more externalising behaviours than boys. Lohman et al. (2013) also reported that females were as likely as males to engage in domestic violence in adulthood. Other research reports upheld that boys displayed more externalising behaviours such as hostility and aggression due to identification with the aggressor and experienced higher levels of threat during exposure as opposed to girls' who experienced higher levels of self-blame (Dutton, 1995; Holt et al., 2008). Interestingly some studies have suggested that girls depict greater maladjustment as a result of exposure to domestic violence than boys (Bernhardt, 2004). On the other hand, Gewirtz and Edleson (2004) report on the finding that of the 110 families participating in a particular study, most parents indicated that their boys were more likely than girls to respond to the domestic violence by leaving the room or appearing sad or frightened. However, these conclusions were derived from parents' ratings of their children which could be influenced by a variety of factors confounding their reliability and accuracy.

For men, current violence has been associated with their witnessing of violence perpetrated by their fathers toward their mothers (Herrenkohl et al., 2008). For women exposure to violence by their mothers on their fathers tended to increase their own likelihood of aggressing towards their own children. According to Kernsmith (2006), children from violent homes are more likely to find rationalisations for their physically abusive behaviour. Boys growing up with domestic violence are therefore three times more likely to become abusive men in their intimate relationships than boys from non-abusive homes (Kernsmith, 2006; Reitzel-Jaffe & Wolfe, 2001). Research on female perpetrators is emerging and seems to suggest that women may perpetrate intimate partner violence as often as men although

knowledge of situational and background factors affecting this are still not clearly understood (Williams, Ghandour & Kub, 2008).

Gender stereotypes also have an influence on gender identification in that masculinity is naturally deemed to encompass more aggressive, dominant and forceful characteristics whereas femininity is perceived within frameworks of fragility, submission and passivity (Bernhardt, 2004). Lieberman et al., (2007) report on boys as young as three and four years old, after witnessing violence perpetrated by their fathers on their mothers, verbalising a fervent wish to be a girl and rejecting their male identity. These young children appeared to equate maleness with violence, rejection and abandonment since their mothers had left the relationship ('abandoned the male'). It is possible and likely that watching the father use violence against the mother can affect the development of gender identification in some children. Masculinity may come to be distrusted by the child through its association with violence and femininity may be associated with victim status (Bernhardt, 2004). Both boys and girls may experience problems in identification with masculinity or femininity or alternatively embrace stereotypes in either positioning.

What is certain is that children who have witnessed violence in the home and experienced physical abuse tend to have higher internalising and externalising symptom scores than those who have only witnessed it (Herrenkohl et al., 2008). It is also important to note that much of the above research was not initially conceived in mixed racial populations or non-westernised cultures. It is therefore crucial to keep in mind that the contexts of cultural history and setting are integral to an understanding of the meaning of personal experience and gender differences (Larsen & Larsen, 2004). Unique individual factors may also mediate the responses in individuals (of either gender) exposed to violence.

b) Patriarchy and hegemonic cultures

Culture at its most basic, refers to fundamental categories which designate specific ways of conceiving reality (Shalom, 1986). Culture in itself is designed to promote well-being and a sense of belongingness in asserting the rights of groups and in delineating ideas about traditional practice (Eagle & Long, 2011). In a patriarchal society such as South Africa, however, culture may at times be summoned in ways that disempower women and children and can be used as a way of reducing the questioning of masculine authority (Eagle & Long, 2011). For instance, the sense of acceptance of domestic violence as a 'norm' within marital relationships and expectations of male domination may be intrinsic or incorporated into the way people carry out cultural life in South Africa.

Flowing out of a history characterised by racial domination and gender inequality, SA society may therefore be fertile ground for domestic violence to be normalised, perpetuated and tolerated. Young adults growing up within this milieu may find it very difficult to challenge gender stereotypes and attitudes surrounding ideas of control and submissiveness (Kubeka, 2008).

In hegemonic environments children also learn how aggression is functional in intimate relationships and become vulnerable to what Holden (2003) calls 'mis-socialisation'. A study conducted by Graham-Bermann and Brescoll (2000) in the United States, involving 221 latency aged children and their mothers found a direct relationship between the level of physical and emotional abuse of the mother and children's belief systems regarding intrinsic dominance and the privilege of being male. Kubeka (2008) makes similar inferences about perceptions of male power, leadership and authority in a study comprising black male and female respondents in a township in South Africa. There is no doubt that culture, patriarchy and oppressive histories provide an informative context for childhood experiences and subsequent behaviour after exposure to domestic violence.

However, culture may also be suggested to instil resilience in children through a focus on the support of extended family members such as grandparents and through the valuing of academic performance, faith and success, for instance. In fact, these factors have been associated with inherent protection against trauma in children (Martinez-Torteya, Bogat, von Eye & Levendosky, 2009; Walsh, 2003).

3.8 Resilience

a) Protective factors

The fact remains that not all young adults will demonstrate maladjustment from exposure to domestic violence and many will maintain adaptive developmental pathways instead (Walsh, 2003; Yates, Egeland & Sroufe, 2003). Human beings develop unique ways of coping and relating and as such may demonstrate high functioning behaviours is various facets of their lives if not all. Martinez-Torteya et al., (2009) wrote about protective factors in individuals which intersected with context and predicted better outcomes for those exposed to traumatic upbringings.

This recognition has fuelled research on resilience, or the capacity to thrive despite serious setbacks and trauma, in children and adolescents. The absence of serious maladjustment difficulties does not mean that individuals are unaffected by such exposure. In fact studies suggest that individuals do not pass through adversity unscathed or able to simply just bounce back (Walsh, 2003). Yet, when exposed to violence in the home, some children demonstrate incredible resilience and although they experience the same risks, do not develop long-term impairment or violent behaviours in adult relationships (Carlson, 2000; Herrenkohl et al., 2008; Holt et al., 2008; Rosenthal, Wilson & Futch, 2009). Studies of adults who suffered abuse in childhood found that 60% did not become abusive parents (Kaufman & Ziegler, in Walsh, 2003). According to Howell et al. (2010) resilience rates of 31% to 65% are reported in research studies of children exposed to domestic violence.

There appears to be an interplay of multiple risk and protective processes that interact and mediate the varied adaptation in individuals (Walsh, 2003). For instance a child's higher

cognitive ability and positive relationships, particularly with the mother have been associated with resilience (Martinez-Torteya et al., 2009). On the other hand, maternal depression has also been associated with more internalisation of problems in children exposed to domestic violence. Howell, Graham-Bermann, Czyz and Lilly (2010) suggest that mothers who experience domestic violence but who manifest with fewer depressive symptoms may have a greater capacity to maintain more positive attachment which becomes protective against trauma enabling the child to become better equipped at accomplishing developmental tasks such as emotional regulation.

Child development is fundamentally perceived as a transactional process within the family unit, community and schooling environment (Kennedy, Bybee, Sullivan & Greeson, 2009). Resilience within this context is often referred to as the ability to use resources that enable the individual to negotiate issues in adaptive and competent ways within emotional, academic and interpersonal domains (Yates et al., 2003). Anderson (2010) expands this by defining resilient behaviour as survival, perseverance and the implementation of strategies of protection that the individual develops throughout their development. This gives rise to the idea that resilience is not a static variable but that it can change, evolve and is expressed in diverse ways throughout the lifespan. When resilience is perceived as a lifelong process, transformation may gradually take place at any time and be evidenced in the development of strong relationships as individuals turn to helpful others who are able to provide comfort and support (Walsh, 2003). Positive relationships are therefore described by Walsh (2003) as lifelines.

Some children and adolescents also actively resist giving in to powerlessness by opposing the abuser in attempts to prevent the violence and at times in defiance of the sense of oppression created (Anderson & Danis, 2006). At times the child may summon help from neighbours, relatives or the police and try to run interference to distract the abuser from their mother or from weapons. These children often take on the caretaking role and attempts are made to comfort the abused parent and siblings. Although this aspect may be regarded as intensifying exposure (Holden, 2003) and as a reversal of roles between parent and child, Anderson and Danis (2006), report on it serving a protective function and informing a sense of agency for women who had been exposed to domestic violence in childhood because it reduces the sense of powerlessness and helplessness.

Research studies on resilience identify several protective factors which have been shown to be effective in buffering against the harmful effects of exposure to family violence and in the development of inner resilience in children and youth. Laing (2000) divides protective factors into three main types which include the attributes of the child, the Support within the family and support figures outside the family such as relatives, peers or teachers.

Individual characteristics such as social acuity, high intelligence, a sense of humour, religious affiliation and self-esteem emerge as significant factors underlying children's ability to develop successful coping strategies in the face of family violence (Anderson, 2010; Holt et

al., 2008; Osofsky, 1999; Yates et al., 2003). Children with high self-esteem in one area such as school, for instance, may focus and build on that area of achievement allowing them to better survive their violent environments (Holt et al., 2008).

Strong bonds with siblings or with a parent, usually the mother, are also cited consistently in the literature as important protective factors (Holt et al., 2008; Howell, et al., 2010; Kennedy et al., 2009; Lieberman, 2005; Osofsky, 1999). Having a close relationship with a family member that is experienced as a source of nurturance and that can provide ways of dealing with stress, can also ameliorate the effects of trauma. The constructs of positive parenting, high maternal authority and control as well as protectiveness of the mother have also been associated with less antisocial behaviours on the part of adolescents exposed to domestic violence (Martinez-Torteya, et al, 2009). Chronic domestic violence and fewer resources tend to diminish normal, positive adaptation in children.

As Lieberman (2005) states in her fittingly titled article: "Angels in the Nursery", the presence of an available, good-enough and containing adult in a child's life can interrupt the cycle of violence in a family and initiate a cycle of hope. Research by Levendosky et al., (2000) reported that some of the women in their sample who had incurred victimisation due to intimate partner violence, had developed increased sensitivity to their children and described attempts to compensate for the violence experienced within the home. Lieberman et al. (2005) describe a wide range of parental responses to traumatised children including astute attunement to the child's suffering and a determination to make reparation and restore emotional health. Such parents are able to empathise with the child's vulnerability and to exercise their role of protector. This fosters secure attachment and enables the child to simultaneously register the good and bad parts of their parents and to integrate experiences and varied emotions. As studies of resilient children suggest, even a single secure and understanding relationship may be sufficient for the development of reflective processes and may 'save' the child (Fonagy, 1999b).

Supports outside of the immediate family are also very important for children allowing them to feel less isolated and overwhelmed (Osofsky, 1999). Relationships with benevolent parental figures who are available to the child such as grandparents, teachers or other caring adults can act as self-affirming forces enabling the child or adolescent to establish a stronger sense of self and identity. The recovery and integration of these early experiences of safety, joy, and intimacy can provide a greater appreciation of positive early relationships and encourage a deeper sense of self-worth and intactness (Lieberman et al., 2005). Such experiences are not only growth promoting but also become an integral part of identity, being incorporated into self-experience and enabling the child to identify with the protector.

Most of the research on resilience has focused on children with the exception of a few studies including Anderson and Danis' (2006) exploration of resilience in adult female children of abused women in Kansas, US. There is a clear necessity for research with

emerging young adults in South Africa with particular reference to the choices they have made regarding their own identity and interpersonal relationships.

However, the particular significance of the Anderson and Danis (2006) study lies in the fact that the authors were able to identify numerous acts of resistance and spontaneous reactions to childhood adversity which continued to be used throughout adulthood by the respondents as ways of engendering a sense of control and coping. Regarding the defending against a sense of powerlessness, the researchers identified four main factors enabling participants to avoid being overwhelmed by the domestic violence they were exposed to. These included participants, as children, creating physical and mental escapes or safe places in their childhood homes where they could leave the violence behind and employing a range of cognitive strategies to ensure such an escape such as reading books, creating fantasy families or watching television. They made attempts at trying to understand what was happening in the family and were able to clearly identify domestic violence as abnormal behaviour and relating. Consistent efforts to build strong support networks were also made where connections to extended family members or others provided an alternate sense of belonging. External connections included teachers, peers, coaches and God. Lastly, participants in the study also attempted to create their own sense of order or personal power sometimes tangibly by engaging in activities such as cleaning or straightening out their environment.

Ultimately, one of the most prominent factors capable of disrupting the generational transmission of violence is the ability of the now-adult to face the emotional reality of the past and present intimate relationships (Mcqueen, Itzin, Kennedy, Sinason & Maxted, 2009). Granted that consistent exposure to domestic violence can certainly undermine every aspect of a person's life but an exclusive focus on pathology, as depicted in most of the research, appears to remain a somewhat fractional description of the full range of human experience.

There is another side to victimisation, the positive ways for instance in which people coped, survived and demonstrated vitality, courage and willpower (Anderson, 2010). Trauma doesn't transform just for the bad, but also for the good (Fosha, 2002). Walsh (2003) provides a balanced viewpoint on the subject when she states:

Notions of resolution and closure, of 'getting over' a tragedy so common in our culture, are faulty. Instead, over time those who are resilient strive to integrate the fullness of their experience into the fabric of their lives, into the persons they later become and the relationships they develop (p. 58).

It is this transformational capacity that can be harnessed and channelled towards healing and restoration of the self and this phenomenon is closely linked to Antonovsky's (1979; 1987) SOC and Salutogenesis.

b) Salutogenesis and a SOC

Aaron Antonovsky first coined the concept of generalised resistance to stress and mobilisation of resources in his theory of Salutogenesis where he linked inner fortification to a SOC within the individual, or a person's own individual way of interacting with the world, as well as to external factors (Almedom, 2005).

Antonovsky (1990) maintained that suffering is inherent in human existence and associated this, in a metaphorical way, with being in the 'river of life' where everyone is subject to the force of entropy and dangers. For him, the mystery was not the recognition of the origin of pathology but rather the search for an understanding of how some people, despite the same experiences, seemed to suffer less than others while moving towards health.

Deterministic ways of perceiving human functioning began to be challenged in the idea that health and pathology are not dichotomous, as depicted in the classification of individuals as healthy or sick, but are essentially extreme poles on a continuum (Antonovsky, 1990, 1996). No individual is ever at the extreme end of either pole from the moment of birth until their moment of death and there are forces pushing them in either direction, making them partly healthy and partly unwell. Antonovsky acknowledged the importance of early childhood experiences and interpersonal relations, however, he perceived these as being shaped by the macrosocial environment and society (Antonovsky, 1990).

The salutogenic approach, although perceiving the struggle to move towards health as never fully successful, concentrates on those factors which help people to cope as well as possible throughout their lives (Antonovsky, 1990). In the search to locate the individual along this continuum of functioning, the salutogenic orientation leads us to exploring 'the story' of the person. This story may include the objective risk factors, such as exposure to domestic violence in childhood, but also includes other subjective, salutory factors which have actively promoted movement towards the health end of the continuum. In salutogenesis the self refers to the basic layers of the personality which provide continuity and purpose but identity is also deemed to involve the social role complex in the social environment and the latter can be exchanged due to the environmental demands placed on the individual as well as life experiences (Antonovsky, 1987). A strong self is essential to the development of a strong SOC and makes possible a strong identity, manifesting itself in this identity but not being dependent upon it.

Salutory factors, which are known as Generalised Resistance Resources (GRR's), are said to include a sense of identity (ego), intelligence, social relationships, cultural stability, beliefs, genetic predispositions and, most importantly, the concept of inner SOC. The SOC was specifically defined by Antonovsky as an enduring feeling of self-assurance, a global orientation which was derived from the individual's inner sense of comprehensibility, as when inner and outer stimuli are predictable and can be explained and understood, manageability, where resources are available to meet the demands posed by these stimuli,

meaningfulness, pertaining to these demands being worthy of investment and engagement (Almedom, 2005; Makola & Van den Berg, 2008), and emotional closeness, which was added later (Billings & Hashem, 2010), and marks the fact that social support is central to a strong SOC. However this last addition could be perceived as forming part of manageability in terms of relationships and the capacity for close attachments being personal resources available to the individual.

Overall, a SOC is interwoven with a person's individual way of perceiving the world as well as their own frame of reference (Makola & Van den Berg, 2008). It specifically encompasses a person's attitude towards experiences as well as their ability to make responsible choices in several life spheres such as relationships, affect, thoughts and existential issues. Antonovsky devised the Orientation to Life Questionnaire (OLQ) as a self-report measure of these three components of SOC (Antonovsky, 1993).

The SOC determines the person's position along the health-disease continuum and the person's movement toward the healthy end (Antonovsky, 1987). Through comprehensibility the person makes sense of the environmental stimuli and this essentially means that their world is less noisy, chaotic or disordered but becomes structured and clear. Manageability enables the individual not to feel victimised by events or by life and meaningfulness promotes emotional understanding and motivation to engage with life's challenges (Antonovsky, 1987). Individuals set boundaries with regards to what is important within their own world and how this is managed through a flexible SOC is often much more important than what takes place on the outside. Within these boundaries are one's inner feelings, immediate interpersonal relations, main activities such as work or studies and existential issues (death, isolation, conflict).

The stronger the SOC the more successfully the person will cope with inevitable, continual and built-in stressors in human existence, enabling the individual to select a mode of coping and the resources which are most useful to the particular complexity which one is facing (Antonovsky, 1990). The concept of a SOC has been found to be a most useful construct in the areas of health and well-being research and in a South African study of university students, in particular, significant correlations were found between the meaningfulness component of a SOC and a general purpose in life (Hutchinson, 2005).

Through the presence of GRR's the individual's SOC is built up as he/she is exposed to consistency, participation in outcome of life events and balance between the demands placed upon the individual and the resources available to meet these (Antonovsky, 1987).

This SOC is also closely tied to the notion of coherence that underpins the AAI as a means of exploring early attachment experiences. The ability of the individual to provide a coherent narrative is considered one of the most important factors in the interview (Buchheim & Kächele, 2003). In fact, researchers associate this coherence with truthfulness, succinctness, relevance and clarity of discourse (Grice, 1975, 1989), all of which connect to Antonovsky's

dimension of meaningfulness and comprehensibility or the individual's ability to provide a cognitively rational and emotionally consistent explanation of past experiences and their impact upon the self. This would also include the person's ability to make responsible future choices about their life such a career options, spirituality and relationships. Although the concept of a coherent narrative on the AAI and Antonovsky's SOC do have distinct meanings, they seem to be conceptually related at least with regards to interpersonal functioning. However, Antonovsky's SOC for instance does not connect coherence purely to past and early attachment experiences with parents like the AAI does and tends to focus on attitudes towards the future and not just towards the past and present. The coherence element of attachment however is more specifically related to the capacity of the individual to monitor and reflect on their own complex thoughts, feelings and verbal narratives (Slade, et al., 2005). This implies flexibility in integrating early experiences into a coherent internal working model where incompatible experiences are not split off (Slade, et al., 2005).

The SOC in an individual takes time to develop, the basis of which is laid in childhood and is inevitably disrupted in the turmoil of adolescence, only being tentatively strong at this developmental stage (Antonovsky, 1987). It is only with entry into adulthood and with exposure to commitment to others, social roles and work that the experiences of childhood and adolescence are either reinforced or reversed in either direction of the health continuum. There are many roads to a strong SOC and this may be promoted in many social and cultural contexts, sometimes even at the expense of others, although, Antonovsky clearly advocated the values of autonomy, freedom, creativity, equality, dignity and respect for all (Antonovsky, 1990).

Exposure to domestic violence will almost certainly affect the young adult's resources and ability to face problems successfully, on the other hand it is precisely such experiences that if processed and understood in early adulthood, may strengthen the individual's SOC or more specifically, impact comprehensibility, manageability and especially meaningfulness thus transforming and perhaps revitalising the sense of self. Antonovsky (1987) did warn that by the age of 30 a person's SOC appears to be more defined and is not likely to be strengthened. However, life experiences before this age level appear to mould and establish the individual's SOC. Eriksson and Lindström (2005) also maintain that an individual's SOC may not be as fixed in adulthood as Antonovsky first thought.

Although pain and trauma are unavoidable in life, ultimately young people are not passive victims but active and instrumental in exploring alternatives in the construction of their own identities, in the development of their relationships and in fostering their own sense of spirituality. As stated by Holt et al. (2008) there is seldom a direct causal pathway leading to a particular outcome and young people are not inert but are participants in their own social world. This study aims to interview young adults at the time when they are in the midst of this construction and exploration, so as to be able to tap into the 'how' or the process of this construction.

Traumatised persons require mental holding in safe environments where they can make sense of their experiences and of how these have produced inner affective disturbance and relational difficulties (Levy, 2004). Levy (2004) argues that such individuals also require the validation of their internal reality as well of their actual experiences of trauma. Essentially it is the function of validation that is often missing in environments of trauma where the mother fails, for a variety of reasons, to reflect the child's mental state (Levy, 2004). In this lies the development of a coherent sense of self and psychological resilience. Stubley (2004) maintains that the individual would also need to acknowledge the presence of their own destructiveness and simultaneously that damage can be repaired. Since interpersonal trauma attacks trust in the goodness of others and in the individual's capacity to love, reestablishing trust in self and then in helpful others is pivotal to the process of healing.

3.9 Summary

Despite the focus in the literature on the long-term detrimental effects of exposure to domestic violence in childhood, the personal experiences of children and adults exposed to violence in the family are seldom investigated by researchers (Stanley, 2011). Witnessing domestic violence is traumatic but the fact that this takes place within the context of personal family relationships may further exacerbate its consequences. Effects of exposure to domestic violence are therefore varied and affect children, adolescents and adults in multiple ways across intrapsychic and interpersonal levels. These experiences need to be contextualised and detailed so that resilient processes in individuals and the way these affect the development of mental representations, intergenerational transmission of violence and their capacity to develop healthier relationships, may be better understood.

CHAPTER 4

THEORETICAL FRAMEWORK

4.1 Introduction

The development of a sense of self and internal representations of others and relationships are best understood when explored within theoretical frameworks that recognise the impact of childhood experiences upon psychological development. Since the focus of the study is upon internal formulations of self and others as well as the impact of traumatic childhood environments upon these, the use of theoretical frames that parallel this focus such as Object relations and Attachment theory are employed.

Object Relations and Attachment theories both converge on the importance of human relatedness (Calabrese et al., 2005; Fishler, Sperling & Carr, 1990) while integrating the intrapsychic and interpersonal dimensions of the individual in his/her relationship context. For this reason, these theories appear well suited to the exploration of internal representations and attachment states of mind in individuals exposed to domestic violence in childhood. Theoretical concepts conceived by Melanie Klein, Ronald Fairbairn, Donald Winnicott, Mary Ainsworth, and John Bowlby are therefore applicable to the exploration of development in the individual exposed to adversity. Although these theorists' viewpoints predominate the discussion, there are other authors, whose contributions fall under the umbrella of attachment theory and Object Relations, which are also included.

Melanie Klein's concepts of the paranoid/schizoid and depressive position (Klein, 1932), for instance, are very valuable in the study of the inner struggles in development, particularly those rooted in traumatic experiences which break down perceptions of the world and of others as generally benevolent and trustworthy. But her theoretical viewpoint focused predominantly upon the internal world of the infant to the exclusion of the effect of environmental adversity and attachment trauma (Bretherton, 1992; Ogden, 1984). British middle school psychoanalysts like Donald Winnicott and Ronald Fairbairn, on the other hand, emphasised the effect of caregiving upon internal representations and their theories were not necessarily incompatible with all aspects of Kleinian psychoanalysis. They accepted many of Klein's notions but also maintained that the primary motivation of human beings was object seeking and not drive gratification (Fairbairn, 1952; Winnicott, 1958, 1971). Many of their theoretical concepts, such as that of transitional objects (Winnicott, 1958b, 1971) and the moral defence (Fairbairn, 1952, Rubens, 1994) as examples, lend themselves towards explanation of crucial aspects of separation and maturation which may be subjected to greater complexity in environments of domestic violence and are therefore included in this study. It is accepted that no single theory is perceived as complete or beyond scrutiny and ideas are valued and evaluated for their relevance and usefulness.

Because both Object Relations and Attachment theory may tend to focus on more rigid demarcations between normal and abnormal development, the crucial aspects of coping, resilience and adaptation in individuals exposed to adversity in childhood seem to be largely overlooked. Development may therefore, tend to be perceived as an all or nothing process which disregards individual differences and the complex dimensions of experiences. For this reason Salutogenesis is included in this discussion as a theory of internal resilience, outlook on life and capacity to use resources (innate and external) to live a balanced life. It highlights the use of protective factors and experiences to develop an orientation to life that enables coping and meaning along a continuum of development. Salutogenesis as derived by Antonovsky (1979) acknowledged the potential impact of trauma on the self and on relationships as well as the individual's use of defences in coping with life, and as such is not perceived as being necessarily incompatible with psychoanalysis.

This chapter begins with an exploration of the application of certain theories to the understanding of the dynamics of domestic violence in particular. This is followed by a review of psychological development according to the theoretical frameworks chosen for this particular study. Issues pertaining to the developing sense of self and the importance of the relationship with the primary maternal object in childhood provide the developmental scaffolding necessary for the study. This is followed by an exploration of the concepts of dependency and separation, including aspects such as mentalisation and the capacity to be alone. Maturational processes and the role of defensive organisations are also discussed.

Caregiving failures in contexts of adversity, the effects on attachment and consequently upon the transmission of attachment states of mind are examined next due to their particular relevance to exposure to domestic violence in childhood. Insight into the couple that is violent and the family atmosphere that is created, as potential intergenerational transmission of trauma, are also considered since this highlights the impact that domestic violence may have on caregiving and frames the context of the child growing up with family violence. Walker's cycle of domestic violence is examined through a psychoanalytic lens as an explanatory model of domestic violence because it may be especially useful for health professionals who have experienced domestic violence in childhood and who may have access to this thesis.

Finally, in broadening the focus, attempts at recovery through partial or ultimate disengagement from pathological objects and experiences are discussed and carry forward the idea that development is a dynamic process and that no issue is identical or of exact significance to any two individuals simultaneously.

4.2 Theoretical applications to the understanding of domestic violence

Feminist and Family Systems theories seem to dominate the current understanding of domestic violence (Dutton, 1995; Fonagy, 1999a; Zosky, 1999) in psychology circles and both theories have valuable contributions to make to the understanding of this

phenomenon. Family Systems theories focus on circular patterns of causality, reciprocity and the attainment of homeostatic balance in the family (Giles-Sims, 1983). The family system is perceived as being part of a larger social system which needs to inherently change before violence in the family may be halted (Giles-Sims, 1983).

The limitation of Systems theory lies in the fact that it fails to address the intrapsychic sphere in only providing an interpersonal description of how domestic violence happens in the family system (Zosky, 1999). It also fails to account for why domestic violence occurs in some relationships and not in others (Zosky, 1999). In the areas of research and treatment, studies which are inclusive of the entire family system are notoriously difficult to conduct (Zosky, 1999) and couples therapy with a dyad where one partner is abusive can be dangerous and is not often recommended.

Concurrently, Feminist theories assign domestic violence to socio-political ideologies where acculturated gender roles are defined by society along the lines of aggression and dominance in males and submissiveness and passivity in females (Dutton, 1995; Zosky, 1999). Both theories leave the intrapsychic domain and individual differences unattended, failing to account for contradictory evidence such as the fact that abuse rates are equal if not higher in homosexual and lesbian relationships (Dutton, 1995; Fonagy, 1999a).

Alternatively, object Relations and Attachment theory add new depth of understanding to the complexity of domestic violence, providing a relevant framework for understanding intrapsychic and interpersonal dynamics present in relationships characterised by destructiveness (Crabtree, 2009; Doumas, Pearson, Elgin & Mckinley, 2008; Zosky, 1999) and the effects of exposure to such violence in childhood. Although neither theory is exhaustive in its explanation of domestic violence and its effects, both theories demonstrate how internal representations and the ability to mentalise are formed in early attachments, and how persistently rejecting and traumatising childhood experiences impede secure attachments from developing (Dutton, 1995; Fonagy, 1999a).

Both theories allege that the individual has to first find himself/herself in the caregiver's mind before the development of the true psychological self takes place (Fonagy, 1999a). Children, therefore, seek objects as sources of relationship and relating and not as repositories for the expulsion of emotions (Fairbairn, 1952; Solt, 1996). It is this connection that either provides the psychic safety for future healthy development or may create an intolerable inner space that must be escaped and early traumatic experiences which may be compulsively re-experienced with a partner later in life (Crabtree, 2009; Zosky, 2009).

It would be relevant, at this stage to state that relational psychoanalysis has been critically appraised, especially within feminist theory circles, due to its apparent exclusive focus on the responsibility and effectiveness of the mother in healthy (or disrupted) child development (McCluskey, 2010). This could be perceived as perpetuating the misogynistic

ideology which is prevalent within discourses of domestic violence in society at large where women are often pathologised (Haaken, 2010; McCluskey, 2010).

Although these are valid concerns, it should be noted that the theoretical focus of relational object relations and attachment theory was always the importance of nurturance, safety, availability and connection (not necessarily of gender) in facilitating the infant's development of self and capacity for independence and autonomy. The therapeutic context in which these theories flourished should also be highlighted, given that both maternal and paternal functions were often extended as models of that of the therapist (whether male or female).¹³

In fairness, Attachment theorists did later extend their understanding to include a separate but equally important dynamic with the father figure, as did Winnicott, which impacts the development of self and relationships in a significant way (Fonagy, 2001; Loparic 2002). This development would perhaps have aligned with Antonovsky's (1996) views, since he considered the role of the father in child rearing to have been marginalised by the health system. For the purposes of this study, however, the term maternal or mother is denoted to be referring to the primary caregiver of the infant.

Particular consideration is given to developmental aspects of attachment and internalisation of objects in childhood and an attempt is made to describe and explain the possible effects of exposure to domestic violence and the ways that individuals may adapt to such exposure. This is done while acknowledging the potential damaged representations in parents involved in this type of relationship as well as the domestic atmosphere to which children are exposed. Also of consideration is hope for change and reparation, which can also take place for the adult exposed to domestic violence in childhood.

4.3 Attachment theory, Object Relations and Salutogenesis

Both Attachment theory and Object Relations theory focus on the ways in which people symbolise their relatedness to others (Calabrese et al., 2005) and it is within this relatedness that a sense of self is developed. Object Relations holds the view that the way an individual represents the self and others develops in relationship with their parents and continues to influence interpersonal life throughout the lifespan. Attachment theory, similarly, maintains that children's expectations of caregivers' emotional availability and responsiveness are foundational for their working models of self and others, influencing subsequent behaviours in adult relationships (Calabrese et al., 2005; Collins & Sroufe, 1999).

Aaron Antonovsky, in his theory of Salutogenesis, also acknowledged the importance of child rearing influences (amongst other concepts which include the broader environment) and social/interpersonal experiences upon the development of a strong sense of self and

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¹³In the sense of confirming legitimate affect and not in confirming a grandiose infantile self in the adult client (Gullestad 2001).

consequently a SOC in the individual as an adult (Antonovsky, 1996; Campbell & Pretorius, 2004). All of these views, therefore, consider childhood experience as fundamental to psychological development. Also, the sense of self appears to be of central importance in conceptualisations of adult psychological health in all these frameworks. The purpose of this study is, therefore, not to deny or reinforce ideas of pathological development in environments of domestic violence, but rather to bring a clearer, more nuanced and more realistic understanding of internal representations of self and others, as pertains in particular to a sense of self, within a continuum of behaviour and being, in contexts of adversity.

In the discussion that follows, normative development in childhood and outcomes for the adult individual will be explored as will interruptions to this. Since it is impossible for the sense of self to be shaped in the absence of personal relationships, interpersonal relations will feature prominently.

4.3.1 Human Development as a dynamic process

Attachment and Object Relations theories' fundamental focus on the critical importance of early relational experiences and the impact of these upon the development of the self and capacity for connectedness, marked a significant departure from Freud's emphasis on biology, his mechanistic reliance upon drive theory and the assumption that the inner self seeks relationship merely for the purposes of fulfilling impulses (Fonagy, 2001; Gullestad, 2001; McCluskey, 2010). In particular, Winnicott (1971) declared that a focus on unconscious drives or instinctual inclinations as a way of explaining total human experience was somewhat deficient:

..we seldom reach the point at which we can start to describe what life is like apart from illness or absence of illness. That is to say, we have yet to tackle the question of what life itself is about...We now see that it is not instinctual satisfaction that makes a baby begin to be, to feel that life is real, to find life worth living (Winnicott, 1971, p. 98).

Similar sentiments were evoked from Antonovsky (1996), in relation to medical frameworks which perceived health in terms of the absence of disease or infirmity and excluded the concept of holistic health which he conceptualised in terms of mental, physical, interpersonal and community well-being. Thus, general well-being came to be thought of as not entirely dependent upon the individual but as impacted upon by the interaction between people, the structures of society and the living context (Lindström & Eriksson, 2005). Despite his deviation from the focus on the unconscious and intra-psychic processes, Antonovsky (1996) maintained that reciprocity and reaching out to others are indicative of resourcefulness and coping and are therefore crucial to a strong core self.

Freud himself eventually acknowledged that there is a reciprocal relationship between the ego and the object whereby the ego modifies the object through identification and

introjection¹⁴ and in turn is modified in its dynamics and structure (Freire, 2007). It is within relationships that human beings learn to love and understand themselves and others, and it is also within relationships that internalised hatred and wounding occurs (Howe & Fearnley, 1999).

Despite this significant paradigm shift, the structure of the self and emotional difficulties were perceived by many object relations theorists, such as Melanie Klein, as being mostly governed by the interplay between infantile fantasies, libidinal energies and aggression (Klein, 1932), while the reality of environmental trauma and caregiving failures remained obscured (Kobak & Madsen, 2008; McCluskey, 2010). For example, at the time, children were perceived as not experiencing grief as a response to loss, due to insufficient ego development (Berghaus, 2011). This was a concept that was strongly challenged by Bowlby in his research work on attachment (Bowlby, 1969, 1988).

Consequently new notions began to arise in psychoanalytic circles, suggesting that early disturbances in children were due to relationship problems between the primary caregiver and the infant and not due to the internal mental dynamics of the child (Loparic, 2002). This concept can be extended to later developmental stages where difficulties in childhood and adolescence do not purely reside within the individual but emerge within the quality of relating between the self and others.

Such observations were not lost on Antonovsky (1996), who later related that human distress exists within the integrated organism always having psychic, interpersonal and situational dynamics, perhaps even being expressed somatically, but never existing or originating on purely one level. In fact, he severely critiqued the medical model's tendency to look to the individual for causes of abnormality and referred to it as 'downstream focus' whereby the care system is solely preoccupied with 'saving drowning swimmers' instead of asking how they landed up in the dangerous part of the river in the first place (Antonovsky, 1996). In extending the same metaphor he stated:

We are all, always, in the dangerous river of life. The twin question is: How dangerous is our river? How well can we swim? (Antonovsky, 1996, p. 14).

Various relational psychoanalysts, among them Winnicott, Fairbairn, Bowlby and Ainsworth, also made considerable headway in emphasising the formative nature of the external environment (specifically the quality of caregiving) in its impact on the internal world of the infant and subsequently upon the child's and adult's experience of intimacy and conflict in close relationships (Ainsworth, 1969; Berghaus, 2011; Bowlby 1988; Davar, 2011; Fonagy, Gergely & Target, 2008; McCluskey, 2010; Rubens, 1994; Winnicott, 1971). Possibly for the first time, human development came to be conceptualised as a complex and

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¹⁴ Introjection is an intra-psychic process whereby the child, through mental fantasy, takes in something perceived from the world and internalises it, for example the internalisation of deprivation, acceptance or danger.

in-depth interplay between both intrapsychic states and external influences. Freire (2007) maintains that it is vital to include the social context in which early relationships are formed and shaped as this links the impact of external factors with the internal processes of a person.

The application of these childhood dynamics as conscious and unconscious influences on adult relating and being, became somewhat controversial, given that studies have shown that continuity of attachment styles and permanence of mental representations acquired in childhood, predict affect and behaviour in adult close relationships (Calabrese et al., 2005; Waters, Merrick, Treboux, Crowell & Albersheim, 2000). The recognition of the impact of early relationships upon adult functioning is strongly emphasised yet adult attachment theorists also admit that attachment styles don't always remain stable into adulthood (Berghaus, 2011; van Ijzendoorn, 1995; Slade, Grienenberger, Bernbach, Levy & Locker 2005). It could be argued that childhood experiences do not necessarily predetermine outcome, nevertheless, the potential impact of childhood experiences upon adult relating is best understood along a continuum of development rather than dichotomously (healthy vs pathological). In fact, Antonovsky challenged the assumption that there ever was a naturally occurring state of 'health' which could be classified as the 'norm' (Antonovsky, 1998), and yet this 'norm' assumption appears deeply entrenched in and fuelled by classical views of deviation and pathogenesis of the self. Antonovsky's theory remains novel in the sense that he looked for the origins of health rather than the causes of pathology and focused on the curious fact that some people, despite experiences of hardship, do not develop symptoms but stay well (Antonovsky, 1979).

For Fairbairn the basic striving of the individual was for relationship, as human beings are object seeking in essence, while for Winnicott, it was the ability of the ego¹⁵ to eventually relate to a separate 'other' (Fairairn, 1952; Fonagy, 2001; Rubens, 2001). This links strongly to Attachment theory's notion that the goal of the infant is desired proximity to the mother figure who embodies physical and psychological security and safety (Fonagy, 2001). The relevance of personal meanings or psychic reality of these early relationships for the emerging individual is thus central to human development (Gullestad, 2001; Rubens, 2011).

Attachment, though, has come to focus more on the extent and nature of one's reliance on an attachment figure whereas Object Relations tend to be considered in more multidimensional ways, focusing on affect, interpersonal awareness, empathy, management of aggression and identity coherence (Calabrese et al., 2005). It has been found however, that the Object Relations dimensions of complexity of representations and capacity for emotional investment in relationships are connected to attachment security (Calabrese et al., 2005).

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¹⁵The use of the word ego here is synonymous with the entirety of the psychic **self** and different from Freud's compartmentalised notion of id, ego and superego, although these concepts are not negated by the theorists but conceptualised in different ways. As for instance, in Winnicott's different positions of self-development: dependency, transition and maturation and in Fairbairn's endopsychic structure.

Salutogenesis enhanced both of these views by focusing on broader environmental processes, not only on the child-caregiver relationship, as well as on the development of innate resources enabling an individual to adapt. This theory thus became primarily concerned with what makes individuals strive towards health, connectedness, safety and intimacy despite the presence of adversity (Antonovsky, 1998). This is in direct contrast with the psychoanalytic focus on disturbance and developmental barriers after serious caregiving failures.

When referring to the theory of Salutogenesis, Riese (2005), locates a person's SOC within this core sense of self which encompasses core narratives and is impacted upon by experiences and personal interpretation (meaning attributed) in making up who the individual is. SOC is mainly developed in the first decades of life as individuals learn how to cope with life in a general sense (Lindström & Eriksson, 2005).

In his work with individuals experiencing adversity, Antonovsky became aware of certain attributes in persons which fostered successful coping and prevented people from falling ill when under stress (Antonovsky, 1996). He termed these attributes GRR's which include childhood living conditions, ego strength, education, social support, knowledge, religion and experience amongst other dimensions (Billings & Hashem, 2010; Ristkari, Sourander, Rønning, Piha, Kumpulainen, Tamminen, Moilanen & Almqvist, 2009). GRR's assist the person in making sense of and assigning meaning to stressors. Correspondingly, individuals who have developed a strong SOC will have the ability to utilise GRR's available to them.

Through a strong SOC, the individual has the capability to use these attributes to cope and successfully manage the many stresses encountered throughout life without the development of serious disturbance. For Antonovsky, the SOC was deemed to originate in childhood, remaining tentative until adolescence, when identity issues were presumably resolved, and continued to develop over time until the age of 30. (Antonovsky, 1979; Ristkari, et al., 2009).

A person's SOC is shaped by experiences which fall within several dimensions and which include comprehensibility or the predictability and understanding of life events and this also includes the feeling of being understood by others. This concept is reminiscent of Fonagy's (1999b; 2008) theory of reflective functioning where the individual's ability to mentalise or reflect on their own mental states and that of others provides the template for security of attachment.

The second dimension of SOC is manageability or load balance, which is the perception that life events are bearable and that resources are available to deal with life challenges. Meaningfulness, the third dimension, refers to these life events making sufficient emotional sense that the person has the motivation to engage with them. The fourth and final component is emotional closeness, which has recently been added, which refers to the

extent to which a person has emotional attachments to significant others and feels a sense of belonging to a community (Billings & Hashem, 2010; Campbell & Pretorius, 2004).

Before adult relationships develop, however, the individual's sense of self seems to be formed within an environment of relatedness that precedes the maturation of the internal space. Both attachment theory and object relations theory focus on the ways in which people symbolise their relatedness to others (Calabrese et al., 2005) and it is within this relatedness that a sense of self emerges, as experiences with others are internalised as mental representations of self, others and relationships.

4.3.2 Object representations and internal working models

Object representation refers to an internalised mental image of a significant other which contains aspects of the person but also fantasies about them and becomes a representation of the relationship between the infant and his/her caregiver (Fairbairn, 1952; Klein, 1937; Ogden, 1984; Segal, 1973). These representations form within the context of an attachment relationship and tend to be carried forward, influencing thought, feeling and behaviour in adult relationships (Pietromonaco & Barrett, 2000; Ribeiro, Target, Chiesa, Bateman, Stein & Fonagy, 2010). This is very similar to the concept of internal working models in attachment theory, which are theorised as mental representations containing content about attachment figures and the self and are stored within a well-organised structure and include affect and memories of interpersonal experiences (Pietromonaco & Barrett, 2000). Goodman (2002) defines internal working models as being conceptually broader and more absract than object representations. While object representations are perceived as the building blocks of personality structures, the concept of internal working models refers to the patterns and specific organisation of these object representations, their function and structure, which are related to the development of attachment states of mind (secure or insecure). Goodman (2002) suggests that this difference is not always apparent or clearly detected in empirical research studies leading to the interchangeable use of both terms.

Internal working models are derived from how the attachment figure responds to the child's needs (Pietromonaco & Barrett, 2000). If the caregiver is reliable and available, the child will develop a representation of the self as acceptable and worthwhile (Borelli, Crowley, David, Sbarra, Anderson & Mayes, 2010; Browne & Winkelman, 2007; Pietromonaco & Barrett, 2000). Since the self is inextricably connected to others, others may be incorporated into representations of the self through interactions and experiences which provide standards for self-evaluation. Fonagy and Target (1997) extended the concept of internal working models to include not only mental representations of self and others but also the functions which underpin these representations such as mentalisation, for instance.

According to Pietromonaco and Barrett (2000) the internal working models formulated in infancy and childhood are likely to become more complex and sophisticated as the

individual develops more abstract, cognitive abilities but they also demonstrate propensity for continuity and stability over time.

Ultimately the way an individual represents the self and others develops in relationship with their parents and continues to influence interpersonal life throughout the lifespan (Browne & Winkelman, 2007; Collins & Sroufe, 1999; Fonagy, 1999b). Children's expectations of caregivers' emotional availability and responsiveness are foundational for their working models of self and others, influencing subsequent behaviours in adult relationships (Calabrese, et al., 2005; Collins & Sroufe, 1999). Therefore the emphasis lies on the quality of relationship existing between the child and their primary caregiver as a template from which to experience the self and others.

4.3.3 The primary maternal object

Winnicott (1971) maintained that it is only through relationship that we can see the reflection of who we are. The construction of the self is theorised to essentially begin with a special union between infant and primary caregiver within which the child's emotions and impulses are managed and the infant feels protected, related with and safe from unwanted intrusions (O'Brien, 2010; Winnicott, 1945; 1971). It is within this maternal holding environment that a sense of continuity of being and creativity is facilitated (Winnicott, 1960a; Zornig & Levy, 2011). The provision of such an environment seem to be essential if the child is expected to develop optimally through life and to develop, through internalisation, a SOC that enables him to manage the internal and external stressors of life. As early as infancy and childhood, individuals strive for stability, predictability and meaning that motivate further development (Lundberg, 1997). Manageability develops as a result of parental response to the child's actions and parents with high SOC are likely to raise children who accumulate life experiences that will for the basis for a strong SOC in them (Lundberg, 1997). It is likely that the presence of domestic violence will influence and may disrupt the provision of such an environment but the extent of the interruption remains difficult to ascertain given the uniqueness of the individual, the multifaceted range of experiences with others, the timing of these, as well as the maturation of the defences as a person grows older.

Unlike Winnicott, Fairbairn believed the self to be a starting point, all be it not fully mature, for all interpersonal nuances and as being capable of internalisation suggesting the presence of complex mental mechanisms in the infant (Loparic, 2002; Rubens, 1994). Fairbairn conceptualised the original self as a singular unitary whole, pre-existing and 'original and pristine', shaping and being shaped by all relational dynamics (Fairbairn, 1952). In attachment this was the 'germinal form' of the infant's capacity for relationship building (Bowlby, 1988). The elementary self was so interconnected to the environment that it was dependent upon bonding stimulation for further development (Gullestad, 2001). This initial bonding set the foundation for participation in school aged children and later social competence (Collins & Sroufe, 1999).

Initially, the child has no concept of any other option other than dependence upon the mother figure (Fairbairn, 1950; Fonagy, 2001; Winnicott, 1960a) and it is this complete dependency which is fundamental to the later development of autonomous functioning.

For Klein, the endopsychic structure or self of the infant was a fully personal internal world of object representations (Crabtree, 2009). Klein focused on theorising from the infant's perspective and saw the emotional development of the self as dependent on how the child related to external objects. The primary caregiver was essentially the child's first object of love and hate (Klein, 1937). She was loved when she fulfilled the infant's needs and was hated when she frustrated them. Development included the establishment of defensive structures to manage these feelings and the associated anxiety.

For attachment theorists the goal of human behaviour is conceptualised, not as a striving for a decrease in instinctual anxiety nor self-expression, but rather for survival and safety, in that the environment's failure in regulating the infants' internal states can lead to an escalation of dysregulation and tension as could take place in traumatic environments (Bowlby, 1969; Rubens, 1994). How the child ultimately learns to regulate his own emotions relies heavily upon how the caregivers regulate their own and their child's affect and this dyadic regulation continues throughout a person's life (Sonkin, 2005). As children develop and become more apt at expressing their needs and emotions, they learn self-regulation skills intrapsychically and within relationships. Domestic violence, as characterised by escalated states of aggression and hostile emotions, could be deemed to interrupt or establish barriers to this type of learned, internalised self-regulation.

At each developmental phase, foundations are laid to support the capacity for intimacy with peers (Collins & Sroufe, 1999). Since this capacity emerges out of early experiences of feeling understood and validated, patterns of emotional regulation are also established within these relationships. Internal working models of self and others are thus created which guide children towards similar interactions with others.

Bowlby regarded the term 'dependency' has having inherent negative connections to regression while the term attachment was regarded as something positive, to be desired and fostered and indeed was perpetuated in different forms into adulthood, never being outgrown (Bowlby, 1988; Gullestad, 2001). Relevant to the use of the concept of attachment in later years is Fairbairn's idea of interdependence in mutually fulfilling and cooperative adult relationships (Rubens, 1994). However, these milestones appear to be dependent upon the quality of the child's initial state of merging with an attentive and available mother figure.

For Klein, the constantly frustrated child would engage in destructive impulses of hatred and aggression as he/she was dominated by impulses to destroy the love object who failed him/her. This love object was inevitably linked to everything he/she experienced (Klein, 1937). The infant would become driven by the death instinct and by its derivatives of envy,

aggression and omnipotence. Fairbairn's deprived infant is markedly different from Klein's aggressive one in that his/her neediness and entitlement are legitimate needs for the survival of the self (Celani, 1999).

The focus from the internal world of the infant to the quality of the caregiving is in stark contrast to Klein's perception of the child. This shifts responsibility from the infant to the adult caregiver. The mother is the first representative of the environment who must respond and adapt to the child's needs and it is her state of initial fixation or primary preoccupation¹⁶ with the infant that allows her to let her concerns and needs fade into the background and make provision for the child (Winnicott, 1960a). This 'good enough'¹⁷ mother has the capacity to establish and maintain a holding environment where the baby's needs are paramount and where continuity of being is not interrupted leading to the development of the ego or self (Kuchan, 2011; Zornig & Levy, 2011).

When children experience feelings of distress they naturally seek proximity to an adult who provides protection and comfort (Howe & Fearnley, 1999; Kobak & Masden, 2008). Protest or normal attachment behaviours such as crying, clinging and following signal the baby's distress and are dependent upon the child's cognitive appraisal of the maternal figure's availability and responsiveness (Bowlby, 1969; Kobak & Madsen, 2008). These behaviours generally evoke a protective and caring response by adults involved with the child. Experiences that trigger the attachment behavioural system and decrease exploratory attempts include feeling fear, loss or separation from the attachment figure either physically or psychologically as demonstrated by Mary Ainsworth's 'Strange Situation' study, which will be discussed later (Bowlby, 1988; Kobak & Madsen, 2008).

Through their attachment to each other both mother and infant develop a mutual affect signalling system and a deep emotional bond develops which is not interchangeable (Fonagy, 2001; Gullestad, 2001). During this bonding process the good enough mother is empathetically attuned and reflects back the infant's inner state, a process known as mirroring half while communicating what he/she is feeling without overwhelming him/her (Davar, 2010; Fonagy, 2001). Through the mother's face and gestures, the infant gets back a reflection of himself as she functions as a mirror to the child (Winnicott, 1971). Bowlby's notion of communication is central here as affect mirroring is more than the validation of experience by the mother but must support the child's sense of being someone who can

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¹⁶Winnicott referred to this state as a temporary but necessary form of madness during which the mother is obsessed with the infant's needs thus facilitating subjective omnipotence in the infant.

¹⁷Through the term 'good enough' Winnicott graciously acknowledged the human fallibility of the carer (be it maternal figure or therapist treating individuals seeking to work through developmental failures) (Gullestad, 2001).

¹⁸According to Fonagy (2001) it is the concept of mirroring which is closer to Bion's 'containment' or the mother's capacity to receive the child's projected anxiety and return this to the infant in a modified and more digestible form.

make things happen and who matters, ultimately it is this that enables the child to regulate emotional distress (Fonagy, et al., 2008).

It is within this state of subjective omnipotence that the child, through his thoughts and imagination, essentially creates the idealised object who responds to his/her every projected need (Davar, 2010; Kuchan, 2011; Winnicott, 1945). The mother protects the infant from the impingements of reality, facilitating the illusion that the world functions solely on the demands of his needs (Davar, 2010; Parry, 2010; Roussillon, 2010). It is inevitable that at some juncture the mother will be experienced as frustrating the child's needs and as not fulfilling the omnipotent creation of the infant (Kuchan, 2011; Pearce, in Simanowits & Pearce, 2003). This will give rise to frustration and through his destructive instincts the baby will express aggression towards the mother. If the mother does not retaliate or withdraw but is able to contain this destructive anger without being destroyed, the object begins to be experienced as authentic and real but separate.

In Kleinian terms, the child, in order to protect the loving feelings towards the object from rage and hatred, splits the object into good and bad parts and introjects the good parts into the self when satisfied and the bad parts when frustrated (Klein, 1937). At this stage, the infant occupies the paranoid-schizoid position where, at times, the self feels disintegrated within the constellation of anxieties and defences that threaten to engulf him/her and bring about persecution and the threat of annihilation that the various anxiety states can produce.

Annihilation anxiety is perceived as a common experience in childhood which arise from fears of abandonment and loss of the love object (Klein, 1937) and due to lack of differentiation, to potential loss of self. Annihilation anxiety may be magnified for children who witness violence between parents and may range from a mental awareness of the tension and aggression to panicked responses, in environments of insufficient safety and exposure to psychic trauma (Hurvich, 2003). Hurvich (2003) referred to its perpetuation as fears of being overwhelmed, of self disintegration, of the potential breakdown of object representations and of the loss of self through merging. These anxieties became connected to surviving a significant psychic danger in the sense that personal safety was threatened by the potential loss of the mother and by the direct violence that may have been experienced by the child. The urge to seek proximity to the caregiver was therefore intensified which inevitably made exploration and separation very difficult. The lack of separation, which would be natural progression for the child, became interrupted leading to the possibility of simultaneous fears of merging and loss of self.

4.4 Individuation

4.4.1 Dependency and separation

The issue of dependency and separation is inextricably connected to the idea of the good enough mother (Winnicott, 1960a) and her capacity to hold the child's disillusionment. Kuchan (2011) extends the notion of 'holding' anxiety and rage at unfulfilled needs, to one of not just having destruction contained but one of also feeling loved by the object as the mother is able to tolerate the infants' frustration. Simultaneously, the mother also inevitably fails to meet every need or to satisfy every frustration of the infant and the deidealisation of the mother can then take place. In experiencing the real mother who can be loving and containing but who can also be frustrating and at times, unavailable, the infant develops the capacity to differentiate between internal and external objects (Cartwright, 2002; Roussillon, 2010).

For Fairbairn, frustration and rejection are inevitable at some stage in the relationship and threaten the infant with the loss of the object and of love (Fairbairn, 1952; Loparic, 2002). Since the infant can neither abandon nor control the mother, a splitting defence is employed whereby the object is split into good and bad parts which can be kept separate from each other allowing the dependency to continue (Pearce, in Simanowits & Pearce, 2003). The self essentially becomes segmented into a central self and two endopsychic structures (the libidinal and anti-libidinal self). Since the impingements at this stage are tolerable and experiences of the object as 'good enough' predominate, the central self is not excessively constricted by the segmentation (Fairbairn, 1952).

It therefore follows that the maternal object is created subjectively within this illusion first before it can be found as an objective other, which consists of both responsive and rejecting parts (akin to Klein's (1937) notion of the integrated representation of the parent achieved through development of the depressive position). In environments of domestic violence this attunement between caregiver and infant is likely to be seriously disrupted which could negatively affect the mother's ability to protect the child and to foster the initial, much needed, dependency. The stage of dependency is a necessary precursor to the development of independence in the child, adolescent and later adult, enabling him to develop a stable sense of self which is differentiated from others people's (Žvelc, 2010). Through initial dependence the person develops a secure base to be able to transition into a state of separation and individuality. If unable to do this, the person may experience difficulty establishing separatedness.

During early dependency, the 'true self' emerges and begins to have an experience of contact with the external world, being strengthened (Winnicott, in Esman, 1990). In repeated daily interactions the child also begins to develop expectations of the security of

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¹⁹ True self refers to the sense of the self being experienced as real, as separate from others, as spontaneous, creative and alive (Winnicott, 1960b) and therefore as complying socially up to a point.

caregiving which are gradually organised into internal working models (mental representations) of the caregiver and the self, marking secure attachment (Berlin, Cassidy & Appleyard, 2008).

For Klein, the child has to introject more good objects than bad ones for the ego to be strengthened and for good object relations to ensue (Crabtree, 2009; Klein, 1937). The child reaches integration when able to merge good and bad part objects of the self and the other. This state is synonymous with the depressive position where fragmented perceptions of caregivers and of the sense of self are integrated. But merging elicits anxiety due to the danger of aggressive impulses, in fantasy, damaging the good object. By bringing together the conflicted feelings of love and hate the child realises that the loved and hated person are the same leading to the development of guilt and desire for reparation. The child therefore tries to maximise the love to repair any damage done to the love object.

The mother's mirroring gestures have to be 'marked' or slightly transformed so that the infant is able to grasp that they are correspondent to his/her own emotions and do not belong to the caregiver (Fonagy, et al., 2008). This process allows the child to internalise representations of his good enough mother and of his/her own emotional experience or parts thereof, and in doing so to create a representational system for internal mental states and how these interact. This is what Fonagy refers to as the capacity for mentalisation and what Winnicott denotes as cross-identifications (Cartwright, 2002; Fonagy et al., 2008; Winnicott, 1971). These processes involve a self-reflective as well as an interpersonal component.

Poor early attachments lead to difficulties in individuals' capacities to develop their own minds (Lemma & Levy, 2004). This is meant in the reflective sense as posited by Fonagy (2008) in his description on mental capacity being the ability to process and interpret one's own internal states and interpersonal experiences and those of others. Attachment theorists such as Fonagy (2008), Steele and Steele (2008) and Seligman (2007), amongst others, often refer to the concept as mentalisation. One of the reasons that this is of particular significance here is that it also extends the development of the intrapsychic realm into the interpersonal world, as the individual is enabled to interpret the human emotions, thoughts and behaviour of others accurately (Fonagy, 2008), as opposed to mind reading as a defensive stance. Mentalisation affords the development of true interpersonal subjective space which impacts the growth of relationships and individuation.

4.4.2 Mentalisation

The parent's capacity to observe the child's mind facilitates the child's understanding of the mind of others including that of the caregiver (Fonagy, 1999). When this is interrupted and unavailable, the child may develop an inflexibility in accessing their own feelings which interferes with their ability to draw on socially supportive relationships that assist in emotional regulation and the development of mentalisation (Fonagy, 2008; Fonagy &

Bateman, 2008) and so, some would suggest, the die is cast. Mentalisation is an imaginative mental activity where the potential mental state of the other is perceived and interpreted (Fonagy & Bateman, 2008; Seligman, 2007). This is acquired in the context of the primary attachment relationship where the caregiver mirrors back emotion to the child in a way that it may be processed. Through marked mirroring the caregiver shows the child that it is not the caregiver's feeling that she is expressing but rather something to do with the child (Fonagy & Bateman, 2008; Weinberg, 2006). Effective mirroring is also characterised by the caregiver's accurate perception of the child's mental states and in reflecting this accurately to the child (Weinberg, 2006). This process enables the child to recognise the existence of their own thoughts, feelings and experiences and underpins the emergence of mentalisation (Fonagy, 2008; Fonagy & Target, 1997).

Ultimately, mentalisation refers to the emergence of mental capacity and the ability to understand that there is a difference between personal experience and that of other people (Seligman, 2007). There is a crucial link between being understood by another and the SOC and security that the individual feels. Reflective thinking and generation of meaning are crucial aspects of this security (Seligman, 2007). Mentalisation could be conceived as extending the internal working model of the individual to include the attribution of mental states to others making their behaviour meaningful and predictable and enabling the individual to find meaning in their psychological experiences. Self agency emerges in this developmental process (Weinberg, 2006) because mentalisation underlies the capacity for emotional regulation and self-control (Fonagy & Target, 1997). Mentalisation also informs explanations for one's own behaviour and creates continuity of self experience which belies coherence (Fonagy & Target, 1997; Seligman, 2007) or the ability to represent memories and experiences related to attachment without denial or distortion (Slade, 1999; 2005).

A child who has the ability to conceive of another's mental state can also conceive of the possibility that their parents' rejection may be based on false beliefs and is therefore better able to moderate the impact of negative parenting experiences (Fonagy, 1999b) and is better able to protect their sense of self from assaults. Adults who have developed the capacity to reflect on their own experience tend to be more psychologically secure than those who have not, even when their actual experiences are more traumatic (Seligman, 2007).

The child for whom mentalisation is not consolidated will fail to develop the capacity for reflective functioning and will interpret their subjective experience as being entirely real while remaining unable to distinguish between beliefs and facts (Seligman, 2007). Suffering may become a key part of their identity for which there is no respite or internal soothing. Young adults who are unable to mentalise fail to do so because they have never had the opportunity to learn this in the context of appropriate attachment relationships or because their attachment experiences were disrupted (Fonagy, 2003). When caregivers express and project their anxious thoughts and feelings towards the child, the child may avoid thinking

about the subjective experience of others, and this can result in later expression as callousness. Fonagy and Target (1997) suggest that abusive behaviour or trauma in childhood presents a compelling incentive for the child to avoid thinking about the caregiver's mind and intentions. This could lead to difficulties in understanding traumatic situations, thus reducing resilience in the face of trauma.

Childhood abuse and rejection seriously handicap the mentalising, intentional space of the individual. Even though the child may accept physical comfort after the fact, mentally they will create distance for self-protective reasons. The inability to conceive of the mental states of others in adulthood, can thus be expressed in callousness which is deeply rooted in anxiety (Fonagy, 2003). Violence then serves a function and becomes a way of controlling the behaviour of a less powerful other. Fonagy (1999a) maintains that maltreatment is associated with a 'fractioning' of mentalisation capacity across tasks and domains, and reflective capacity in one domain of interpersonal relating may not extend to another.

As a whole, the holding environment facilitates and sets in motion the emergence of mentalisation, security of attachment and exploration and is therefore synonymous with the notion of a secure base or secure attachment environment which, once established, allows the child to explore the inner and outer world and to be free to play without fear of being abandoned or rejected (Bowlby, 1988; Gullestad, 2001). If the child is dominated by rageful, hateful instincts this does not happen in a relationship vacuum, but within a frustrating relationship (Fairbairn, 1952) of neglected and rejected needs by caregivers who are emotionally unable to attend to the child.

Before mentalisation emerges for the individual, subjectivity is experienced as psychic equivalence, in that what is internal is experienced as existing externally (Fonagy, 2008). Incongruent mirroring is said to create a state where internal reality is assumed to be identical to external reality as perceived in the mother's face, where internal reality is felt to be terrifyingly real and where internal states which are potentially annihilatory are evoked (Weinberg, 2006). The mother instead of meeting or interpreting the child's gesture and expressions, substitutes them with her own, which are to be given sense by the compliance of the child (Winnicott, 1960b). What is internalised in place of the self is the other or a representation of the caregiver (Davar, 2011; Winnicott, 1958) which Fonagy (1999a) refers to as the 'alien' self and what Winnicott (1960b) identified as the false self and these elements are further discussed later. Due to the fact that there is no such ideal as the 'perfect parent' all individuals, to differing degrees, have a false self or an 'alien' self within the self structure, which is alleviated through mentalisation (Fonagy, 2008). However, it is the trauma itself that can derail the development of mentalisation, as traumatising parental figures are internalised (Fonagy, 2008; Weinberg, 2006), leading to rigid splits within the self.

When parents are good enough, the child becomes able to integrate good and bad self and object representations (Klein, 1937) into a cohesive, reality based self-concept, promoting

internal regulation of emotions that affords resilience in the face of adversity (Fonagy & Target, 1997). These are essential key factors in affect regulation and in the development of compassion, failure of which can be clearly seen when children fail to show empathy while witnessing other children's distress (Lieberman, 2005) or when they struggle to understand facially emotive expressions. Most significantly, through differentiation, the child grows to recognise the mother as being separate with her own intentions, wishes and feelings (Žvelc, 2010). The process of recognition is reciprocal, establishing differentiation between the self and other as well as establishing the ability for connectedness later in life. The individual will tend to have expectations of others that parallel empathic early interactions and will be naturally predisposed to be close to others, having the emotional capacity to sustain such relationships (Sroufe, 2005).

When the child is able to integrate his part objects and relate himself/herself to this object, his view of reality becomes radically changed (Crabtree, 2009; Klein, 1937). He can recognise himself as separate from his object, distinguishing his impulses and fantasy from reality. Alternatively, studies have highlighted that low self esteem and a predisposition towards fragmentation make it very difficult for internal regulation of affect to take place (Zosky, 1999). The inability to self-soothe during times of strong anxiety and conflict or to call upon positive introjects to regulate tension states impacts relationships negatively, possibly leading to the frequent experience and expression of dysregulated emotions.

4.4.3 Separation and the capacity to be alone

Margaret Mahler's phase of rapprochement is particularly significant to developmental separation from the mother. Through their studies of infants and their mothers, Mahler and her colleagues observed regularly occurring sub-phases of separation-individuation which were made up of common steps in a dyadic developmental process which included both mother and infant (Bergman & Harpaz-Rotem, 2004; Mahler, 1968, 1970; Mahler, Pine & Bergman, 1975). In the differentiation sub-phase the infant becomes aware of his/her surroundings and interested in them while the mother is a point of reference or orientation. As the infant begins to explore the world he/she enters the practicing sub-phase, as more contact with the world is made while returning to the mother occasionally for emotional reassurance. At this stage an inner representation of the mother or separateness from her is not yet fully achieved.

In the rapprochement sub-phase the toddler begins to develop an internal representation of self leading to a crisis of separation being experienced between mother and child. As the child explores their surroundings they seek to share their findings with their mother, at times meeting with her unavailability and consequently experiencing frustration and dissatisfaction leading to an awareness of separateness and of being alone (Bergman & Harpaz-Rotem, 2004; Mahler, 1970). This process of seeking the mother's responsiveness, rather than just reassurance, and her unavailability leads to a loss of an earlier way of being between mother and child and presents a crisis which has to be mutually regulated and

produces a reorganisation of self for both. The conflict that was observed appears to be related to having to develop a new representation of the mother who can no longer control the world of the infant.

According to Winnicott (1971) during the separation in this maturational process, the child sometimes uses a 'transitional object', associated with the mother, as an object that gives comfort and security to the self, making separation and individuation bearable. This transitional object is used by the child to foster an inner capacity for being alone while in the presence of the caregiver (Davar, 2011; O'Brien, 2010; Winnicott, 1971). Separation therefore comes to be felt as a form of union, making it more tolerable, and anxiety can then be discharged onto the object which in turn provides comfort.

In the resuming of interaction and through the toddler's use of language, the crisis of rapprochement is resolved providing an indication of the security of their attachment and of the child's adaptation to their own individuality and the mother's temperament (Bergman & Harpaz-Rotem, 2004). The de-idealisation of the parent begins in this phase of separation as the tolerance for ambivalence emerges towards parents who are needed but not always totally available.

The mother is able to survive the toddler's rage and remains emotionally available or 'good enough' (Winnicott, 1958b) paving the way to a new way of being together and facilitating the child's ability to communicate their internal and external experiences. This is suggestive of the process of emergent coherence or the developing of mentalisation as the child begins to become aware of their own mind and of the mind of the other (Fonagy, 1999b; 2008; Fonagy & Target, 1997).

In the progressions of separation, subphases may overlap or proceed divergently with some developmental lag in one or the other (Mahler, et al., 1975). Mahler also recognised that an unresolved sense of self and of body boundaries as well as conflicts over separation could be reactivated at any stage of life.

The last phase of separation or the object constancy phase is marked by the child's capacity to carry the mother as an internal representation when she is not physically present but Mahler et al. (1975) maintained that this extended beyond the capacity to be alone and the self-soothing that resulted, as postulated by Winnicott (1971). This internalisation was deemed to enable the object to be shaped according to individual needs and changed over time as development required (Bergman & Harpaz-Rotem, 2004). Winnicott (1953) maintained that this transitional stage of separation was an intermediate space between the idealised world and external reality that was not challenged, but became an area of rest and creativity. Separation is never fully complete (Winnicott, 1953) and an example of this, which is often used in the literature is that of culture (as inter-relatedness of inner and outer reality). All individuals are born into a particular culture which determines, to a certain

extent, particular patterns of life experiences and facilitate a stronger or weaker SOC (Antonovsky, 1979).

Fear of separation from others, of abandonment and of the distancing of a close person is also naturally observable in adulthood (Žvelc, 2010). Adaptive separation anxiety allows for the development of an appropriate attachment relationship and only becomes pathological when it is extreme at the slightest threat of separation. These extremes may often lead to intense dependency in interpersonal relationships where separation from the object elicits extreme anxiety and the defence is to cling to the object. In these latter cases, extremes in behaviour may be used as manipulative strategies, such as suicide threats or extreme subservience, to keep others in the relationship.

Symbiotic relatedness in later life is deemed to include the ability of the adult to be aware of the paradoxical nature of close relationships in the sense that the individual is separate from the object but is also merged with it, allowing for the expansion of self boundaries (Žvelc, 2010). The experience of merging with other people does not necessarily denote pathology but the ratios between merging and separation are different in different periods of life and situations. The difficulty arises when the person cannot differentiate between himself and other people, as is observed in an undeveloped sense of self (Žvelc, 2010) and in enmeshment.

4.4.4 Maturational processes²⁰

During the child's normative development, the mother herself is undergoing transition from the ideal 'obsessed' mother to the good enough one. According to Fairbairn the shape of the self grows and changes from its experience in relationships while at the same time the relationships are being changed by the self as well (Rubens, 1994). As the good and tolerable bad objects are internalised within the self, experience is integrated in the form of memories, thoughts, learning and fantasy.

Internalisation is professed to be an active, creative and subjective process of generating meaning and not necessarily as one of perfect reflections of observable interactional patterns. Internalisation so to speak, is coloured by unconscious processes of fantasy and inner conflict as well as how the relationship was experienced by the child (Bondi, 2003; Gullestad, 2001).

It is within close attachment relationships that children learn to make sense of themselves, other people and social interaction. Although early interactions with caregivers provide a relational template for interacting with others throughout life it is likely that later adult relationships also play an important role in influencing the individual's attachment style (Park, Crocker, Mickelson, 2013). In effect, someone with an insecure attachment style may become more securely attached as a result of being in a close, mutually caring adult

²⁰ Winnicott (1963b)

relationship. This in turn would reduce the individual's need for others' validation making them able to derive self-esteem from their close relationships which is similar to securely attached individuals.

The concept of internal security and not just that of secure attachments, is reminiscent of Klein's depressive position and the individual's capacity to confront her/his own destructiveness and feelings of guilt (Klein, 1937; 1940). It is through separation that the individual's internal world first becomes separate from the external object (Kavaler-Adler, 2007). The individual is then able to acknowledge the potential for loss of the good object and the subsequent feelings of guilt due to awareness of her/his own capacity for destructiveness and greed. In being able to mentalise the individual can put themselves in the other person's position (Fonagy, 1999b; 2008) and concern and sorrow for loved objects and their fallibility emerges (Klein, 1940; Segal, 1973). There are simultaneous fears of persecution which coexist with fears of loss of the object. In other words, in the depressive position, the child develops a concern for the external and internal object and fears its destruction but also holds persecutory fears of self destruction by internal persecutors (Klein, 1940). Anxiety arises from the ambivalence felt as the object is both loved and hated (Segal, 1973). This fosters the splitting of objects into good and bad and also splitting of the self into good and bad, but as adaptation to external reality increases, splitting is reduced and ambivalence is tolerated as both good and bad experiences are equated with the love object (Segal, 1973). The child's capacity to love, trust and to make reparation increases and their internal world becomes more integrated.

This process entails a state of 'developmental mourning' (Kavaler-Adler, 2007) which is painful (Kavaler-Adler, 2007; Klein, 1940) because in fearing the damage of the loved object by his/her own destructiveness, the child experiences loss, sadness and pining for the good object. The loved object feels lost and a sense of guilt and the need for reparation is awakened. Mature guilt, in this sense involves remorse for the destruction of the object and a need to love it back into restoration (Hasui, Garashi, Nagata & Kitamura, 2008; Klein, 1940.) The capacity for concern over the other and this sense of guilt leads to the gradual development of self-regulation (Segal, 1973). In a study with Japanese university students by Hasui et al. (2008) mature guilt was in fact associated with greater control of anger and anxiety. Reparation also entails giving up omnipotent control of the object and accepting it as it really is (Segal, 1973).

If the child experiences more bad experiences than good ones, as is possible in environments dominated by domestic violence, this integration may be disturbed by the intensity of what Klein designated to be manic defences, that may become excessively strong (Klein, 1940). Denial, idealisation, splitting and projective identification may therefore come to be used in more rigid, fixated ways, making the transition from the paranoid/schizoid to the depressive position fraught with difficulty. A perception and

awareness of separateness and of the other as an intentional and separate person may fail to develop fully.

Individuals who are unable to establish this recognition, continue to relate to others as objects who are available to satisfy their own needs (Žvelc, 2010). Relationship connectedness, on the other hand implies a capacity for intimacy, closeness as well as relationships which provide the individual with support at times of distress and safety in intimacy, allowing the adult to take risks and open up emotionally. The development of empathy is also crucial in enabling conflict resolution and for compromise to take place.

This establishment of a separate self allows for the ability to maintain useful, less rigid defences or mental operations that arise out of a need to distort conscious states of mind that provoke anxiety or distress (Fonagy et al., 2008; Winnicott, in Esman, 1990). As the individual internalises the secure presence of the other, safety is associated with the inner world and the state of separateness and being alone is progressively tolerated (Fonagy, 2001; Gullestad, 2001).

Successful transition through the stage of separation-individuation (Mahler et al., 1975) allows the person the opportunity for meaningful interpersonal contact, for the genuine development of inter-subjectivity in the recognition of the other as an individual with their own subjective world, with whom the person can share his experience (Žvelc, 2010). However, the transition to the depressive position is never fully worked through but some internal security is necessary for a degree of resolution to be achieved (Segal, 1973). Through cyclical states of 'developmental mourning' (Kavaler-Adler, 2007) old objects with their limitations, may be clung to but also surrendered and new objects are connected to so that healthier internalisations may take place.

While it is anticipated that certain survivors of childhood domestic violence may not be able to negotiate these developmental pathways sufficiently, this study has completed an indepth exploration of how it is that others do manage to develop coherent representations of themselves and others and maintain fulfilling relationships, despite environmental and relational disruptions.

As pointed out by Klein (Segal, 1973), it is also within the context of childhood that the individual naturally develops internal defensive organisations that assist the person in maintaining some sort of psychological equilibrium in the face of impingements. These defences protect the self from the experience of despair (Segal, 1973) and in many cases become adaptive, enabling the child to survive traumatic childhood experiences.

4.5. Defensive organisations

Without defences the individual's mind would become too vulnerable to intensified anxiety, sadness and fear (Bowins, 2004; Segal, 1973) hence the need for defensive structures in sustaining inner balance and functioning. Antonovsky (1972) spoke about breakdown,

whether physical or mental, as resulting from a disturbance of homeostasis. All individuals are confronted with unpredictable demands placed by both inner and outer environments which create a state of tension. He argued that every individual has at their disposal resistance resources which can be applied to resolve this tension. He did not regard tension in the individual as being pathological in itself but rather that it is the failure to restore equilibrium that can lead to breakdown. Connected to this, is the person's primary appraisal of the stressor as taxing on resources or as endangering to the self, which determines the level of adaptation demonstrated (Antonovsky, 1987) and consequently the type and level of defences that the individual employs in order to adapt. Winnicott (1960b) spoke about the 'fear of breakdown' as something quite different and as being related to something which had already happened in childhood due to persistent impingements and exposure to trauma. This fear could be connected here to the need to defend strongly against powerful affect, thoughts and memories which not only caused intolerable anxiety but also fears of annihilation (Winnicott, 1960) and of loss of objects and attachments.

Defensive mechanisms are used to protect the self against breakdown and are usually divided along a scale ranging from mature, such as the use of humour, sublimation, altruism, repression and thought suppression which involve minor cognitive distortion, intermediate, such as intellectualisation, displacement, and rationalisation and immature defences, such as splitting, idealisation, projection and somatisation (Bowins, 2004; Cramer, 2000; Valiant, 1994).

The greater the degree of distortion the less adaptive the defence, since it diminishes cognitive awareness thereby limiting the ability to learn from exposure to adversity (Bowins, 2004) such as trauma. On the other hand, defences can also be adaptive because they build resistance to the negative stress caused by exposure to trauma such as domestic violence. The time frame of use of specific defences and the age at use should also be kept in mind when designating certain defences as being more pathological than others (Cramer, 2000). For instance splitting as a necessary defence in childhood, may be particularly evoked in states of trauma (Crabtree, 2009; Zosky, 2009) and only becomes pathological when used in an extreme sense in adulthood where it causes disturbance in the self and in relationships.

4.5.1 Splitting and projective identification

Most defences used by those exposed to trauma seem to involve some degree of minor or major image distorting (Cramer, 2000), of disavowal and of cognitive distortion as pointed out by Bowins (2004). Idealisation and devaluation, for example involve the endowment of all good or all bad aspects to particular others, for example, leaving one as the ideal and the other as devalued (Bowins, 2004). This is commonly observed when a parent is idealised as the all good caregiver, perceived as always available and caring over the devaluation of the other parent as being bad and all rejecting. In environments of domestic violence this type of defence is often connected to states of splitting being enacted between parents (Celani, 1999; Zosky, 2009), which could be said to, in turn, evoke powerful states of splitting in the

children who are exposed. An example of this would be where the mother is perceived as the powerless victim and the father as the violent perpetrator.

Splitting was first described by Melanie Klein (1932) as a necessary defence and primary developmental stage in infants, which she termed the paranoid-schizoid position. Since the child is yet incapable of tolerating ambivalence towards objects, splitting is used to keep the good objects and the bad objects separate and manageable in the mind and to protect the good objects from destruction by the bad (Zosky, 1999). For Fairbairn, frustration and rejection are inevitable at some stage in the early relationship and threaten the individual with the loss of the object and of love (Fairbairn, 1952; Loparic, 2002). Since the child can neither abandon nor control the caregivers, the splitting defence is employed whereby the object is split into good and bad parts which can be kept separate from each other allowing the dependency to continue. The self also becomes segmented into a central self and two endopsychic structures (the libidinal and anti-libidinal self).

If the child is able, through good enough care, to transition to the depressive position, ambivalent feelings towards objects are tolerated and splits eventually integrate. The individual becomes capable of integrating good and bad images of the self and significant others (Lopez, Fuendeling, Thomas & Sagula, 1997). The internalised images of the parents thus become more rooted in reality with decreased idealisation and devaluation.

Splitting seems to be quite prominent and is clearly observable in the larger societal environment in the perception of women's sexuality as personified by the pure 'madonna' and the dirty 'prostitute' (Dutton, 1995) for instance. This is also observable in stereotypes about masculinity or lack thereof such as the powerful virile male or the weak and impotent male. These beliefs provide reinforcement for the perpetual splitting of good and bad objects in individuals and illustrate how pervasive splitting is as a defence mechanism.

For the adult in the paranoid-schizoid position, splitting is a predominant defence with emotion being experienced intensely and without modulation (Zosky, 1999). In certain cases, judgement and reality testing are possibly distorted by excessive splitting and the inability in the individual to self soothe by calling on positive mental representations. Due to the continuous reliance on splitting as a defence, self and object representations may be excessively hostile and un-neutralised by libidinal images and it becomes necessary to project the aggression and rage in order to manage the pain and anxiety felt (Zosky, 1999).

Projection enables the minimisation of pain because it makes possible the attribution of unwanted wishes, thoughts and affect to other individuals allowing for the attenuation of anxiety (Juni, 1997). This process is also particularly evident in environments of domestic violence and is often extended to that of projective identification (Crabtree, 2009; Celani, 1999; Zosky, 1999) where unwanted material is split off, projected onto the partner and then identified with, leading to attack or assault upon the other. Projective identification, also coined by Klein (Segal, 1973), is therefore a more complex process derived of splitting,

where one individual splits off a feeling or characteristic that they disown in themselves and which causes them intolerable anxiety, and projects it onto another (Zosky, 1999). The person then identifies with this, takes it up and acts out this disavowed part.

Splitting and projective identification, although considered primitive defences, are not always pathologically used and expressed, as in cases of domestic violence. In fact Lopez et al. (1997) suggest that the role of splitting in the psychological functioning of normal adults has not been given adequate attention by researchers. They maintain that studies have shown that the capacity for integration is a process that continues to mature from childhood, through adolescence and into adulthood. In other words:

...the developmental process of integration and consolidating coherent self and other images associated with close relationships is not necessarily an 'all or none' achievement and that certain otherwise normally functioning persons may not have completely and adaptively integrated internal images of self and other associated with intimacy and caregiving (Lopez et al. 1997, p. 462).

Therefore splitting defences may still be present and used by adults who, when under stress, may resort to evaluating themselves and others in more categorical ways, all be it to a lower degree. Equally, for projective identification, this process may be a way of avoiding separation and maintaining a developmentally necessary relationship (Braucher, 2000; Zosky, 2003). Projective identification is conceived as a form of communication, an attempt to make oneself understood and to maintain psychological growth for change by continuing to change the structure of the self (Waska, 2008; Zosky, 1999). When Klein proposed the concept of projective identification she also made it clear that the dynamic included the projection of both good and bad parts of the self (Waska, 2008).

4.5.2 Dissociation

Dissociation is a frequently present defensive state in individuals who have survived trauma and been exposed to acute stress in childhood (Liotti, 2004) but it has also been found to be used to differing degrees by the common population (Juni, 1997). It involves the ability to detach from painful emotions and block out intense, disturbing affect which may interfere with performance on a daily basis. Akin to this are states of imaginative involvement or autistic fantasy which occur to differing degrees and constitute a shifting away from unpleasant experiences to more pleasurable, internal ones (Juni, 1997). This sometimes also entails the exclusion of interaction with others or the avoidance of intimacy. Winnicott (1958b) and Klein (1937) both maintained that there were natural illusory states present in children as they developed which were eventually relinquished for interaction with others. In cases of childhood trauma, such as domestic violence, some children may demonstrate a greater propensity for escaping the reality of domestic violence by engaging with a fantasy world where they create their own story characters or imagine deliberate tales based on the characters of books. This illusory state may be more pronounced in such children and may not be relinquished as quickly as expected by theorists.

4.5.3 Intrapunitiveness and object substitution

In attempting to avoid expression of unwanted emotions such as rage, fear and anxiety (Juni, 1997) and the potential for disruption in relationships as a consequence, turning against the self may become a defence against potential loss of the object. Self punishment may also give the individual a feeling of power in a powerless, traumatic situation. In this case, the object that gives origin to the unwanted feelings is replaced by the self in the recrimination that follows and may be clearly detected in the abused woman's tendency to blame herself for 'provoking' the abuse (Young & Gerson, 1991). This engenders a sense of greater control over a potentially uncontrollable situation and focuses the blame on the self allowing for the possibility of restoration of the relationship.

Another form of object substitution is perceived in identification with the aggressor (Anna Freud, in Juni, 1997) and in displacement as defence mechanisms (Juni, 1997). Through introjecting aggressive parts of the abuser the individual identifies with this and assumes the behavioural style of the aggressor either towards the self or towards others who serve as object substitutes. In displacement, the object of substitution for the real object of threat becomes another individual who may be perceived as less powerful or as less needed. For instance anger towards an aggressive parent may be redirected towards another family member who is blamed, such as a sibling or a grandparent and the relationship with the parent is maintained and kept safe.

4.5.4 More mature defences

There are more mature defences that also serve to attenuate anxiety and maintain relating but that involve lesser levels of distortion (Bowins, 2004). Intellectualisation, for instance involves the transformation of threatening events into a non-emotional experience through the overuse of cognition (Bowins, 2004), thus minimising its emotional impact. This process of defence allows for reality to enter consciousness but diminishes the personal significance for the individual by appealing to logic (Juni, 1997). For instance, a young woman may avoid intimate relationships by reasoning that she is a feminist and therefore unable to find a partner in her society that is compatible with her intellectual stance. In rationalisation, it is the re-interpretation of reality that neutralises emotional impact by explaining unacceptable behaviour as if it was rational (Juni, 1997). In this case an individual may reason that abusive behaviour is acceptable under conditions of unfaithfulness in a relationship.

Humour and altruism are examples of mature defences in that in humour the content of experience is altered to make it more tolerable or lighter and in altruism the individual provides for others what they would have liked to have received themselves (Bowins, 2004). Individuals may use humour when disclosing events of childhood as a way of reducing the painful affect it elicits and in some cases these individuals may enter into relationships where they are caregivers and provide for others what they would have preferred to have

experienced in childhood. Although considered mature, overuse of these defences can also be problematic.

4.5.5 Suppression and repression

Cramer (2000) makes an interesting point when he differentiates between coping and defence mechanisms on the basis of conscious and unconscious processes as well as volitional versus unintentional motivation. Of particular relevance in this context is the evasive action of thought suppression which is often described as a mostly conscious mechanism. While repression involves the mostly unconscious blocking of disturbing material from conscious awareness, suppression involves a more conscious blocking through the denial of attention to memories of disturbing experiences (Juni, 1997). Thought suppression therefore implies a volitional, conscious operational component possibly demarcating it as more of a coping mechanism rather than an unconscious defence. However, there are aspects of this that may be partly sub-conscious or unconscious, in the sense that although material is not denied and is remembered, the mind may nevertheless relegate this, intuitively, to background information in order to restore adaptive functioning. For instance, a student who needs to continue functioning academically may withhold particular attention to past traumatic experiences that would otherwise disturb this academic equilibrium and this process may not be a completely conscious, volitional one. Suppression is a complex mechanism because it suggests the simultaneous capacity in the individual to both hold in mind traumatic experiences but also to divert attention from these to enable the resuming of normal functioning.

Repression is also a more mature defence but is different in the sense that it was originally defined by Freud (Boag, 2006) as an unconscious process of keeping unacceptable wishes, memories and affect from the conscious mind before reaching awareness. Erdelyi (2006) argues that Freud often used repression and suppression interchangeably and that repression included inhibitory processes but also forms of distortion such as denial, for instance. Freud did define another form of 'repression proper' as being used in cases where the individual becomes aware of unwanted material and deliberately excludes this from consciousness (Brewin & Andrews, 2000). The latter suggests an element of conscious or volitional action but the predominant feature of this defence still implies largely unconscious processes such as the 'forgetting' of episodes of domestic violence between parents by children exposed to these, for instance.

These psychological defence mechanisms enable the individual to resume normal functioning after a traumatic experience and also allow for the circumventing of loss of significant attachments, despite the troubling aspects of those relationships. The use of more 'primitive defences' however, does not necessarily signify a dead end for individual development or predict a relationship characterised by violence. It is only when these defences are persistently used in an exaggerated manner in adulthood that they become pathological. The use of defence mechanisms is part of the puzzle that is domestic violence

but there are also complex interplays of emotional states elicited in childhood which intersect with defences, internalised object representations and attachment injuries resulting in violent patterns in intimate relationships.

4.6 Caregiving failures

While it remains essential to validate the pain that individuals feel as a result of exposure to domestic violence, the perception of such individuals as being inevitably deficit-ridden is undeveloped and incomplete. According to Anderson (2010) this view discounts the fact that people strive for growth despite the most foreboding of circumstances. Equally valid is the reality that trauma renders individuals personally defenceless and "...damages the self, leaving it changed in some way" (Cartwright, 2002, p. 43).

It is known that when traumatic events occur during childhood they are more likely to become a part of one's sense of identity and that children are especially vulnerable to exposure to violence involving those who are close to them (Anderson, 2010; Lieberman, 2007; Shaver, et al., 2009; Van Den Bosse & McGinn, 2009). Since experiences of safety, integration, wholeness and identity are fractured during family violence, victims are left feeling a loss of sense of self (Anderson, 2010).

Direct exposure to the violence itself engenders a profound terror and emotional dysregulation in children (Lieberman, 2007). Linked to this is the shattered trust upon the parents' competence as protectors. The impact on self development is described by Diamond (2004) as follows:

...cumulative trauma as resulting from subtle but consistent breaches in the mother's role as a protective shield, breaches that are often difficult to detect clinically or to observe naturalistically but that over time tend to cast character in a specific distorting mold (Diamond, 2004, p. 8).

If the quality of caregiving repeatedly fails to offer comfort, safety and soothing the child experiences prolonged periods of unregulated emotional distress (Howe & Fearnley, 1999). In childhood the self is taken as the reference point for all events and the child searches for faults in themselves and their own behaviour in order to make sense of what has happened to them (Herman, 2001). Essentially, the child has not internalised a sense of being 'good enough' and strong enough to survive in a 'safe' enough world.

4.6.1 Childhood adversity

Women's psychological responses to domestic violence are considered to have been largely overlooked especially with regards to the impact of these responses upon the quality of mothering (McCluskey, 2010). Environments typified by domestic violence create oppressive spaces where caregivers may find themselves at a loss to provide adequate care and resonance of affect for the child. Essentially the mirror becomes distorted and is rendered

incapable of fulfilling its reflective and holding function. If what the infant sees when it looks into its mother's face is only her fear, pain and defences then he can lose track of the continuity of self-development and cannot experience true dependency (Zornig & Levy, 2011). The reflection bears little resemblance to the child's felt inner world, and therefore he only sees the projections of the mother (her emotions and defences) and will take them in as his own (Davar, 2010).

An endless adaptation to an infant's needs also does not encourage development of awareness of the other as 'not me', creating a narcissistic object relationship (Cartwright, 2002; Davar, 2010). In this case the mother may undermine the infant's movement away from fusion to independence and avert the development of the infant's first object relationship by pouring her energy exclusively into their bond. This is perhaps done in an effort to avoid aspects of a disturbing environment or as an extreme attempt to protect the child (O'Brien, 2010) as is depicted in cases of maternal overprotection. This perpetuated fusion blends the self and the object derailing individuation (Roussillon, 2010). Children who battle to individuate and separate may feel empty, deprived and frustrated and according to Diamond (2004) they may compensate in the following way:

Instead, the child develops an ego attitude of excessive craving for and concern for the mother, which substitutes for the gradual disillusionment and mourning that might allow further differentiation between mother and child to take place(Diamond, 2004, p. 9)

Children will obviously be afraid of parents who are aggressive and violent and they will also be afraid for parents who are emotionally unavailable and unresponsive due to unresolved traumas of their own childhood, depression and misuse of drugs and alcohol (Howe & Fearnley, 1999). According to attachment theorists, the caregiving environment itself is the source of the child's distress leading to developmental failures (Gullestad, 2001).

The initial aggression of the child due to parental lapses may also not be manageable to the traumatised mother and she may retaliate or withdraw undermining the child's developing capacity for trust (Kuchan, 2011). The child is not rendered many choices since he is completely dependent upon the caregiver and the threat is essentially annihilation or surviving at great personal cost by internalising the persecutory, abandoning or injured object (Davar, 2010; Kuchan, 2011).

Individuals need to be able to integrate positive and negative aspects of their experiences in order to develop and for learning to take place (Rubens, 1994). When this process is interrupted due to repeated failures in the environment such as trauma and loss, psychic wounding takes place and the self may become fragmented. Fairbairn believed that problems in development arise from extremes of splitting and repression upon encountering persistent maternal deprivation (Fairbairn, 1952), which is a possible result of

continuous domestic violence. These intolerable experiences with caregivers lead to the segmentation of the self.

In environments of family violence, the child's inner world may give rise to increased splitting and separation of the 'good' from the intolerable 'bad' object (Pearce, in Simanowits & Pearce, 2003). According to Klein, the individual then protects his good object by projecting all his aggression into the bad object (Crabtree, 2009). The person may also project unwanted parts of the self into another person, then identifies with these parts and hates them intensely. Through projective identification the child is able to disown their own destructiveness and remains in the paranoid-schizoid position where others' intentions and actions are perceived as persecutory and rejecting.

When Fairbairn (1952) recognised that his patients' early deprivation was expressed in immature and distorted inner structures, he developed a model of self development which had at its centre the relationship between the child and his/her primary caregiver. For the child whose family does not offer a secure base, safety and 'holding', the internalisation process is fraught with fragmented and frustrating objects, where the parents repeatedly fail to care for the child's developmental needs. These representations become the individual's "template for the world, significant objects and for the self" (Zosky, 1999, p. 58).

For Fairbairn, the structure of the self and its functions is made up of numerous early events that are processed, organised and consequently remembered by the individual (Celani, 1999; Fairbairn, 1952). Health and dysfunction are characterised as being dependent upon 3 primary factors which are the extent to which bad objects have been internalised, the extent to which the child's self or ego identifies with these bad objects, and the make-up and vitality of the defences which protect the self from these bad objects (Celani, 1999).

For Fairbairn, this determined the functioning of the adult personality. Since majority large portion of the child's experience is with the unavailable frightening or frightened parent, excessive splitting and repression takes place and the self becomes segmented into three states: a 'central (conscious) self,' and two endopsychic structures known as an anti-libidinal and a libidinal self (Fairbairn, 1952; Rubens, 1994). These structures become largely unconscious either due to an intolerably rejecting or an overly involved and consuming primary relationship. As a result the conscious functioning of the central self becomes more and more limited as these structures seek the re-creation of the original experience in adulthood, possibly evoking the development of psychopathology.

Alternatively, in internalising the bad object the child over-identifies with it and clings to it, suppressing his own needs and adapting his needs to those of the caregiver. This is analogous to Winnicott's assertion that as the child experiences repetitive deprivation he becomes focused on what the mother needs him to be, developing a 'false self' as a defensive strategy and complying since this circumvents the loss of the object (Winnicott, 1960b). For example, a mother who is abused by her partner may not be able to tolerate

vulnerability or rage in her child and may communicate to the child that these emotions are unacceptable. The child then becomes excessively 'good', not crying or protesting when afraid or hurt.

To a certain extent all individuals develop a false self to cope with failures in the holding environment which may be temporary (Winnicott, 1960b). However, within environments of domestic violence caregiving failures are perhaps more common and the young child being completely and utterly dependent upon the parents for his survival, will do all that he can to avoid losing them (Lieberman, 2007). This 'false self' emergence creates long lasting disintegration anxiety and the necessity for early defences, leaving the child having to react to interferences from the environment and not able to fortify the true self (Winnicott, 1960b; Zornig & Levy, 2011).

Because the child is unable to survive without the caregiver, he or she uses the moral defence (a form of intrapunitiveness) and takes the burden of badness upon himself/herself (Fairbairn, 1952). It is more bearable to do this than to acknowledge that the caregiver is rejecting and a bad parent. This also provides the illusion of control whereby the child may win back their love if he/she is good enough and achieves certain goals.

Deprived parents may also seek someone in their child who will give them what their parents did not or what their relationship cannot provide and the child lives falsely by complying with the caregiver's gestures as if these were their own. The concept of the 'parentified' child is evoked here, in that the child is rushed through childhood too quickly and prematurely becomes a caregiver, nurturer and peacemaker, holding onto the belief that that they are loved for what they do and not for who they are (Miller, 1981; Partington, 2009). The child is said to become unusually sensitive to the needs of the parents and of others (Bowlby, 1988). Although classified as essentially pathological in nature, this sensitivity may also lead to the development of heightened empathy, emotional responsiveness, the anticipation of the needs of others and the reading of others' emotional states.

Because the individual may develop into something that others need, he may also not obtain an opportunity to explore and express his own emotions and sense of self. Over time this may give rise to the development of false relationships and through introjections the person may grow to be just like the other instead of himself (O'Brien, 2010). Winnicott warns that the 'false self' may fit in very well with the family pattern and be easily mistaken for 'health' although it hides instability and vulnerability to breakdown (Winnicott, in Esman, 1990). As these children grow older they may repress their histories and seek to maintain the illusion of a good childhood and of caring, sensitive parents never confronting their reality or resolving their trauma (Miller, 1981). A consequence of false self functioning can be the tendency to attribute their achievements to other features other than their real selves or abilities (Partington, 2009).

Alternatively, in a natural progression towards health, the false self also continues to seek for conditions that will allow the true self to emerge (Hardwood, 1987). It also uses defences to protect the true self from exploitation from the outside. The spontaneity of the true self emerges when an instrumental figure is able to convince the true self that its creative gestures will be allowed and safeguarded in the relationship. The continuous growth towards a vital, integrated self continues in adulthood, in the striving for maintenance of boundaries, tolerance of impingements without fragmentation and empathic consideration for others. This integrated self also becomes able to hold on to its own point of view without fear that separatedness will result in damage to the self or the other.

Antonovsky (1993) maintained that a courageous decision or major life change can initiate transformation of a person's SOC in the opposite direction, slowly strengthening it as seen for example, when a young adult who has experienced family violence grows up to acknowledge and deal with his trauma, choosing not to repeat the same patterns in his relationships, or when an abused woman chooses to leave her abusive husband. Life changing patterns are thus initiated and gradual change is possible if this pattern is maintained over a period of time. It is also interesting to note that the individual's SOC has developmental qualities and only after years of development are these qualities considered to be stable and more permanent (van der Hal-van Raalte; van IJendoorn & Bakermans-Kranenburg, 2008). The implication of this is that emerging adults' SOC can still be strengthened since it is not considered to be fully developed in early adulthood as yet. This implies that coping strategies can be learned and that a strengthened SOC can play a protective role against post-traumatic stress.

Antonovsky's (1996) viewpoint reminds us that individuals are not powerless and that engaging in certain behaviours, therapy for example, having a belief in God and a sense of belonging in a group, can certainly add strength and in some cases catalyse a change in life circumstances.

4.6.2 Effects on attachment

In family environments of emotional instability attachment difficulties may become pervasive. Continuous exposure to deprivation, loss and violence makes the psychological and physical availability of the parent doubtful and as a result the child may not attach securely to anyone, avoiding intimacy in adulthood, and becoming extremely self-sufficient and independent as opposed to the notion of healthy interdependence (Fairbairn, 1952; Gullestad, 2001; Zvělc, 2010). Since their dependency needs are not met in childhood, the individual may fear dependent feelings emerging in others or alternatively may foster these feelings in others through compulsive caregiving (Diamond, 2004; Crittenden, 1999). The individual may experience the self as being unworthy (Lim, Adams & Lilly, 2012) and therefore as not important enough to receive love, comfort, attention and protection. However, changes in attachment states of mind can occur in either direction (Crittenden,

1999) and in fact, the term 'earned' secure has been used to describe individuals who experience malevolent parenting but have risen above those experiences and are assessed as securely attached (Sonkin, 2005). This occurs despite environments of extreme adversity where both parents may be rejecting and unavailable (Roisman, Padrón, Sroufe & Egeland, 2002). Individuals in this case do tend to have had access to alternative attachment figures in childhood or in adulthood and the relationship seems to act as a buffer against the detrimental effects of cumulative trauma (Saunders, Jacobvitz, Zaccagnino, Beverung & Hazen, 2011).

When considering childhood attachment, the "Strange Situation" study (a laboratory based procedure involving episodes of separation and reunion between mother and child) highlighted the importance of maternal availability and the dangers of maternal deprivation on the development of the young child (Ainsworth, 1969; Bowlby, 1988; Diamond, 2004; Kobak and Masden, 2008). It also identified various patterns of attachment including 'Secure, where the child shows distress upon separation but is soothed by reunion with the parent and resumes exploratory play, 'Anxious-Avoidant', where the child shows no preference for the caregiver over a stranger and overregulates emotion, expecting rejection from the parent automatically and 'Anxious-resistant', where the infant's separation anxiety is not reduced by the return of the parent and the child struggles to derive comfort from the reunion, avoiding exploration and play.

The 'disorganised/disoriented' type of attachment, characterised by fear, freezing and disorientation behaviours, was identified later and bears a particular connection to environments of familial violence (Diamond, 2004; Kobak & Madsen, 2008). In this context the child develops a lack of an internalised and organised attachment strategy and through the simultaneous activation of the attachment behavioural system (seeking proximity to the caregiver) and of the fear/flight system the child is placed in a contradictory situation of escalating conflict and fear which sets the stage for possible dissociation (Diamond, 2004).. Unfortunately, models of attachment in childhood are assumed to remain predominantly stable across the lifespan of the individual as illustrated by longitudinal studies assessed with the 'strange situation' and followed up with the AAI²¹ in adulthood (Fonagy, 1999b). Evidence to the contrary is also available (Berghaus, 2011; Sonkin, 2005).

Another concerning consequence of disrupted attachment is the difficulty a caregiver may experience with self-regulation since this is likely to produce attachment disturbances in the child. One of these is secure base distortions with the role reversal subtype which has been identified by Schechter and Willheim (2009) and is particularly relevant to this study. In this case the child tends to become preoccupied with the parent's emotional well being taking on responsibility for managing the parents' emotions and for providing nurturance.

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²¹ The AAI is a semi-structured interview specifically developed to elicit and assess internal working models of caregivers and attachment experiences. Its validity is well established (van IJzendoorn, 1995).

On the other hand when the attachment figure becomes the source of threat and danger, representations of self and other as malevolent or helpless figures seem to prevail (Diamond, 2004). Instead of rejecting or hating the parental objects the child may also internalise their persecutory actions (McCluskey, 2010). A child with a parent who is abusive may need to separate the abusive part of the parent representation from the more nurturing and safe object in order to protect those features from the destructive power of the bad object (Klein, 1937; Segal, 1973).

In environments that are intolerably rejecting or traumatic, excessive splitting of the self takes place as an adaptive response to trauma (Fairbairn, 1952). The conscious functioning of the central self therefore becomes more limited as the endopsychic structures seek the re-creation of the original experience in adulthood, and this may result in the re-creation of what was originally experienced in an attempt to master it (Herman, 2001) possibly inducing the development of psychopathology.

Individuals are innately motivated to seek and maintain attachments with others and therefore the nature and quality of the emotional bonds in childhood shape the individual's internal working models of self and others in adulthood (Bowlby, 1988; Henderson et al., 2005). Internalised representations of attachment can therefore be a resource or an impediment to healthy relationship functioning (Henderson, et al., 2005). These internal working models influence the formation of either secure or insecure adult attachment orientations and regulate elements of closeness and distance in relationships (Lopez, et al, 1997). Working models include memories of attachment related experiences, beliefs, attitudes and expectations of self and others in relation to attachment (Feeney, 2008). These shape experiences in intimate relationships acting as a source of continuity for the individual.

The strength of the attachment bond appears to be unrelated to the quality of attachment relationships in that threatened individuals will seek proximity to their attachment figure thereby activating the attachment system even if the original attachment figure is the source of threat (Henderson et al., 2005). These factors make the understanding of the domestic violent relationship and the reluctance of both partners to pull away from the bond permanently, more understandable. Parents with a history of insecure attachment are also more likely to elicit an anxious, insecure attachment relationship in their children (Fonagy, 1999).

4.6.3 Intergenerational transmission of attachment

Main, Kaplan and Cassidy (1985) first identified prominent links between a mother's attachment states of mind and the quality of their child's attachment to them at age one year. George, Kaplan and Main (in Slade et al., 2005) extended this research when they devised an instrument to evaluate adult attachment states (AAI) and through their studies clearly provided evidence of a connection between adult parents' attachment narratives

and their infants' attachment quality. This research paved the way for the conceptualisation of the intergenerational transmission of attachment between parent and child. Van Ijzendoorn (1995) argued that although there was evidence for the transmission of attachment, the mechanisms by which this took place remained unspecified. Fonagy, Steele, Steele, Leigh, Kennedy, Matoon and Target (1995) suggested that this process of transmission took place through the capacity for reflective functioning in the primary caregiver which enabled the mother to hold complex mental states in mind and in turn made her able to equally hold her child's mental states. This allowed the mother to understand her child's behaviour in light of their feelings and intentions. She re-represented this experience to the child in a regulated way setting the context for the development of safety and security.

The inability of the mother to do this would presumably foster insecurity in the child instead and one would assume that the child's attachment state of mind would reflect that of the primary caregiver. Fairbairn (1952) documented how abused children often sought from others a repetition of the kind of caregiving that they had received from their parents, often involving pain. This was deemed to constitute the quality of their internalised objects and views of self as enacted in the perpetuation of damaging relationships. This cycle of the continuation of abuse may suggest a lack of reflective functioning in the inability to hold one's own mental states and affect in mind as well as that of others, thereby seeking proximity to dangerous individuals.

Reflective functioning therefore plays a critical role in the exploration of adult attachment and its linkage to the fostering of attachment states of mind in the child (Slade et al., 2005). In their study, Slade et al. (2005) discovered that secure mothers were found to have higher levels of reflective functioning or mentalisation (Fonagy & Target, 1997) than mothers organised insecure or disorganised. Higher levels of maternal mentalisation were also associated with securely attached children and lower levels of maternal mentalisation with resistant or disorganised children. Interestingly, avoidant children could not be distinguished in relation to maternal mentalisation. The authors suggested that avoidant strategies in children may arise from parental rejection and may not necessarily be connected to low reflective functioning in the parent. It is possible that reflective functioning is not the only significant factor enabling the intergenerational transmission of insecure and disorganised attachment states in particular. Further investigation into the intergenerational transmission of attachment is therefore needed for the clarification of attachment transmission.

4.6.4 Adult Attachment

Adult attachment is classified differently from child attachment styles even though there is a certain sense of correspondence between the terms (Sonkin, 2005). Like childhood attachment categorisation, adult attachment styles have also been divided into four attachment styles, some of which emerge from anxiety and avoidance (Holmes & Johnson,

2009). Anxiety underlies the extent to which individuals worry about abandonment and rejection and avoidance refers to the extent to which individuals limit intimacy with others and fear fusion.

The four category attachment model by Bartholomew and Horowitz (1991) is widely used in the study of domestic violence and provides a very useful representational model from which to understand the role played by specific attachment styles in this closeness-distance phenomenon. This model postulates two combining underlying dimensions to attachment mental states; that of an internalised positive or negative image of self and a positive or negative image of others (Doumas, Pearson, Elgin & Mckinley, 2008). The following diagram illustrates these concepts:

Attachment seeking/closeness **Preoccupied** Secure +Self -Self + Others +Others Low High **Anxiety** Anxiety **Dismissive Fearful** +Self -Self -Others -Others Attachment avoidance/distance

Figure 4.6.4 (a) an adaptation of an illustration of attachment styles and corresponding models of self and others as designed by Bartholomew and Horowitz (1991, p. 227).

Secure attachment style is characterised by low anxiety and low avoidance (Holmes & Johnson, 2009). The individual has internalised a positive model of self as worthy of love and others as generally accepting and responsive.

A preoccupied style is characterised by high anxiety and low avoidance and the individual perceives the self as being unworthy of love and develops a preoccupation with a need for acceptance from significant others (Holmes & Johnson, 2009; Lopez et al., 1997). The dismissive style demonstrates low anxiety and high avoidance manifesting as discomfort with intimacy and closeness in relationships. The individual has a positive model of the self as being loveable but a negative evaluation of others as possibly dependent, clingy and needy. Dismissive individuals downplay their need for intimacy in relationships for fear it will infringe upon their autonomy and desire for independence. The fearful attachment style

is demonstrated in high anxiety and high avoidance levels where the individual has internalised negative models of self and others. These individuals desire closeness with others but fear rejection and keep their distance as a means of protecting themselves.

Holmes and Johnson (2009) postulated that individuals may demonstrate a preference for partners on the basis of their attachment style. Secure individuals would hypothetically prefer partners which will enable them to maintain levels of high intimacy and independence as their sub-goals. For insecurely attached individuals whose relationship subgoals may conflict with that of others, it becomes more difficult to predict attachment style preference. In their study, Holmes and Johnson (2009) suggest that individual's preferences in terms of levels of intimacy and independence are more important aspects in attraction than how they may feel about themselves in their relationships. However, this tends to change with the duration of the relationship where the model of self becomes more significant over time.

When considering the maintenance of a relationship, goals related to the model of self therefore become more prominent with the behaviours of the partner eliciting feelings related to how loveable and accepted the other partner is. In this way an avoidant individual might maintain a relationship with an anxious partner who through their need for closeness will communicate how worthy of love the avoidant individual is, fitting with their model of self. In contrast the anxious individual will seek a reduction of independence, once again fulfilling the avoidant partner's view of others as needy and dependent. Partners in established relationships therefore tend to report complementary attachment styles. This position is confirmed by self-consistency theory where individuals may be motivated to maintain a consistent self-image which is achievable through interacting with others who fit in with these long held expectations (Holmes & Johnson, 2009).

People tend to choose environments that fit their beliefs of self and others and their own perception bias will, in turn, evaluate social events in ways that confirm existing internal models (Feeney, 2008). For example, someone who believes others are untrustworthy may approach them in defensive ways, eliciting further rejection. Consequently, it is possible that attachment orientations may be predictive of relationship abuse (Henderson et al., 1997). This is especially so when partners have experienced early environments fraught with rejection and some type of abandonment, be it psychological or other (Dutton, 1995; 1999; Fonagy, 1999b).

4.7 The violent couple and intergenerational transmission of domestic violence

Attention is paid here to the representational world of the abusive male and the abused female and the distortions of self and other present in the relating between the two. It is acknowledged that both males and females can be perpetrators of violence in relationships and incidents of bidirectional violence may occur frequently between members of such couples. However, there are fewer physical injuries to men as a result of women's abuse,

few if any refuge houses for abused men and a lack of a need for funding in this respect (Semple, 2001).

Consequently this initial discussion focuses primarily on domestic violence perpetrated by men on women in intimate relationships, beginning with an exploration of the applicability of object relations and attachment theory to this phenomenon, followed by a discussion of the inner world of both partners from these theoretical perspectives. A greater focus is naturally placed on the internal world of the parents given the propensity of their behaviour for disrupting the family relationships and in particular for the disturbance it causes to the mother-child attachment during periods of violence.

Domestic violence implies by its very nature, object relationships which are characterised by pathological features suggesting serious developmental disturbance in early relationships (Zosky, 1999). Siegel (in Zosky, 1999) maintains that it is the content of the representational world that moulds the sense of self and contributes to the distortion of how the self, the partner and the relationship are perceived and experienced. The capacity for intimacy, trust and security as adults is essentially determined by the level of nurturance and trust experienced in early object relations. Attachment begins in childhood and precedes romantic relationships (Doumas et al., 2008). The inner world of the individual is therefore used to interpret the outer reality of the relationship resulting in distorted expectations of others and consequently in dire attempts to make the relationship conform with the internal framework. Framo (in Zosky, 1999) makes the observation that people tend to select partners with whom they recreate and re-enact early interactions. This repetition compulsion is a return to the bad object allowing the individual to live in an emotional world that is identical to the one in which they were raised (Crabtree, 2009).

For the couple stuck in patterns of domestic violence, persistent frustration of their dependency needs in childhood or as Winnicott (1945) terms them, environmental impingements, inevitably led to the internalisation of numerous bad part-objects and the strong identification with these, which is ultimately expressed in destructive relating. Since there are not enough positive internalisations, the ability to self-soothe does not develop in the individual and so during times of anxiety emotional responses become difficult to regulate in the relationship (Zosky, 1999). Both partners present with an enormous amount of unmet and frustrated needs but the object of focus now changes from the respective parents to the adult partner (Crabtree, 2009).

The woman raised in a family that repeatedly failed her is likely to exhibit a deeply split ego structure embodied in an anti-libidinal ego filled with anger and disappointment as well as the need for revenge against her rejecting part-objects (Celani, 1999). Every occurrence of rejection serves to expand her anti-libidinal ego and this requires her to counterbalance the differential by developing an equally powerful libidinal ego (Fairbairn, 1952). This will maintain her attachment to the exciting (love) object and allows her to create elaborate fantasies about being loved in the future by her parents, if she is good enough or achieves

good enough goals. Her libidinal self internalises the good, idealised object and is kept completely isolated from the anti-libidinal self (Crabtree, 2009). In this way her libidinal self allows her to sustain the fantasy of hope by containing the positive memories that have not been damaged by the predominant split off memories of abuse and rejection. The expectation of love is thus kept alive although it is seldom experienced in reality.

At the same time the two ego structures must remain in balance to prevent collapse of her ego structure and to keep her attached to the frustrating object (Celani, 1999). As suggested by Fairbairn (1952) this in turn impoverishes the central ego which is completely dominated by the two endopsychic structures and may not contain enough good object memories to sustain it.

As an adult her early internalised frameworks will be used as a basis for comparison for the state of current relationships (Zosky, 1999). When her libidinal ego encounters rejection from an exciting object, splitting is triggered and the object will be perceived and experienced as completely rejecting. Her anti-libidinal ego will then become the dominant sense of self (Celani, 1999). This emulates her childhood experience of persistent rejection and inner splitting which will motivate her to unconsciously seek out rejecting objects with whom to re-enact her traumatic past (Celani, 1999; Zosky, 1999). Distortions in her representational world will shape her identity as well as her experience of self, her partner and her relationship (Siegel in Zosky, 1999). According to Fairbairn, the adult fails to abandon his/her original hate and his/her original need for the primary love object (Fairbairn, 1944). The woman's anti-libidinal self is based on painful and traumatic memories (Young & Gerson, 1991) which when pain or rejection are triggered elicits much rage upon the rejecting object in order to destroy it or change it by reforming its position (Crabtree, 2009). Reactions are often disproportionate and this part of the self becomes attracted to rejecting and disappointing objects. The abused woman may therefore be unconsciously attracted to the frustrating and rejecting parts of her abusive male partner (Crabtree, 2009). She may also re-experience her early narcissistic rage vicariously through her partner but in this way she can maintain herself as the good object.

In adulthood she will therefore not be attracted to 'normal' men due to introjective inversion or the rejection of good objects and attraction to bad objects (Celani, 1999). She will essentially seek a man who can fit into her unconscious expectations for disappointment, a man who will promise devotional love (activating the hopeful libidinal ego) and yet be capable of physical brutality. She needs the neglectful, abusive and rejecting object for a number of reasons; because he provides her with an externalisation of the bad object internalised in childhood and at the same time also provides her with a person to reform (Celani, 2001).

The abusive male partner, in his violence, also symbolically does to her what she unconsciously felt her parents did to her in childhood. By attempts to kill and injure her, he symbolically attempts to annihilate her sense of self ensuring a re-enactment of her

childhood dynamics and return to her developmental fixation (Celani, 1999; Crabtree, 2009).

Studies do tend to suggest that abusive men have also experienced trauma, parental rejection and lack of nurturing in developmental years, disrupting their ability to develop into healthy adults (Dutton, 1995). As a consequence they carry considerable residual trauma and malevolent internal representations of self and others. For these men, the experience of physical and emotional abuse in childhood tends to increase their chances of becoming domestically violent partners (Zosky, 1999). There is also evidence that as a result of their early experiences, abusive men are unable to regulate internal emotional states and tend to look to their partners for this function, leading to enmeshment and boundary diffusion (Zosky, 1999). If as a child he never experienced soothing or nurturance from a parent, he cannot draw upon internal frameworks or representations to restore stability in times of conflict. He will therefore seek this from his partner and when she is unable to do so, he experiences this as a core injury reminiscent of his early experiences of rejection.

Zosky (1999) maintains that there is often a pervasive rage that accompanies unmet dependency needs in childhood and this desire to fulfil these needs often takes on a frantic and demanding quality in the adult. As a child the woman would have been unable to risk discharging her narcissistic rage towards her original objects due to potential loss of the object and consequent abandonment. Yet since her internalised experiences were so extreme, at some stage they will require expression in adulthood. Her parents are inappropriate recipients of this rage since they would clearly not understand, accept or tolerate her discharge of emotion against them. Therefore an appropriate object must be found who can behave as the rejecting object without abandoning her and who can split into the libidinal object through promises of reformation and undying devotion (Celani, 1999). The abusive male has a similar character structure in that he also has a deeply split ego structure where his anti-libidinal narcissistic rage can be discharged and the libidinal ego can become dominant after the violence is over. By unconsciously engaging in this dynamic he is also mirroring her internal states.

Object Relations essentially demonstrates how domestic violence is likely to occur when people with specific experiences in childhood leading to injured attachment and specific psychological characteristics, enter a relationship. The area of attachment however, merits a closer inspection due to the propensity of individuals involved in domestically violent relationships showing leanings towards specific attachment states of mind.

4.7.1 The Closeness-distance dilemma

Just like children, adults seek proximity and connectedness with specific attachment figures to promote physical and psychological security and intimacy (Doumas et al, 2008). An adult partner may function as a replacement former attachment object and threats of abandonment may revisit past neglectful and rejecting experiences (Crabtree, 2009).

The abusive male's perception of lack of nurturance from the primary love object has been shown to be significantly associated with aggression towards intimate partners (Zosky, 1999). Bowlby (1973; 1988) perceived violent acts in the intimate relationship as an exaggerated sort of protestation against the perceived threat of the attachment figure leaving and physically or emotionally abandoning the individual. Anger is a normal and natural reaction in the child to perceived endangered safety and closeness to the primary attachment figure (Fonagy, 1999). However, tantrums do naturally subside with the emergence of a stable self organisation. Yet, when the insensitivity of the caregiver is persistent, anger turns to aggression and this response becomes integrated in his psyche, creating a defensive shield around a fragile and unintegrated self.

Dutton (1995), like Bowlby, characterises interpersonal anger and aggression as arising out of frustrated attachment needs and as having the function of protestation and eventual attempts at regaining contact with the attachment figure. When this attachment is threatened by perceived attempts at separation and autonomy by the partner or real or fantasised abandonment, efforts are made by him to return the relationship to its previous state of proximity and desired dynamic. This desired dynamic is regulated by internal working models established in childhood (Doumas et al., 2008; Dutton 1995).

When violent and non-violent men were compared on several variables including attachment style, men with fearful and preoccupied attachment were more likely to be physically violent and emotionally abusive (Zosky, 1999). These men continued to exhibit their previous attachment styles (in childhood) in adult relationships. Preoccupied and fearful groups report more anxiety about rejection and unlovability, suggesting that relationship anxiety is related to internal working models of self (Feeney, 2008).

Anxiety over abandonment is intricately connected to discomfort with closeness and distance and both of these dimensions have been clearly linked to violence in relationships for both male and female individuals (Doumas et al., 2008; Feeney, 2008). Although both partners in the abusive relationship may seek to merge due to the intense desire for closeness which they lacked in childhood, they are also terrified of being engulfed, and difficulties in regulating intimacy and distance emerge (Zosky, 1999). They fear engulfment because of the vulnerability involved in dependency, which provokes extreme anxiety in both. Rejection-sensitive women who were highly invested in intimate relationships were shown to be at an increased risk of partner violence. Failure to achieve distance regulation in the relationship may result in the escalation of this violence (Feeney, 2008).

Preoccupied individuals may also be more willing to tolerate consistent abuse from their partners (Henderson et al., 2005). Studies suggest that in conflict situations preoccupied individuals tend to disclose more, may judge the interaction as more intimate and also tend to feel more satisfied after the conflictual situation than secure, dismissive or fearfully attached individuals. They could therefore be at higher risk for receiving abuse from a violent partner and may be more vulnerable to staying in abusive relationships. In idealising

their partner, individuals may also create unrealistic expectations of the partner's ability to change.

Roberts and Noller (in Henderson et al., 2005) suggest that anxious individuals are more likely to turn violent when their partners are uncomfortable with emotional intimacy thus increasing their anxiety and fear of abandonment. Attachment interview narratives of violent males, likely to be fearfully attached, yielded predominantly dismissive patterns with the denigrating and disavowing of attachment relationships (Fonagy, 1999). Also present were incidents of early trauma in their histories. More specifically, the mismatching of male high attachment avoidance and female attachment anxiety has been found to be a dangerous combination (Doumas et al., 2008). The patterns of closeness-distance and demand-withdrawal appear to predict violence given the discrepancy between the female's need for closeness and reassurance and the male's need for distance and emotional separatedness (Doumas et al., 2008).

4.7.2 Jealousy and shame

Fearful attachment carries a strong fear of abandonment and jealousy is a component of this process (Dutton, van Ginkel & Landolt, 1996). Abusive men frequently display intense and disproportional jealousy or 'conjugal paranoia' which is evidenced in their dire need to control their partner and eliminate any attempts at individuation (Dutton et al., 1996; Zosky, 1999). Even slight signs are perceived as conclusive evidence of betrayal and potential abandonment leading the abusive man to react violently (Dutton et al., 1996). For him, attachment anxiety may be construed in terms of a sexual theme and through splitting and projection, unacceptable sexual impulses are projected onto the woman leading to jealousy and the fuelling of abandonment fears. In extreme cases these pathological reactions to imagined threats coupled with a propensity for rumination may manifest in stalking, intrusiveness and eventual femicide (Dutton et al., 1996). As early as 1979, research by Gelles also suggested that violence worsened during pregnancy and locations of the beatings moved from the face and breast to the abdomen. The presence of a third person in the relationship (the infant), who can potentially threaten the merger and detract from the needs of the abuser, appears to trigger more intense assaults (Zosky, 1999). Physical abuse, threats and stalking as behaviours, attest to the presence of intrusiveness in jealousy where the desire to hurt the partner is associated with feelings of anger and humiliation directed and attributed to the love object and not to the rival (Dutton et al., 1996). Oppressive jealousy is not an expression of love but a manipulation to keep the partner captive and available to regulate his intolerable internal states (Fonagy, 1999).

Men who are violent partners do have a desire for contact and intimacy but suffer from extreme distrust, fear of rejection and marked avoidance of any perceived signs of such rejection. His source of trauma has been found to be rooted in his childhood experiences of abuse and disturbed attachment (Dutton, 1995). His narrative is also likely to depict strong

features of dismissive patterns as well as the denigrating and disavowing of attachment relationships (Fonagy, 1999a).

Although the quality of adult attachment is a risk factor for domestic violence and a necessary pre-existing condition for violence to take place, insecure attachment mental states alone are not sufficient to trigger domestic violence (Doumas et al., 2008; Fonagy, 1999a). What seems to have emerged from empirical studies is that induced shame, early trauma and attachment injuries in childhood form a potent and dangerous cocktail. When he meets with early rejection and a lack of acceptance, the abuser's shame becomes the emotive vehicle through which to split off the unacceptable parts of the self and others (Solt, 1996). Solt (1996) describes this in a powerful way: "For me the word 'shame' evokes the 'shushing' sound that means I must silence my voice, muffle my opinion, contain myself so I fit into the expectations of the 'silencer'" (p. 39).

When shame is evoked, men may deny the fact that it is happening, fight against it or attempt to flee the experience, yet Solt (1996) maintains that to overcome this, men need to develop a tolerance for this affective state. Dutton et al. (1994) found three recalled sources of shame in assaultive males which included public scolding by parents, random punishment and persistent disapproval. Shame is a by-product of the anti-libidinal self where bad objects are internalised, compartmentalised and where true intimacy in relationships becomes sabotaged. Shame inducing experiences though, have a lasting emotional impact and project an inherent 'badness' into the individual (Dutton, 1999). Studies have suggested that the recalling of shaming actions, predominantly by the father figure, were highly connected to abusive behaviour in the individual (Dutton, 1999). Scheff (in Dutton, 1999) maintained that shame is instantly converted into rage in the individual and that this is an attempt to protect the self from further trauma and threatened annihilation. When shaming experiences are coupled with physical abuse and with insecure attachment in childhood the likelihood of abusiveness in adulthood increases significantly.

Shame inducing experiences are attacks on the global self and could produce disturbances in self-identity (Dutton, 1995). Shame prone individuals tend to display a limited capacity for empathy and a high propensity for anger expressed through aggression. Dutton, Ginkel and Starzomski (1994) found that recollections of shame inducing experiences by parents were significantly related to assaultive men's self reports of both anger and physical assault and to their wives' reports of the man's use of dominance and isolation in the relationship. Anger may serve the function of overriding less acceptable emotions such as shame. Individuals are therefore likely to attempt to ward off such attacks by externalising the cause and avoiding personal responsibility. This suggests that what may be transmitted across generations are not necessarily patterns of domestic violence but damaged internal representations of relationships with parents that were considerably rejecting and unavailable.

4.7.3 Walker's cycle of domestic violence through a psychoanalytic lens

Walker (1979) proposed a very useful descriptive model of domestic violence which categorises the phenomenon according to several phases. This model describes a cycle of violence that moves from tension building to violence and then to remorse and may be behaviourally describing the process of projective identification (Zosky, 2003). Because this model provides such a clear depiction of the cycle of domestic violence and may be particularly useful to fostering understanding of this cycle, it has been included in this theoretical framework.

This model is used here as a foundation upon which object relations is superimposed, providing a comprehensive explanatory model of domestic violence (Celani, 1999; Crabtree, 2009). In phase One of Walker's model, the 'tension-building' stage, verbal attacks and milder forms of physical aggression on the part of the male abuser take place against his partner (Celani, 1999). The male abuser sees the female partner as the rejecting object since she has failed to adequately meet his needs. These needs are infantile and unrealistic (Crabtree, 2009) but this disappointment leads to greater oppression, jealousy and possessiveness (Dutton, 1995).

The woman initially relies on the moral defence to agree with her partner's hostile projections towards her, since she rationalises that his rejection is reasonable because she is the bad object and not good enough, thus excusing his aggressive behaviour towards her. Often she will take responsibility for his rages by believing and stating that she has provoked the attack. This also gives her the illusion of control since she can stop the attack if she stops being bad and provocative. Young and Gerson (1991) suggest that in this way the original trauma is re-enacted by identification with the frustrating object in acceptance and justification of the abuse.

In phase Two, 'the acute battering stage', the abusive partner discharges his primitive violence on to the female partner whom he perceives to be being the rejecting, bad object and his anti-libidinal rage is expressed toward her (Celani, 1999). Delusional ideas that the female partner has changed in appearance or character are frequently reported by men at this stage (Fonagy, 1999) and she ceases to be what he needs her to be. She has changed and change brings about abandonment. There is evidence that such men find it intolerable to be alone and report feeling vulnerable and abandoned (Fonagy, 1999). Through separation, that which is expelled threatens to return and stay, which implies the destruction or annihilation of the self. Therefore any attempt by the partner to individuate or achieve psychological autonomy and separation leads to violence as it threatens the availability of a 'receptacle' for externalisation. He feels unsafe because of the torturing representation from which he cannot escape because it is experienced from within. At this stage the violent act has a dual purpose, it recreates the bad object within the other and attempts to destroy it to prevent it from returning.

In Phase Three, the kindness and contrite loving behaviour stage, there is a mismatch between the ego states of the abuser and the abused (Celani, 1999). When the violence ends the abuser is faced with a partner who is badly beaten and whose anti-libidinal self is filled with rage and the need for revenge. He is faced with potential emotional, if not physical, abandonment. His frustration and anger is repressed in his anti-libidinal self and he shifts into a libidinal mode of self where she once again becomes the desired good object. From a Kleinian perspective, at this stage he experiences guilt and is no longer using the immature defences of the paranoid-schizoid position but has moved towards a slightly more integrated state and the depressive position (Crabtree, 2009). According to Dutton (1995), shame drives the contrition phase of the cycle of abuse.

He needs and wants the relationship to continue but she still sees him as the rejecting, bad object. This motivates him to make attempts to save the relationship and get her to perceive him as the good object once again, by making her split back into her libidinal self. His fear of abandonment and guilt motivates him to shower her with attention and gifts in the hopes of captivating the good object once again. He is possibly, according to Klein, attempting to make reparation for his destructiveness (Crabtree, 2009). According to Fonagy (1999) the man's reaction triggers her caretaking attachment system as she senses his desperate need for her. His need is essentially not for her as a partner but for the regulation she provides of his internal states. His promises of change, however, resonate with the woman's libidinal self and she once again adopts a libidinal view of the male partner, re-entering the relationship. The abusive man now returns to the charming libidinal self who is the good object, the woman believes his promises and they return to the 'honeymoon phase' of the relationship (Crabtree, 2009; Zosky, 2003). At this stage the woman may rationalise the partner's behaviour as is seen in a South African study by Davhana-Maselesele et al. (2009) where one of the participants reasoned her husband's assault in the following way: "My husband assaults me because he loves me. He is so jealous and possessive that he can't live without me. Therefore this means that he loves me so much" (p. 2535).

As the relationship progresses, the woman feels reassured and relaxes, allowing her individuality to emerge once again (Fonagy, 1999). This may bring about threats of abandonment for her partner and the cycle of violence begins again. Due to his weak ego he will revert back to the paranoid-schizoid position and become violent (Crabtree, 2009).

Over time, the cycle of abuse becomes more frequent as the violence escalates (Walker, 1979). Each time the abuse happens, the anger towards the rejecting object grows making the anti-libidinal self expand. As the anti-libidinal self grows so does the libidinal self causing the central ego to become weaker and less able to suppress each subsidiary ego state, making the possibility of dysregulation and violent acting out of this emotion more likely (Crabtree, 2009).

4.8 Broadening the focus

Relational psychoanalysis seems to paint an alarmingly pathological picture of interruptions in caregiving in childhood and their impact upon young adult's internal representations of self and others as well as on the relationships that may result. This is perhaps because clinicians are more likely to interact with clients who express more extreme behaviours and greater emotional distress than usually found in the general population.

Considerable references are made to the development of an unstable sense of self, disrupted adult attachments and even to perpetuated psychopathology in adulthood (Bowlby, 1988; Diamond, 2004; Dozier, Stovall-McClough & Albus, 2008; Herman, 2001; Howe & Fearnley, 1999; Miller, 1981; Rubens, 1994). On an individual level the existence of pain and hurt are not in of themselves evidence of psychopathology (Anderson, 2010). Problematic behaviour is often produced within a repressive context as a coping strategy or method of survival and a predominant focus on psychopathology may create negative perceptions of an individual's empowerment and ability to address stressors in their lives.

It is also essential to acknowledge that not all children who have been exposed to domestic violence in childhood will repeat patterns of violence in their intimate relationships or develop personality disturbances (Anderson, 2010; Langhinrichsen-Rohling, 2005). Demonstrated opposition to states of powerlessness, to isolation, and to being silenced are marked indications of developmental growth (Anderson, 2010). Also the capacity for empathy, compassion and to care may have developed due to opportunities with others such as grandparents, friends and even a caregiver who demonsrated the capacity for reflective functioning (Slade et al., 2005) despite domestic violence involvement.

When exposed to violence in the home, some children demonstrate incredible resilience (Carlson, 2000). This concept is essentially equated with the ability to handle one's thoughts and feelings as well as the capacity to form caring relationships despite exposure to violence (Varvin, 2007). Varvin (2007) further highlights the intra-psychic factors that are connected with resilience, such as the capacity to build a safe inner space where the person can regulate pain and protect themselves from too many vulnerable feelings. A child who can conceive of the mental state of the other may also be able to contemplate the possibility that the parent's rejection of him is based on false beliefs and insensitivity and is therefore able to moderate the impact of the negative experience (Fonagy, 1999b). In this way the cycle of replication of rejection and insecure attachment may be interrupted, enabling 'holding' relationships with others to be fostered.

According to Downey (2001), impairments in development brought about by adverse familial environments can be re-dressed in spaces that are interpersonally enriching and loving. Therefore the presence of a 'good enough' other in the child's environment, apart

from the main caregiver, may act as a buffer against pathological outcomes. Development is also a lifelong continuous process and there are several pathways of protection and growth in the self that involve the discovery of new objects leading to the resumption of maturational growth and to new caring bonds (Downey, 2001).

According to Calabrese et al. (2005), friendships and work relationships' internal working models, although overlapping with, are not identical to internal working models of relationships with parents and significant others. These friendships and work relationships are resources and are significant to life satisfaction, adaptation and may even strengthen a SOC in the individual.

For young adults, intimate relationships have enormous identity implications (Pitman, Keiley, Kerpelman & Vaughn, 2011). Intimate partners may be especially important sources of support and validation in the face of threats to identity (Pitman et al., 2011). Since the notion of identity has come to be associated with relationships and with the capacity for intimacy and interconnectedness, the possibility of new attachments generates a sense of hope for the wounded self of young adults who have been exposed to domestic violence in childhood. Riese (2005) maintains that real strength of self may lie in the person's ability to maintain their self processes while accepting that the self is vulnerable in a world that is not always a loving place. Being able to maintain a sense of the self as valuable, despite the fact that the environment may often signal the opposite, is crucial to inner strength and stability of SOC (Riese, 2005).

What appears to have emerged from the various discourses and is significant is not necessarily the fact that trauma and violence took place, but how the person has emerged and chosen to respond to this later in life, as well as the resources the individual has access to in their particular context. This study will focus on exploring how all of these factors have merged to influence these young women's sense of self and their capacity for resilience or lack thereof.

4.9 Disengagement

Winnicott (1967) maintained that if the individual does not find his sense of self mirrored in his caregivers, he/she will likely internalise the caregivers' mental states as being their own. The parents' rage, fear and hatred is taken in and becomes a part of the representation of the self. This would explain why mothers often describe their disorganised children as replicas of themselves and experience themselves as merging with their child (Fonagy, 1999b). The representation of the parent is now within the child and is externalised by the child.

In opposition to this is the natural progression for identity development evidenced in individuals also able to internalise the more positive aspects of relational patterns with caregivers and then to use these as objects through which to interact with others (Winnicott, 1971). Winnicott (1971) talked about the third space as an intermediate area of experience between two people where change and growth takes place and where the sense of self emerges by the establishing of boundaries with the caregiver. This third space is where illusions regarding the other are dispelled and a more accurate understanding of that person as an individual in their own right, with desires and needs of their own, is arrived at. Clearly this is not an area of development achieved by partners involved in domestic violence where neither is experienced as whole but as a part object.

Instead the individual experiences repetitive deprivation, developing a 'false self' as a defensive strategy and complying since this circumvents the loss of the object (Winnicott, 1960b). It is therefore easier for the person to engage in the moral defence strategy and idealise the parents, taking on the burden of badness rather than believe that his/her parents are abusive and dangerous. This is a psychic dynamic displayed by the abused woman who initially accepts the destructive projections from her male partner and takes on the burden of badness. As mentioned previously, to a certain extent all individuals develop a false self in order to cope with temporary failures in the holding environment (Winnicott, 1960b). However, within environments of domestic violence caregiving failures are such common occurrences that this becomes the predominant way of functioning for the person.

Disengagement from the internalised parents is therefore a necessary precursor if an individuals' sense of self is going to survive and develop their own identity, becoming more psychologically independent while at the same time being more capable to pursue intimate relationships (Årseth et al., 2009; Klein, 1937; Zvělc, 2010).

The cycle of domestic violence and its potential for perpetuation is clearly not given to single-factor explanations but appears to be complex in nature and a product of interaction and intersection between intrapsychic, interpersonal and even societal factors which serve to enable them.

Exposure to domestic violence in the family of origin may not be enough in and of itself to cause serious pathology in the child that is exposed nor to drive them into violent relationships of their own, although cumulative trauma is invariably expected to influence intrapsychic and interpersonal dimensions to some extent. That is, one would automatically expect some sort of emotional handicapping due to experiences of trauma and caregiving failures. Despite this, individuals may very well grow into young adults able to acknowledge the damage done yet able to hold onto good part objects that sustain them and consequently be better able to make more discerning choices for themselves. This study is specifically concerned with the internal world of such adults who are still coming to terms with their backgrounds, this perhaps being a life long process.

4.10 Summary

In this chapter, psychological development, exposure to domestic violence in childhood and violent relationships were analysed through a psychoanalytic lens. Because domestic violence is necessarily characterised by pathological object relations and insecure attachment states of mind, individual development and exposure may become necessarily associated with intrapsychic and interpersonal disturbance. To provide a more balanced perspective on development, Antonovsky's (1979, 1986) theory of Salutogenesis was also used, especially to clarify the development of self and in particular of the SOC in the individual and how this may change over time with new experiences.

The importance of early caregiving in the development of mentalisation, healthier internal representations and in the eventual capacity for separation and individuation was highlighted. The creation of a safe, intersubjective space between the primary maternal object and the child was found to be crucial in the successful transition to more integrated internal objects and to more secure attachments in adulthood. Defensive mechanisms used by individuals to protect the self from undue anxiety states particularly those caused by traumatic experiences such as exposure to domestic violence, for example, play an imperative role in restorative functioning for individuals and in many ways are found to be adaptive, especially in childhood.

Caregiving failures in the face of adversity do present serious obstacles to the development of security of attachment in adulthood. This is particularly evident in the description and analysis of the violent couple and of the cycle of domestic violence. Nevertheless, for the child exposed to this in childhood, there exists the possibility of disengagement from malevolent internalised representations, for the discovery of new objects, for the strengthening of the SOC and for new healthier attachments to take place.

CHAPTER 5

RESEARCH METHODOLOGY

5.1 Introduction

This research study is exploratory in nature and involves the study of young female university students who were exposed to frequent and persistent domestic violence in childhood. Participants are self selected individuals who were (at the time of the interviews) 3rd year or postgraduate students in the Faculty of Humanities, specifically the School of Human and Community Development at the University of the Witwatersrand. A combination of both structured and semi-structured interviews were used to collect data from the participants. A structured questionnaire was also administered upon completion of the first interview.

This study was predominantly concerned with the attachment styles and the intra-psychic object representations of participants as well as with patterns of resilience and fortitude demonstrated by them. Consequently the theoretical foundation used for this research involved Attachment theory, Object Relations and Salutogenesis, specifically the SOC components of comprehensibility, manageability and meaningfulness.

In this chapter the research paradigm and design used will be discussed with particular attention paid to the advantages and limitations of qualitative research, specifically case study designs as well as reliability and validity processes applicable to this type of research. Research questions will be explored after which data collection procedures and sampling will be addressed. Instrumentation, scoring procedures and descriptions of participants will also be delineated, with the final section of the chapter attending to the data analysis and ethical considerations of the study.

5.2 Research paradigm and design

The research paradigm used throughout this study is mainly qualitative in nature although a small quantitative contribution was incorporated into the design relating specifically to the inclusion of a structured questionnaire, completed by each participant after the first interview, which was scored along a Likert scale. Quantitative research essentially yields information which is expressed in numerical form as a way of measuring quantified constructs. In this particular case the SOC experienced by each individual, as measured by Antonovsky's (1993) Orientation to Life self-report questionnaire, was used.

The contest between the choice of qualitative versus quantitative research design and methodology has continued for decades. According to Kächele (2011) this debate has become somewhat irrelevant since both methods yield different types of knowledge. Quantitative research, in any case, necessitates qualitative definitions (Kächele, 2011).

Qualitative research significantly addresses the existing gap between the object of study and the way it is represented and understood, since the meaning that people attach to their experiences and how they make sense of their world can best be investigated through qualitative methods (Hollway, 1989). Researchers often use the term 'thick descriptions' when referring to the detailed portrayals of participants' experiences, interpretations, feelings and meanings of actions described in qualitative studies. These detailed descriptions convey the experience of the phenomenon that has been investigated as well as the context surrounding it, and without this level of description it can become difficult for readers to assess how theory and actual real life vignettes intersect (Shenton, 2004).

When addressing research on domestic violence in particular, Laing (2000) makes the following noteworthy observation:

A strength of qualitative studies...is their capacity to tease out factors which enhance the resilience of children and young people. This research approach, which moves beyond 'measuring effects', is recommended by a recent Australian report as an important next step in developing more effective responses to children and young people affected by domestic violence (p. 7).

Although the emphasis of this type of research remains rooted in meaning and subjective experience, the notion of objectivity is carefully considered and the importance of being systematic, careful and rigorous (akin to the element of trustworthiness) is stressed in qualitative enquiries (Baxter & Jack, 2008; Cartwright, 2004).

Qualitative research has also been described as underscoring epistemological pluralism which focuses on the circular dynamics between subject and object (Baxter & Jack, 2008). As such, the interpretive nature and the role of the researcher are perceived as being crucial to the meaning assigned to issues being explored. This type of research uses a naturalistic approach which seeks to understand phenomena in context specific environments, allowing the researcher to immerse themselves in the world perspective of participants (Golafshani, 2003). It therefore follows that what the researcher brings to the study is also of crucial importance and requires scrutiny. Psychoanalytic paradigms are particularly useful in this case since psychoanalytic research delves deeper into the participant's experience and internal representations and the researchers' own subjectivity and can therefore reach the domains that other kinds of psychology may not (Parker, 2003).

The qualitative research design is essentially the action plan and ensures that coherence is achieved through linking the data collected to the conclusions, which are linked to the research questions (Rowley, 2002). In this research, a case study research design was used. In a case study design which is exploratory by nature, the data collected is not structured in order to support or refute an hypothesis specifically, but is instead used to provide greater understanding of the phenomenon being researched within the theory that surrounds it and may lead to new hypotheses being formulated on the current topic being studied (Babbie & Mouton, 2009). Contextual detail is of high importance in exploratory research in terms of

the researcher being able to understand and interpret case studies and identify the variables which influence the unit of study (Babbie & Mouton, 2009).

As useful and relevant as qualitative research design may be, its difficulty in establishing scientific credibility within the research world has proved to be a challenge to researchers. While it escapes the straight-jacketing of positivist research (Kvale, 1999), the challenges posed by reliability and validity considerations have recently begun to be addressed by dialogue surrounding the applicability of the terms validity and reliability to qualitative research studies (Golafshani, 2003; Shenton, 2004).

5.2.1 Reliability and validity of qualitative research (Trustworthiness)

The concepts of validity and reliability in qualitative research cannot be addressed in the same way as in quantitative studies (Shenton, 2004). Traditionally reliability refers to the extent to which research findings can be replicated by other researchers under the same conditions whereas validity entails the believability and inherent accuracy of a claim (Shenton, 2004; Polkinghorne, 2007).

Criticisms levelled at qualitative research include the difficulty experienced in determining the reliability and validity of such studies in the traditional, 'scientific' sense. Guba and Lincoln (in Morse, Barrett, Mayan, Olson & Spiers, 2002) developed equivalent concepts encompassed within the idea of trustworthiness of qualitative research. Trustworthiness involves the exploration of concepts such as subjectivity, reflexivity and the social interaction of interviewing (Golafshani, 2003). Morse, et al., (2002) maintain that trustworthiness is made up of four main aspects, namely: credibility, confirmability, transferability and dependability.

1. **Credibility** is synonymous with the concept of internal validity and essentially asks how congruent the research findings are with reality and can be fostered through the adoption of well established research methods (Golafshani, 2003; Shenton,2004), such as the use of the AAI, the OLQ, otherwise known as SOC29, and the psychoanalytic interview (Cartwright, 2004), in this study, for instance. More specifically credibility deals with the adoption of well tested and tried research methods where the specific procedures, line of questioning followed and methods of data analysis are derived from those that have been successfully utilised in previous similar projects (Shenton, 2004).

Random sampling of respondents, triangulation (the use of different methods), qualifications and experience of the researcher and tactics to help ensure honesty of participants (seeking clarification on statements and probing) also promote the credibility of a research study. Randomisation is to a certain extent a challenge when purposive sampling, which is widely used in exploratory studies, is applied. However, the use of triangulation often compensates for the individual limitations of each method used to collect data and according to Shenton (2004) utilises their respective advantages. Triangulation is especially

useful in addressing observer bias and in establishing valid propositions because it uses a combination of methods to strengthen the study and may include the use of both quantitative and qualitative approaches (Golafshani, 2003). Exceptions and differences found through the various methods may serve to modify and inform theories in the specific field being studied.

Criticism has been levelled at the mixing of methods under qualitative paradigms though, because each method presents with its own assumptions in terms of theoretical frameworks (Golafshani, 2003), however this has been considered in this particular study, through an indepth discussion and comparison between the three main theoretical frameworks used which highlights areas of useful overlap (for instance the concepts of coherence and comprehensibility used in the AAI and OLQ respectively) and addresses specific areas of difference (see chapter 4 and chapter 9).

Reflexivity

With regards to the background, qualifications and experience of the researcher, Maykut and Morehouse (in Shenton, 2004) recommend the inclusion of personal and professional information relevant to the phenomenon which is being studied. This remains a matter of debate amongst researchers with concerns surrounding objectivity and influence of the researcher upon the study and possible contamination of findings (Babbie & Mouton, 2009). It is for this very reason that the researcher should remain consciously aware of her own subjective state in relation to the topic and her experiences while conducting the study, as this can prevent distortion of any part of the research and can improve the credibility of the study.

Given that my interest in the topic of study was partly due to my own experiences of exposure to domestic violence in childhood, and considering my role as an educational psychologist and my professional interest in developmental psychology in particular, my role as researcher in this study was therefore perceived as being part of the meaning making process of this research. My role therefore needs to be acknowledged in order to enhance understanding of how my own subjectivity affected the research. In this study I thus chose to provide such information as seemed fitting and deemed relevant to the study in appropriate sections of the report (transference and counter-transference discussions). An example is provided below:

Most of the participants were individuals who had not yet been granted the opportunity to apply for their Masters degrees in their particular subject, an opportunity that appears to be intensely coveted among such students. This situation triggered paranoid-schizoid fantasies in me about information relating to the participants' real identities and histories leaking and being uncovered and laid bare to the relevant Department, possibly impacting their applications should they choose to pursue the Masters degree. As a result I did not transcribe the names of suburbs or shopping malls with which participants could be

'connected', let alone names of family members that came out during the interviews. I also continuously referred to the participants by number as opposed to a pseudonym, in supervision. After reflection, this was linked to a need in me to protect the participants, a need perhaps made stronger due to some identification with the participants.

Another example was my persistent use of the terms 'maternal and paternal objects' in the first drafts of the write-up instead of 'mother' and 'father'. Discussion in supervision allowed for reflection around a need in me, at times, to intellectualise and maintain some emotional distance from the participants' experiences of trauma, their narratives of such and their parents.

Reflexivity was a process undertaken at all stages of the study, from conceptualisation to write-up of the findings and, as such, reflection on my experiences is included throughout the findings section, where relevant.

In addition to reflexivity, other ways of increasing the study's credibility were also considered. Only participants who volunteered and were genuinely willing to offer data freely took part in this study. No monetary benefits were made available to participants as a result of volunteering and the only benefit provided was that of feedback on the results yielded from the interviews for each individual. This feedback entailed a brief summary on the participants' spontaneous reactions to domestic violence (such as ways in which they protected themselves in childhood) as well as resilience demonstrated in adulthood (new relationships, engaging with therapy, forgiveness etc.). Participants were told upfront that they would not receive information relating to their specific attachment state of mind classifications, as this was deemed to be ethically difficult in cases where the researcher could not monitor or respond to the participants' reactions to this information. The credibility of the study was also enhanced through the use of probes at specific times and the rephrasing of questions to explore areas of uncertainty during the interviews. This served to enhance clarification and better understanding of what the participant was stating. This was done to ensure that the participants' meanings could be accurately conveyed, thereby increasing the credibility of the results.

2. **Confirmability** entails ensuring that the findings are the result of participants' experiences and ideas and not those of the researcher (Shenton, 2004). Awareness of subjective states of mind pertaining to the research and to counter-transference reactions serve to minimise observer bias and increase confirmability in psychoanalytic studies (Cartwright, 2002). Self awareness with regards to motivations (as described above) and the supervisor's guidance and direct input during data collection and analysis, ensured minimisation of observer bias in this study. Short notes were also made after each interview denoting particular reactions and feeling states in the researcher, both during and after each interview. These allowed for reflection around counter-transference responses in the researcher.

Since steps should be taken to ensure that the findings are the result of the participants' experiences and ideas and not the preferences of the researcher, Shenton (2004) further recommends that the reasoning underpinning the choice of methods adopted be acknowledged in the research report as well as the reasons for choosing one approach above another. This serves the reader in evaluating the strength and authenticity of the data and constructs that emanate from the study. Given that this study was predominantly concerned with in-depth exploration of mental representations, attachment states of mind and individual SOC, the use of two personal interviews and a questionnaire which could tap into participants' own interpretations of their experiences and their own perceptions was critical to exploring the phenomena adequately. Personal interviews lend themselves to the obtaining of comprehensive, detailed information more so than one would obtain through the use of a focus group, for instance, where participants may be more guarded, or even through a detailed questionnaire where non verbal cues are inaccessible, as is the use of probes, to elicit further relevant information.

These methods also led to the choice of relevant instruments such as the Psychoanalytic Research Interview, AAI and SOC-29 as being the most applicable methods in investigating these phenomena. Each method's reliability and validity, in evaluating these specific phenomena respectively, has been well established by various research studies (AAI: Bakermans-Kranenburg & van IJzendoorn, 1993; Benoit & Parker, 1994; Psychoanalytic Research Interview: Cartwright, 2002; Kvale, 1999 and for the SOC-29: Eriksson & Lindström, 2005; Van Schalwyk & Rothman, 2008). The use of two instruments in this study (AAI, SOC-29) which are to a large extent independent of the human skill and perception of the researcher also served to enhance the confirmability of the research results.

3. **Transferability** refers to the concept of external validity and deals with the extent to which the findings of a study can be applied to other situations (Shenton, 2004). Sufficient thick description of the phenomena may enable readers to compare the instances of the phenomena with those that have emerged in their own situations. However, Onwegbuzie and Leech (2010) warn against the lack of interpretive consistency and unwarranted generalisation in case study research. They recommend the application of the model only to cases in the research and not as a generalisation to others not involved, thereby circumventing statistical generalisations which are inapplicable to case study research

Although each case study is unique and is defined by specific contexts making transferability difficult, it does not make it impossible in qualitative studies (Shenton, 2004). Stake (in Shenton, 2004) argues that although each case may be unique, it also represents an example in the larger group (of female, Humanities students exposed to domestic violence in childhood, in this particular study) and as a consequence the prospect of transferability should not be immediately dismissed. When perceived within this light, transferability of qualitative studies becomes more feasible. However, it is then imperative that the domain to which the study's findings can be generalised is clearly established.

The boundaries of the study should therefore, also be clearly communicated in the research report and made evident in information given as to the number of participants engaging in the research, the restrictions in the type of individuals who took part, the data collection methods that were employed, the number and length of the data collection sessions and the time period over which the data was collected (Shenton, 2004) and this is discussed later in this chapter.

As for all research designs there are advantages and disadvantages to case study research which is best framed around the ultimate aim being the attainment of depth rather than transferability and breath (Flyvbjerg, 2006).

4. **Dependability** corresponds with the term reliability and addresses the possibility that if the study were repeated under the same conditions with the same participants, similar results would be obtained (Shenton, 2004). In order to fully inform readers, it is important for the text to include detailed descriptions of the research design, how it was implemented through data gathering, as well as a reflection of the effectiveness of the process used. Consistency of the data is achieved when the steps of the research are verified through thorough examination of the analysis of process notes and transcriptions (Golafshani, 2003). It has been argued that credibility can be tied to the issue of dependability in terms of ensuring the latter. If the processes within the study are reported in detail this should enable a future researcher to repeat the study and the research design may then be viewed as a preliminary model setting a foundation for future work (Shenton, 2004).

These four criteria serve to establish the academic soundness of qualitative studies ensuring that traditional reliability and validity are paralleled by standards for evaluation, relevance and significance (Shenton, 2004; Morse et al., 2002). All of these aspects should be considered and efforts made in applying them before embarking on a qualitative study (Morse et al., 2002).

5.2.2 Case study design

Case studies are frequently used within the psychological research field (Lees, 2005; Rowley, 2002) as they serve to explore new ideas where little theory is available to describe the effects of an event and to explain complex phenomena (Kohn, 1997). These insights might not be achieved with other approaches (Rowley, 2002). As such the case study presents a context dependent knowledge which is necessary for human learning on particular topics and the development of expertise on these (Flyvbjerg, 2006).

Case studies are essentially an analysis of a social situation over a period of time and can identify how a complex set of circumstances came together to produce a particular phenomenon (Rowley, 2002). One of the criticisms of this research method is the fact that the case study is not necessarily representative of similar cases and the results are thus not given to the possibility of generalisation. Hancock (1998) argues that this is a common

misunderstanding of case study research which is, in essence, 'particularistic' and 'contextual' and is therefore aiming to describe that case in detail and not necessarily to generalise to other cases or prove assumptions. Rowley (2002) and Johansson (2003), on the other hand, maintain that transferability may be performed with case studies if the case study has been appropriately informed by the theory and can be seen to add to it in some way. This method of 'generalisation' is not statistical in nature as in quantitative studies but involves analytical generalisation in which the empirical results of the case study are compared to the developed theory. Johansson (2003) credits this analytical generalisability as being based on reasoning which can be inductive, deductive or abductive. Deduction examines the trustworthiness of a theory, induction focuses on derivation of a domain of theory from cases whereas abduction is the process of facing an unexpected fact, applying a rule and eventually positing a case that may be. Rowley (2002), concerned with deductive reasoning, further adds that the greater the number of cases that show replication the greater the rigour, with which a theory can been regarded as sound. Conversely, challenges to theoretical assumptions are also possible and in the same way made evident by cases which deviate from the theoretical expectations. In this study mostly deductive precepts are involved with regards to the applicability of known theories and research premises to the findings.

This particular method also lends itself well to the endeavour of storytelling or narrative which makes individual experience shared knowledge (Kächele, 2011) and captures the complexities of individuals' intra and inter personal dynamics (Lees, 2005). According to Fosha (2002) the telling detail is crucial, it is where experience is marked with the stamp of personal meaning and it is how the individual experiences what happened and makes it their own. As stated by Spence (in Lees, 2005): "The core of our identity is really a narrative thread that gives meaning to our life" (p. 126).

Case study research uses a variety of evidence from different sources such as interviews documents and observation, thus triangulation becomes an inherent part of the research being conducted (Rowley, 2002). Case studies are particularly useful when: "A how or why question is being asked about a contemporary set of events over which the investigator has little or no control" (Yin, 1994, p. 9).

In case studies the researcher has much less control over the variables than in an experiment (Rowley, 2002). Rowley (2002) describes a case study as 'an empirical inquiry that investigates a phenomenon within its real life context when boundaries between the phenomenon and its context are not clearly evident' (p. 18). Since it uses multiple data sources, data collection methods can be based on a mix of quantitative and qualitative approaches. Consequently this research uses different sources of information for corroboration and is a multiple case study design incorporating the AAI, the OLQ and the psychoanalytic research interview in order to explore participants' experiences of domestic violence and its effects upon their constructions of self and others.

5.3 Research questions

Several research questions arose in the consideration of this research study.

- I) How have the quality of participants' mental representations and attachment states of mind been affected by their exposure to domestic violence in childhood?
 - a) Have participants been able to discover and construct new objects despite their past?
 - b) Have they been able to avoid restricting relationships in their progression despite the expected sequence of repetitions or transference distortions? If so, how?
 - c) What has prevented them from avoiding these relationships and how do they conceptualise these attachments?
 - d) Have participants been able to secure new beneficial environments for their growth?
- II) What have been their spontaneous reactions to domestic violence in childhood?
 - a) How have these reactions assisted them in engendering a sense of control and coping?

III What is the quality of their current psychological worlds?

a) Is it mostly ordered and structured or chaotic and disorganised?

IV What is the meaning they assign to their childhood experiences?

- a) What resources have they used to frame and assign meaning to their past?
- b) How have they resumed maturational growth of the self or how have they not?

5.4 Participant sample and data collection

Purposive sampling was undertaken as a participant selection tool since the topic of this study relates specifically to tertiary education students who have experienced domestic violence in childhood. For the purposes of this study, domestic violence was defined as a combination of the following: physical assault, sexual abuse, verbal abuse, psychological, financial and emotional abuse. The domestic violence was also required to have occurred between the students' parents or between a parent and a step parent with whom the student had been residing. Incidences of domestic violence needed to have occurred more than once before the age of 16 years in that it was classified as ongoing violence and not as a once off event.

Participants were seven university students from the School of Human and Community Development as this study was specifically geared towards exploring how young adults who have attained entrance to a university with more stringent entrance requirements, have integrated and made meaning out of their childhood experiences of domestic violence and have attained a certain level of academic maturity by having successfully navigated their 1st and 2nd years of study. The fact that these students were all taking courses related to Health Care does mean that these students have an interest in the helping professions, which may be thought about as one of the ways in which they have attempted to make sense of their childhood experiences of domestic violence. This was kept in mind throughout the data analysis phase of the study.

The age range of the participants was between 18 and 25 with an average age of 22 years. This age range is deemed to be the stage during which young adults are preparing for independence and autonomy, prior to having their own family commitments (Schwartz & Finley, 2010) as well as the time when their SOC is still developing and being established (Antonovsky, 1987).

5.5 Data collection procedures

Ethical clearance was sought and provided by the Wits Research Ethics Committee (Non-Medical), protocol number H120610. Permission was sought from the Head of School, after ethical clearance was granted, to invite School of Human and Community Development students to participate in the study. No data gathering procedures were undertaken until such permission was also granted. Permission was granted by the Head of School.

The study was open to participants of both male and female genders that happened o be students in the School of Human and Community Development. It was felt that students specifically registered for degrees in the helping professions such as Psychology, SocialWork and Hearing and Speech Therapy would have demonstrated a concern with helping others to overcome barriers to well being and therefore would possibly have attained a greater degree of reflexivity regarding their past. Participants were invited to take part in the study through the use of posters providing information on the research which were posted on the East campus of Wits University, specifically the Emthonjeni and Umthombo buildings. Contact details were made available so that interested volunteers were able to contact the researcher to discuss the research requirements and informed consent before a meeting was arranged.

Seven participants were each interviewed twice over a period of 14 months. Finding participants was more difficult than initially anticipated. This is discussed in more detail later in this chapter. One of the participants who contacted the researcher was in the last trimester of her pregnancy at the time of the first contact and subsequently gave birth a few months later. The interviews were therefore postponed with this particular participant for a time more convenient to her and took place 5 months after the first contact. In all other cases, an appointment for the first interview was scheduled upon first contact with a volunteer.

The duration of interviews lasted from between 45 minutes to an hour and a half. Volunteers were accepted to participate in the study regardless of level of adjustment or maladjustment. This was due to the fact that for the purposes of this study, resilience is not deemed to be a linear concept or simply an outcome but rather a process and may be present in different areas or facets of the individual's life at any given time. This also provided a platform for meaningful comparison across cases.

At the first meeting, informed consent forms were read, discussed and signed before the start of the first interview. The researcher informed the participants about the aims of the study and the procedures that were to be followed. Participants were also informed as to the time necessary for the study and the video recording. Participants were informed as to the voluntary nature of the study and that they were able to withdraw from the study at any point without any disadvantage to themselves. After the participant was given an opportunity to ask any questions, these were answered and written informed consent was sought and provided for the administration of the AAI, the OLQ and the psychoanalytic interview.

Separate informed consent was attained for the video-recording of the process prior to the start of the interview. The process of video-recording was integral to this study, particularly to the use of the psychoanalytic interview since subtle non-verbal nuances and behaviours, from the participant and researcher, were noted and recorded. None of the participants expressed concern with the video recording and all gave their verbal and written consent to be video-taped.

The process of data collection took place through two face to face interviews per participant, conducted approximately one week apart. These interviews were conducted in a private office at the Emthonjeni Centre on East Campus and were all video-recorded. After informed consent was attained and the participant was ready to begin, a general demographics questionnaire was filled out (Apendix E). This was simply for the purposes of demographic data acquisition which facilitates the general process of research.

Since the purpose of the AAI is to surprise the unconscious, during the first interview the AAI (Appendix F) as well as the OLQ (Appendix G) were administered. In the second interview the participant was debriefed as to how they had experienced the prior interview and any particular themes that may have emerged for her from the first interview were explored. The participant was then invited to share her thoughts on the topic more generally as well as volunteer anything else about themselves and experiences which they would like to disclose (psychoanalytic research interview schedule - Appendix H). Feeling states that arose in the researcher and participant were noted by the researcher following each interview session. The video recordings were transcribed by the researcher herself with particular attention paid to non-verbal cues from participant and researcher.

5.6 Video recording

Misgivings have been expressed regarding the use of video-recording in research, due to the possibility of the participants' behaviour being altered due to a 'third party' being in the room (Kächele, 2011). Yet Kächele (2011) argues that there isn't strong evidence on detrimental effects in this regard and that participants readily give their consent to have the interview recorded and used for scientific evaluation. Even though both the researcher and participant may have been initially affected by the presence of this 'third party', this effect is common in research and soon disappeared once rapport was established and the topic of study predominated.

Video recording of interviews was essential to this study due to the use of the AAI and psychoanalytic research interview as methods. These methods allowed focus to be placed not only on verbal responses but also on subtle behavioural cues from participants and researcher. These were ways of verifying and triangulating findings and greatly added to the validity of the research findings. This was especially useful with regards to transference and counter transference reactions that were exhibited in non-verbal behaviour throughout the interviews.

5.7 Challenges with securing participant volunteers for the study

Personal experiences of domestic violence in childhood not only expose the individual to potentially ongoing trauma (Herman, 2001; Levendosky et al., 2012), they are also notoriously difficult to talk about later due to the necessary revisiting of traumatic sequelae of childhood (Kavaler-Adler, 2007). Often, those exposed to domestic violence tend to seek mental and emotional distance from such memories of cumulative trauma and readiness to discuss related affective and mental states, present in various stages of development, with an unknown other may increase feelings of vulnerability and be very intimidating. Reluctance in individuals to do this is therefore expected and understandable. Hence, with hindsight, the difficulty experienced with securing participants for this study was not entirely surprising. Sourcing of participants was a lengthy process lasting from September 2012 until November 2013, 14 months in total.

5.8 Instruments

5.8.1 Adult Attachment Interview (AAI)

The AAI a semi-structured interview designed by George, Kaplan and Main (George, Kaplan & Main, 1996) which was specifically developed to elicit thoughts, feelings and memories about early attachment experiences (Buchheim & Kächele, 2003; Crowell & Treboux, 1995; Gullestad, 2003). The AAI explores attachment representations through questions which when scored yield an attachment classification based on the adult's state of mind relating to childhood relationships with attachment figures. This attachment classification is deemed predictive of behaviour within the adult's current relationships (Borelli, David, Rifkin-Graboi,

Sbarra, Mehl & Mayes, 2012). The interview is made up of 20 questions, the answers to which are rated along different scales, and takes approximately an hour to an hour and a half to administer (Hesse, 2008). Coding for the AAI results in the assignment of a number of categories, the first being the primary attachment style category assigned to each participant, followed by sub-categories which describe the quality of the attachment relationship for each individual (Hesse, 1996, 2008). There are five primary categories which include: secure, dismissing, preoccupied, unresolved/disorganised and cannot classify (Buchheim & Kächele, 2003; Gullestad, 2003; Hesse, 2008). These are associated with security or insecurity of attachment between the participant and their primary caregiver(s) as represented in their current state of mind with regard to attachment, as well as the level to which relational trauma due to abuse, neglect and loss has been resolved.

The interview is consequently used to assess mental representations with respect to the different forms of adult attachment as well as to assess individual differences in attachment styles (Gullestad, 2002). It begins with a generalised description of the participants' family, followed by the choice of five words or phrases characterising these relationships. Interviewees are then asked to provide examples for their chosen descriptors. They are then asked some questions around illness, emotionally upsetting events, rejection, separation and loss (Gullestad, 2002) all of which are events during childhood that would be expected to activate the attachment system and internal working models of caregivers.

Each of the three major categories (Secure, Dismissing and Preoccupied) also has sub-classifications. Secure is denoted as an F classification which has five sub-categories, namely: F1 and F2 which are inclusive of some dismissing qualities, F3 which is considered highly and continuously secure and then F4 and F5 which both contain elements of a preoccupied state of mind (Communication with accredited AAI coder, 30 January 2014). The dismissive category is represented as Ds and includes Ds1 which is considered dismissing of attachment, Ds2 as devaluing of attachment and Ds3 as restricted in feeling in the sense that adverse childhood experiences are related but minimised. Ds4 is the last dismissive sub-category and demonstrates extreme fear of loss of a child unconnected to a known source. Preoccupied attachment states of mind are described by E and include E1 as indicative of very poorly defined childhood experiences, E2 which depicts strong involving anger with caregivers, and E3 as fearfully preoccupied with experiences with caregivers.

The sub-classifications under the first three major categories (Secure, Dismissive, Preoccupied) include experiences relating to both parents and significant others in childhood as well as overall states of mind with respect to attachment (Hesse, 1996; 2008).

Scoring for experiences relating to both parents and significant others in childhood

Scores are assigned to loving or non-loving behaviours of each parent during the individual's childhood (Borelli, et al., 2012, personal communication with accredited AAI coder, 5 June 2014; De Haas, Bakermans-Krenenburg, van Ijzendoorn 1994; Hesse, 2008):

- 1) Loving behaviours may include examples provided by the participant where a parent demonstrated physical or verbal affection, protected the child, was emotionally available to their child at difficult times and took care of the child during times of sickness beyond a level of instrumental²² care.
- 2) Non loving behaviours are scored along the lines of four behavioural areas including:

a. Rejecting parental behaviour

Rejection may be inferred when the participant directly relates episodes of ridicule and rejection from a parent during childhood, especially at times of distress or illness or when favouritism between siblings is suggested.

b. Involving or role reversing parental behaviour

This type of behaviour is generally typified by a parent who will use the child as a confidante, relate inappropriate personal information to the child, demonstrates over-protectiveness or manipulation of the child's feelings by eliciting guilt or fear or attempts to obtain emotional support and comfort from the child.

c. Pressuring to achieve parental behaviour

This implies that the parent has applied pressure on the child to achieve goals that predominantly gratify the parent's desires or objectives instead of these being in the child's best interests. The child may be pressurised to obtain particular academic, social, emotional or even spiritual responsibilities that gratify the parent and are not appropriate for the child's age or stage of development.

d. Neglecting parental behaviour

This type of behaviour includes lack of emotional availability on the part of the parent to the child despite the parent being physically present and available

Scales Estimating Speaker's states of mind

With regards to overall states of mind, the following guidelines are used to depict and evaluate the speaker's way of narrating their experiences. Narratives are scored for the presence of the following indictors (Grice, 1975; Hesse, 1996, 2008; Roisman, Fraley & Belsky, 2007):

 Coherence of transcript and mind are largely assessed according to Grice's norms for coherent discourse regarding quantity, quality, manner and relevance (Grice, 1975; Hesse, 1996, 2008). A coherent transcript will demonstrate evidence of consistency

²² Instrumental care involves instances of providing concrete caregiving to the child such as food and transport, for instance.

and congruence with examples given, responses that provide comprehensive information without being lengthy and answers that are directly relevant to what is asked. Coherence scores which are higher tend to be associated with secure attachment.

- Meta-cognition involves the speaker's ability to differentiate between appearance and reality, symbolic representation and change. This is relatively rare even amongst securely attached individuals. The speaker would therefore comment on their own process of reflection and /or acknowledge that what they believe to be the case may not be, in fact, the reality of the situation.
- Evaluatory oscillations refer to oscillations being made between positive and negative evaluations of a caregiver without conscious awareness of the contradiction (Buchheim & Kächele, 2003).
- Lack of memory relates to a speaker's insistence on a lack of recall of events of childhood which frequently leads to a lack of support for positive experiences that may have been cited. This is often a violation of Grice's maxims of quality and quantity.
- Passivity of speech pertains to vagueness, sometimes nonsense words being included in the discourse and may include uncompleted sentences, confusing self and parent when relating childhood incidents and use of a child's form of speech. This may include regressive speech.
- Idealisation of parents involves the participant's inability to substantiate early
 descriptive adjectives of the parents with corresponding examples of demonstrated
 characteristics. Unwarranted normalising of childhood experiences may be noted as
 well as unjustified praise for the parent.
- Derogation of parents is rated for each parent separately and involves the dismissal of attachment relationships with the parents and in contemptuous and disdainful expressions for the caregiver or relationship.
- Involving anger is often a feature found in participants whose descriptions of their relationships with their parents are excessively long, depict entangled speech or use of jargon and exaggerations. Sometimes the parent is addressed in the present while the speaker is relating a past incident and anger is depicted in the tone or context of the narrative.
- Attentional flexibility is the ability to shift focus between presenting attachment related experiences and evaluating the influences of these (Hesse, 2008).

Summary of classification subtypes

Adults with the classification *secure* have been found to give open, coherent and consistent accounts of their positive and negative childhood memories (Buchheim & Kächele, 2003). They value attachment and are often forgiving, being able to maintain a balanced perspective of relationships and events (Hesse, 2008). Secure participants are usually open with regards to their vulnerability and demonstrate a level of ease with the topic. They may

exhibit meta-cognition or evidence that they are thinking about their reactions and responses as they make them. Speakers in this category are often aware of the nature of experiences in childhood and effects that these have had on them. Individuals in the F2 category evidence an initial defensiveness regarding attachment but eventually become more open. F1a represents a secure state of mind with a deliberate and active move away from the past, and F1b a limited involvement with attachment. Category F4a indicates a mild preoccupation with thoughts regarding the past, F4b a preoccupation with trauma or negative parenting experiences and F5 a manifest annoyance with parents and acceptance. Category F3 represents a natural or earned security and autonomy as well as very low levels of idealisation of parental figures and a good memory for childhood.

The dismissing category of attachment is identified in incoherent accounts and gaps in memory (Buchheim & Kächele, 2003; Hesse, 2008). It is also depicted in marked inner independence from others and denial of negative influences or minimising of such (Borelli, et al., 2012). They may be adamant that negative attachment experiences have not affected their personal development and responses are often vague and inconsistent. One or both parents tend to be idealised figures without supportive evidence being given for the representation (Hesse, 1996). The Ds1 speaker may insist on a lack of memory and emphasise the self and family as normal yet descriptions of the parent often are not backed up by episodes from childhood or experiences actively contradict these (Hesse, 2008). Ds2 represents a devaluing of attachment seen in a description of both parents as devalued or derogated, while emphasising personal strength. Ds3a relates to recognition of aspects of rejection or other unfavourable experiences and some discussion on their influence but with restriction in attention and normalising. Ds3b is characterised by moderately positive descriptors of parents which are unsupported rather than contradicted and inconsistencies. The Ds4 category entails high scores on the state of mind scale for fear or loss of a child stemming from indeterminate sources.

Adults with the classification *preoccupied* tend to recount their childhood in angry, passive or fearful ways which give the impression of enmeshment, confusion and vagueness (Buchheim & Kächele, 2003; Hesse, 2008). Objectivity cannot be maintained and the transcripts are usually long and feature evaluatory oscillations in descriptions of parents (Hesse, 2008). There is often extensive blaming of a parent and the context is rarely taken into account or reflected upon (Borelli, et al, 2012). They also give the impression of being unable to distance themselves from their past experiences. E1 denotes passivity and vagueness regarding experiences which are ill defined and engagement in long unrelated passages (Hesse, 2008). E2 speakers are denoted as angry and conflicted and scripts often demonstrate either excessive blaming of one or both parents. Often small offenses are associated with this extensive blaming or expressed anger. E3a is characteristic of speakers preoccupied with traumatic events in a fearful way. Related thought processes enter the interview repeatedly and out of context. E3b relates to a loss of memory in relation to

traumatic experiences which is experienced as distressing to the speaker and not easily accepted as normal under the circumstances.

The last classification, *unresolved/disorganised*, tends to allude to attachment states where experiences of trauma and loss were repeatedly experienced. Respondents in this category often have lapses in discourse and/or reasoning during discussion of potentially traumatic events and loss (Buchheim and Kächele, 2003). Sometimes the speaker will unconsciously indicate a simultaneous belief that a dead person is dead and not dead (Hesse, 2008). There are often unexplained lengthy pauses during discourse, slips into the present as well as highly detailed information about specific traumatic events (Borelli, et al., 2012; Hesse, 2008). In cases where discourse is disorganised exclusively during discussions of trauma and loss, the speaker receives an initial classification of unresolved/disorganised followed by the second best fitting alternative classification (Hesse, 1996; Hesse, 2008). When these breakdowns are persistent throughout the interview speakers are classified disorganised/cannot classify (Borelli, et al, 2012; Hesse, 2008). 'Cannot classify' can also be assigned to cases where no dominant attachment strategy can be found.

Through the use of the AAI in research, it has been found that the first three of these different categories adequately classify more than 80% of individuals (Buchheim & Kächele, 2003; Crowell & Treboux, 1995). In fact AAI classifications have been found to remain stable over a 2 month period in a sample of mothers as well as to be independent of differences between respondents (van IJzendoorn, 1995). A variety of studies have also confirmed the AAI's reliability and discriminant validity (Bakermans-Kranenburg & van IJzendoorn, 1993; Benoit & Parker, 1994; Crowell, Waters, Treboux, O'Connor, Colon-Downs, Feider, Golby, & Posada, 1996; Sagi, van Ijzendoorn, Scharf, Koren-Karie, Joels & Mayseless, 1994; Waters, Crowell, Treboux, O'Connor, Posada & Golby, 1993).

Utility of the AAI for this study

The AAI is used as a quantitative measure through which participants are classified according to attachment styles (Buchheim & Kächele, 2003). This is an important factor in this study in that attachment styles are deemed to be protective defensive structures used to keep anxiety and perceived abandonment at bay in interpersonal relationships, which should provide a great deal of information regarding the ways in which participants have negotiated their original interpersonal relationships. However, the other significance of administering the AAI lies in the fact that the questions tend to elicit a great deal of information from participants with regards to their self and other mental representations or internal working models, thus contributing significantly towards answering the research questions in this study (Ribeiro, Target, Chiesa, Bateman, Stein & Fonagy, 2010).

Because the AAI enables researchers to determine participants' mental representations of their parental figures, attachment styles as well as defensive structures, which enable them to cope and function within the world, it was used in this study as a way of accessing unconscious mental representations. The results of the AAI were also be triangulated with data gleaned from the psychoanalytic research interview and SOC-29.

A copy of the questions asked and the specific protocols for the administration of the AAI will be included (Appendix F). The AAIs in this study were scored by an accredited scorer who is the researcher's supervisor²³. In order to prevent scorer bias, the AAIs were transcribed first and then scored before the supervisor was given access to demographics, the results of the SOC-29s or the psychoanalytic interviews.

5.8.2 Orientation to Life Questionnaire (OLQ, also referred to as SOC-29)

The orientation to life self-report questionnaire is a tool developed by Antonovsky to measure SOC and more specifically its three components of manageability, meaningfulness and comprehensibility (Antonovsky, 1993; Van Schalkwyk & Rothman, 2008).

SOC in an individual is associated with the ability to cope and be resilient, enabling individuals with a high SOC to be more likely to adopt flexible strategies to deal with challenges in life (Ristkari, Sourander, Rønning, Piha, Kumpulainen, Tamminen, Moilanen & Almqvist, 2009). The SOC is not only a coping style but includes the re-organisation that can occur following challenges, so that the individual is left 'strengthened' by the experiences rather than defeated and overwhelmed (Flick & Homan, 1998). The SOC's three main components are largely cognitive constructs which inform how the individual perceives and processes experiences. Comprehensibility refers to the extent to which the person can make sense of adversity (Almedon, 2005). This concept is particularly relevant to how participants have been able to process and understand the environments of domestic violence they have experienced. It is this dimension that connects to the AAI's coherence maxims, in particular the ability to be relevant and to answer questions related to their background in a concise but informative way without avoidance or over-elaboration demonstrating that memories are ordered and do not overwhelm. In this way the participant demonstrates the ability to think about, order, be clear and explain what they have experienced (Antonovsky, 1979; Hesse, 2008). Involved in this dimension of comprehensibility is also the ability to judge reality and tolerate its consequences as bearable (Antonovsky, 1979). The questions of the SOC-29 however, extend comprehensibility beyond that of the AAI's coherence in that they also include the individuals' core assumptions and expectations about how ordered they expect their world to be in the future and their confidence in themselves to deal with challenges beyond personal attachments and motherhood.

Manageability refers to the extent to which the individual recognises the resources at their disposal are adequate to meet the demands of life (Antonovsky, 1979). These resources may be those that are at one's disposal or at the disposal of significant others such as a spouse, friend, family member or God. The individual will either feel victimised and adopt this role or will feel that life can be managed despite adversity and that things will work out by one's

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²³ Trained in 2010 by Dave and Deanne Pederson in the Amsterdam Institute.

efforts and with the assistance of others (Antonovsky, 1979, 1986; Patterson & Garwick, 1998).

Meaningfulness refers to the extent to which the person can make cognitive and emotional sense of their lives, and that the demands imposed by life are worth investing in, instead of being insurmountable burdens (Antonovsky, 1979; Eriksson & Lindström 2005). Despite negative experiences, the individual will seek the meaning in the experience. This concept bears some connection to the AAI's questions pertaining to how participants think about the trauma (domestic violence) they have witnessed and what they believed caused it. Included in this would be attempts by participants in trying to understand their parents and the reasons for their behaviour. This is further connected to what Fonagy (2008) terms as reflective functioning or the individual's ability to think about their own mental states and feelings as well as those of others, thus making the world around them more comprehensible and meaningful.

Meaningfulness is the most crucial element of SOC and without it the elements of comprehensibility and manageability are deemed to be temporary in the person (Antonovsky, 1979).

The SOC questionnaire is composed of 29 items which are rated along a 7-point Likert scale ranging from 1- never to 7-always (Appendix G). According to Antonovsky (1991), the scale has demonstrated satisfactory reliability and validity. This is supported by various studies conducted (Van Schalkwyk & Rothman, 2008; Strumpfer & Mlonzi, 2001). Lindström & Eriksson (2005) mention that studies on whether the SOC scales actually correlate with the theoretical constructs, present differing results. Factor analysis has in some research confirmed the one factor solution proposed by Antonovsky, whereas other studies have pointed to the possibility that the SOC is a multidimensional concept rather than a unidimensional one. The SOC also correlates negatively with anxiety and depression and a high SOC has been shown to correlate positively with a high quality of life (Eriksson & Lindström, 2005; Snekkevik, Anke, Stanghelle, Fugi-Meyer, 2003).

In this study, this scale was used to gauge the strength of participants' SOC and to connect this to other findings in the research. It will also be used qualitatively to triangulate responses with other findings. Antonovsky (1993) maintained that people's world views or internal orientation defined, to a certain extent, their strengths. SOC therefore refers to mental and emotional resources in the participants to meet the demands and challenges of their domestic violence environments of childhood.

SOC (SOC-29)

Predominantly, SOC global and component scores are concerned with cognitive and emotional aspects of the individual's experience and their understanding of internal and external stimuli, their experiences as well as attitude towards the future. This includes

awareness of feeling states and emotional understanding or framing of experience and current situations as well as emotional capacity to engage with the future. The participants were all University students who had completed at least their first and second year of study, some being postgraduates. It was therefore expected that due to their intellectual level of mastery, their SOC scores would be equivalently moderate to high, especially scores on the Comprehensibility and Manageability components. The range of possible SOC reading in populations is 20-203. The SOC range of means that characterise most samples (125-170) was used as a means for comparison of SOC readings in this study (Antonovsky & Baker, 1998).

Each component of the SOC is measured by responses to several questions which are rated on a Likert scale of 1 to 7, with 1 denoting less of a quality or never and 7 more of that quality or always. The maximum achievable score for the three SOC components are:

Comprehensibility-77

Manageability-70

Meaningfulness-56

Each question is designed with mapping according to Modality of stimulus (instrumental-1; cognitive-2 and affective-3); Source of stimulus (internal-1; external-2, both-3); Demand of stimulus (concrete-1; diffuse-2; abstract-3) and Time (past-1; present-2; future-3) (Antonovsky, 1979). An example of this is given below.

Comprehensibility: Question 1 on the SOC-29 reads:

'When you talk to people, do you have the feeling that they don't understand you?'

1 2 3 4 5 6 7

Never Always

Classification of question:

Modality- 1, Instrumental

Source-3, Both internal and external

Demand- 1, Concrete

Time-2, Present

Through using these individual characteristics of each question it is possible to ascertain in more detail participants' perceptions and understandings of their experiences and how these personal interpretations are impacting their outlook on life and expectations from

relationships. This will be used qualitatively for questions where participants have displayed extreme responses, namely a 1-never or 2- almost never or a 7-always or 6-almost always.

5.8.3 The psychoanalytic research interview

The development of research methodology in the field of psychoanalysis remains emergent and this is largely due to the fact that this paradigm grew out of a response to psychotherapeutic demands and not due to research requirements (Cartwright, 2004). Cartwright (2004) argues that psychoanalysis is not only a theory but can be a methodology for exploring the unconscious.

Despite reservations surrounding the lack of quantifiable facts and formalised observation in this method, the psychoanalytic research interview remains a valuable research tool in the field of psychoanalytic enquiry (Cartwright, 2004). Consequently it has recently begun to attract more interest from the research community (Cartwright, 2004; Kvale, 1999). It is essentially a meaning-centred approach (Cartwright, 2004) which allows the researcher to explore unconscious processes, self and other representations and defences which are central to this study.

As a method, the psychoanalytic research interview has been consistently critiqued, possibly due to concerns surrounding the central focus upon reflected subjectivity and awareness of the impact of the researcher's own observer bias (internal process and motivations in engaging in the study in the first place) (Cartwright, 2004). There is the danger that this latter focus may be perceived as being illegitimate and unscientific. Yet, subjectivity, in this particular context becomes a resource as opposed to a downfall in terms of yielding valuable insights on a particular research topic (Parker, 2003). It could be said that it is through this awareness and analysis that greater objectivity may in fact be reached (Cartwright, 2004). One could also argue that it seems quite irrelevant to attempt a study on human intra- and inter-relations while overlooking the complexity of the shared space between participant and interviewer.

In this study the psychoanalytic research interview was used to enhance the data collection in terms of adding depth and corroboration to the evidence gathered. The AAI and OLQ are conducted and scored along more rigorously defined directives whereas the psychoanalytic interview is less directed on both grounds.

The method itself focuses on the exploration of intra-psychic processes, unconscious meaning and phenomena while particular attention is paid to feeling states occurring in the participant as well as the interviewer (Cartwright 2004). It is the matching of core narratives in the accounts with initial transference and counter-transference²⁴ impressions that provides some degree of control over the contextualising of interpretations in the interview.

²⁴ Transference involves the re-direction of feelings felt towards a person in the individual's past (usually a parent) onto someone in the individual's present. Counter-transference refers to the feelings or reactions of the researcher being transferred onto the participant.

This process also lends itself towards the deepening and enriching of the qualitative research process (Kvale, 1999), as knowledge is co-constructed and the lived reality of conversations is validated.

The interview itself, although being 'in-depth', is largely unstructured with questions or prompts on the relevant topic being framed around the interviewee's previous response (Cartwright, 2004; Hancock, 1998). Detail, contextualised meaning and verbal and nonverbal nuances and processes during the interview are all perceived as essential to psychoanalytic understanding and are therefore noteworthy (Cartwright, 2004). The aim is therefore not to necessarily search for historical truth but for assigned meaning. A set of guidelines has been developed around technique and analysis to ensure that research conducted in this way is systematic and verifiable (Cartwright, 2004). See Appendix H for a guideline of the interview schedule.

When addressing the validity of the interview, Cartwright (2004) makes mention of several key criteria that, when operating together, can facilitate the confirmability of the interpretive account. Internal consistency and coherence, for instance, refer to the extent that the account makes sense and is devoid of contradictions or gaps. Comprehensiveness relates to the extent to which the account is able to reflect the totality of the person's experience and life history. External consistency enables the account to be evaluated against other theories and experimental data, allowing other forms of evidence to provide corroboration e.g. the AAI. Cartwright (2004) recommends the evaluation of interpretive accounts by using other theories and empirical data to diminish possibilities of self-fulfilling results. Independent validation refers to the allocation of independent evaluators who can isolate core narratives and comment on object representations in the account as well as isolate particular segments from the interviews that best illustrate these chosen narratives. These independent evaluators may also comment on key identifications and object relations that may be identified in the chosen narratives. In this study the participants gave informed consent for the researcher's supervisor to have access to the interview material thus fulfilling the role of independent evaluator.

5.9 Description of participants

The following section gives a sense of the participants in this study. Their names and certain identifying details have been changed in order to honour confidentiality. However, details around family violence and loss were not changed in order to remain true to the data and participants gave their informed consent in this regard.

Participant one (P01): Hannah

Hannah is a 21 year old postgraduate student. She spent the majority of her childhood years with her grandmother, brother, adult aunt as well as other extended family members. During her childhood years she reluctantly visited her parents on weekends at her

grandmother's insistence. Hannah's parents were described as having a turbulent relationship and as engaging in potentially life threatening conflict situations with episodes of bidirectional violence between them. Although she remembers only witnessing one episode of violence between her parents, at age six, Hannah often heard the fighting and verbal altercations that took place in her parents' bedroom and saw bruises and injuries on both her parents. She also often overheard frightening accounts describing details of the physical and verbal violence between her parents, which she describes as having terrified her. Hannah moved in with her parents when she turned 12 years of age. Her older brother was already staying with them at the time. No significant losses of individuals close to her were reported by Hannah. She was living at a women's residence on the campus of the University at the time of the interviews and visited her parents during holiday periods.

Participant 2 (P02): Kreveshni

Kreveshni is a 20 year old 3rd year student at University . She resides with both her parents who raised her and remain married. She is an only child who struggled with periods of adjustment to her schooling environments. Kreveshni was exposed to frequent episodes of violence during which her father beat her mother. At times she tried to intervene physically, especially during her childhood, and would attempt to place herself between both parents. In her adolescence she would threaten to call the police and this would sometimes bring about a cessation to the altercation. She reported extensive emotional anxiety and insomnia throughout her growing years as a result of her home environment. She reports having attempted suicide in late adolescence. In her first year of university she experienced an emotional crisis which led her to seek therapeutic intervention. Her parents also sought their own counselling at this time and the domestic violence attenuated. At age 12 she lost her grandfather who was a stabilising influence in her life and she reported this loss as being traumatic for her at the time and as still being somewhat difficult to deal with currently.

Participant 3 (P03): Ilsa

Ilsa is 23 years old and completing her 3rd year of study. She resides in her own flat which was left to her mother by her paternal grandmother, upon her death. Ilsa was raised by both her parents who have now been divorced for a few years. She has two younger siblings. Ilsa described her parents' relationship as unpredictable and problematic given the infidelity and the verbal and sexual abuse that was taking place between them. There were also hints of physical violence taking place between her parents behind closed doors. Neither parent appears to have been consistently emotionally available to Ilsa, throughout her growing years. She moved in with a friend and her family in late adolescence for a period of 6 months and moved back home after that period. She has experienced traumatic events other than the domestic violence between her parents, as well as the loss of her paternal grandmother who seems to have been supportive. Ilsa reports that she desires to meet new people and to be more open to new relationships but also confesses that it is very difficult to trust others.

Participant 4 (P04): Leigh-Ann

Leigh-Ann is 22 years old and is completing her 3rd year at University. She lives with her two siblings and her aunt and uncle. Leigh-Ann spent the first 3 years of her life residing with her mother, father and her paternal grandparents. After age 3 she and her parents moved into their own house as her mother was expecting her second child. The violence perpetrated by her father on her mother was particularly brutal and unpredictable, leading Lee-Ann, at age 10, to request that her mother take out a restraining order against him. One year later her mother was killed by her father during an episode of domestic violence which was witnessed by her mother's work colleague. Leigh-Ann's father then committed suicide while in jail awaiting trial. She was 13 years old at the time. She and her siblings moved in with family but experienced the loss of their aunt and guardian a few years later due to a hit and run accident. They then moved in with another aunt and uncle with whom they currently reside. There is clearly a history of traumatic loss in Leigh-Ann's life and one of her best friends committed suicide one year ago. Leigh-Ann reported that she is searching for answers and that this is one of the reasons she is seeking to further her studies.

Participant 5 (P05): Jane

Jane is a 25 year old postgraduate student who is married and has an infant daughter. She was raised by both her parents, however, she reports that her paternal grandmother was her predominant caregiver for the majority of her childhood years. Jane's parents often argued in front of her and her sister and there were frequent episodes of domestic violence during which her father would beat her mother and would sometimes lock her mother in the bathroom. Jane remembers that she and her sister were at times also aggressively disciplined by her father. In one incident Jane was beaten so badly by him that she required a medical consultation. Jane experienced the loss of her maternal grandmother and paternal grandfather who were both significant attachment figures in her life. As a young child she experienced episodes of separation anxiety and attended play therapy for five months. She has also experienced several hi-jackings and one mugging as an adult and has sought trauma counselling for this.

Participant 6 (P06): Lerato

Lerato is 21 years old and in her 3rd year of study at University. She has three brothers and her mother and father divorced when she was an infant. Lerato's father would visit the children a few times a year since he resided and worked in a different province. Her mother remarried when Lerato was eight years old and it was in this relationship that the domestic violence started. Lerato's mother received extensive beatings from her husband which would draw blood and would cause her to froth at the mouth. Lerato and her brothers witnessed this abuse and Lerato reported being terrified that her mother would die. There were times when Lerato's mother required medical assistance. Her mother and stepfather subsequently divorced when Lerato was 12 years old and she currently has no contact with

her stepfather. Upon entrance into university Lerato resided with her biological father but due to some difficulties with her father's partner, Lerato moved into a women's residence on campus. She is currently involved in a romantic relationship.

Participant 7 (P07): Annie

Annie is a 24 year old postgraduate student at University. She was raised by her parents and has a younger sister. Throughout her childhood she witnessed almost daily domestic violence taking place as her father would verbally and physically attack her mother. Sometimes Annie would place herself between her mother and father during such altercations and she would get hurt. There were also times when her father would direct his rage towards her. Annie's parents divorced when she was 18 and after a brief attempt at tertiary education overseas, she returned to South Africa to begin her degree. She currently is involved in a romantic relationship and has contact with both her parents although she relates having greater difficulty connecting with her mother than with her father.

Demographic characteristics of participants are depicted in table 5.9a.

Table 5.9 a Demographic characteristics of participants

Participant	Ethnicity	Age	Home	Number	Type of	Primary	Year of	Status of
			Language	of	Violence/	Caregiver	study	caregiver
				siblings	exposure			relationships
P01	В	21	xiTsonga	1	Physical	Grandmother	Postgraduate	Parents
					Verbal	Aunt, mother		married
P02	1	20	English	0	Physical	Mother	3 rd year	Parents
					Verbal			married
P03	W	23	English	2	Verbal	Mother	3 rd year	Parents
					Sexual			divorced
					Physical			
					Financial			
P04	С	22	English	2	Physical	Mother	3 rd year	Both
					Verbal			parents
					Financial			deceased
P05	W	25	English	1	Physical	Grandmother	Postgraduate	Parents
					Verbal	mother		married
P06	В	21	isiZulu	3	Physical	Mother	3 rd year	Mother
					Verbal			and stepfather
								divorced
P07	W	24	English	1	Physical	Mother	Postgraduate	Parents
					Verbal			divorced

5.10 Data analysis

5.10.1 AAI and SOC-29

The SOC-29 questionnaires were analysed using simple measures of central tendency, since the sample was too small for more complex statistical measures to be used. The questionnaire is scored on a Likert scale and as such also provides an overall numerical value of the construct SOC as per scoring instructions for each individual (Antonovsky, 1986). This numerical value is compared along a scale of average of means (125-170) (Antonovsky & Baker, 1998). It may be significant to also note that Antonovsky's original SOC research had been conducted with holocaust survivors who had experienced life threatening traumatic experiences in Europe during WWII and were rescued (Antonovsky, 1986). This group differs culturally and in experience from the group of participants in this study who experienced trauma from childhood within the context of attachment relationships with their parents. A more recent study by Volanen (2011) has also connected a lowered SOC score in adulthood to adverse childhood living conditions having been experienced. Therefore each participant's SOC score was also compared to the average score for the group of participants as this may have provided a fairer comparison for them.

The AAIs were analysed for attachment state of mind categorisations by an independent, accredited scorer (the researcher's supervisor), who was blind to the other transcripts at the time of scoring. The AAIs were also analysed using psychoanalytic narrative analysis by the researcher, along with the psychoanalytic interviews. A narrative analysis was conducted through the lens of both object relations and attachment theory perspectives on both interviews from each participant. The analysis occurred both within cases, where data was compared to theories being used and across cases where data in one case was compared to data in other cases. Thus a combination between a narrative analysis and a case study analysis approach supported by Miles & Huberman (1984) was used.

5.10.2 Psychoanalytic narrative analysis

A number of steps were followed with regards to the narrative analysis based upon Cartwright's (2004) model of psychoanalytic narrative analysis. Using these steps, core narratives were identified within particular participants' texts and across all the participants' texts. The steps were as follows:

Familiarisation

This process essentially required the researcher to immerse herself in the raw data comprising the verbatim transcription of the interviews as well as the video recordings of these interviews (Clarke, 2002; Pope, Ziebland & Mays, 2000). Initial, relevant associations were noted. Particular attention was paid to the video recordings with the intention of capturing significant non-verbal cues and subtle nuances that informed the narrative analysis (Cartwright, 2004). These were jotted down on the margins following transcription. Notes were also made directly after the interviews relating to impressions and states of mind of the researcher.

Identifying core narratives

This stage involved the search for core narratives while exploring the entire text, layer by layer and linking these to theoretical observations (Cartwright, 2004). Tracking key identifications and object relations within the dominant narratives was done with a view to identifying unconscious processes, attachment styles, self and object representations as well as defences (Cartwright, 2004). Frosh, Phoenix and Pattman (2003) theorize the notion of the 'defended subject', and state that the defences that an individual utilizes are believed to demonstrate themselves within the interview context (Frosh et al., 2003). Reports given by people about their relational experiences communicate both content and unconscious defences against subjects that pose a threat to the self.

The structure of the narrative (i.e. what is foregrounded, omitted, affect laden, or avoided) and the participants' body language (videotapes) were studied in this regard. Narratives can be regarded as reflections of the way in which the self works and has internalized particular relationships and the analysis dealt with the way individuals have located themselves in relation to objects (Cartwright, 2004). Attention was also paid to feeling states and corresponding thoughts or perceptions, both those of the participant and those of the researcher (Cartwright, 2004). In this way, transference-countertransference interactions were used to form analytic impressions. Because the nature of research interviews dictates that these impressions are likely to be brief, these were not used as independent evidence, rather only to support other findings. These impressions were compared with the object relations and representations that were identified within the transcribed texts (Cartwright, 2004).

The core narratives (Cartwright, 2004), which are story lines within the interview which isolate a scene that is relevant to the interview topic, were considered within the context of the interview as a whole, since psychoanalytic narrative analysis stipulates that the interview text is "engaged in within its totality, allowing all aspects of the interview to influence the analysis of the flow of associative material" (p. 228). This involves searching for themes that provide a particular snapshot of a scene that relates to the topic of the interview. Although most analysis begins with the task of summarizing specific themes and to eliminate 'noise', in this study it is the 'noise' that is particularly interesting from a psychoanalytic perspective. Repetitive themes also represent more significant and stable intra-psychic aspects of the individual. Repetitive narrative structures are assumed to mirror more consistent and prominent factors that contribute to the intra-psychic world of the participant. Constant repetitions are potential signifiers of unconscious meaning and are therefore important, for instance a cough that repeatedly occurs around a particular topic or meaningless digressions that occur in relation to a particular affective tones.

Cartwright (2004) refers to the construction of meaning as viewing language as a metaphor for parts of the self while something else is being described. This facilitates the construction of the participants' stories and provides insight into how the self is reconstructing the experience. Here the content of the narrative is important but so is how it is told. The interview text was engaged in within its totality allowing all aspects of the interview to influence the analysis of the flow of associative material. This was done until satisfactory and coherent core narratives have been construed and matched with significant transference-counter transference impressions.

The analyst's attitude within this circular process should be one of perpetually correcting and refining prior understandings. Interpretation then moved towards greater accuracy. Particular attention was also paid to points of resistance where the participants stopped, changed course or omitted detail. Changes in the topic, tone of voice altering with particular subjects, describing things in different ways, all of these factors suggested possible ways in which elements were unconsciously associated. This provided an underlying structure that could be used to understand the intra-psychic processes most apparent in the interview material related to the topic being discussed.

Interpretation/Associating

The focus here was on how the self reconstructs a particular situation and assigns meaning to it (Cartwright, 2004). Implicit forms of association were not simply joined by virtue of their proximity of thematic overlap but were based on corroborative evidence found elsewhere in the text (Clarke, 2002), including the AAI and SOC-29. Identifying issues of transference and counter-transference and matching core narratives to these impressions were paramount at this stage (Cartwright, 2004).

Association is generally an accepted part of everyday communication through which meaning is constructed (Cartwright, 2004). Psychoanalysis is particularly interested in implicit forms of association. Thoughts are associated with one another through unconscious forms of identification with the object. Everything that the person does and what happens in the mind has a specific identifiable cause and this holds importance for the understanding of the interview material.

Cartwright (2004) also mentions the important of context in the process of analysing material. Context refers to internal and external factors that influence the way an individual communicates and, in turn, how this communication is understood. In other words context affects meaning. The danger of misinterpretation can be considerably reduced by paying careful attention to feeling states as these occur within the context of the interview. Interview context can be impinged upon by many factors such as setting, location, use of a video-recorder, the reason given for the interview, attributes of the interviewer and

techniques amongst others. It was therefore important to acknowledge the context of the interview and to explore it, keeping it in mind during analysis.

Essentially the identified core narratives served as metaphorical representations for the participants' internal worlds. These reflected the workings of the self and how particular experiences have been internalised, allowing the researcher, through interpretation to develop an account of the individual's internalised objects and defences.

With regards to transference and counter-transference as a way of evaluating and understanding interview material, Cartwright (2004) mentions several important points for researchers to consider: Observer bias, for instance, which is present in every research study, may be transferred onto the research situation. The interviewer's motivations, feelings, conflicts and perceptions regarding the research are seen as possible impactful factors. Therefore it is important for such influences to be made explicit and for the researcher to have insight into these so that a more accurate interpretive account may be arrived at. Discrete feeling states evoked during the interview process in either the interviewer or the interviewee can greatly influence how we come to understand what is significant in the material. These can be used as a tool to better understand the world of the participant. Awareness of feeling states allow for some control over contextualising of interpretations.

In subsequent interviews it becomes important to inquire about the interviewee's thoughts regarding the previous encounter as this process may elicit thoughts or feelings about the subject, toward the interviewer or significant others. Often, because participants have had time to reflect on the interview, they may recall particular details or may begin to experience what they talked about previously, differently. It is important for the interviewer to detail comments and impressions of the meeting immediately following the interview session and to record fluctuating feeling states and other non-verbal material associated with particular segments of the interview.

Corroborating and validating results

Corroborating and validating data were done through collection, analysis and writing up of the results. Results were triangulated and the cross checking of information and conclusions through the use of the different methods employed was implemented. Thus, the narratives identified within participants' interviews were linked to their attachment state of mind classifications (which are essentially a form of defensive structure) and with their responses on the OLQ. Thus, a picture emerged with regards to how participants made sense of their experiences and build up more or less coherent narratives of the self in relation to these experiences. The researcher's supervisor was consulted in the analysis and interpretation of the data provided further triangulation. Reflexivity involving self-awareness and critical self-reflection by the researcher on her potential biases and predispositions were fostered as

these are considered crucial to a psychoanalytic research process and the conclusions drawn.

The process of iteration was evident at this stage as interim analysis of the data continued until the process in which the researcher was interested, was understood.

5.11 Ethical considerations

In accordance with ethical demarcations for research on domestic violence, namely respect for autonomy and protection of vulnerable persons, the following procedures were followed: Consent was sought from the relevant University structures for the pursuing of this research in this context (Human Research Ethics Committee) and was granted (see Appendix I). Permission to recruit students from the School of Human and Community Development was sought from the Head of School, Professor Maria Marchetti-Mercer (See Appendix J) after ethical clearance was granted and prior to any form of data gathering. This permission was also granted. Posters containing information on the purpose of the study and that participation is voluntary were displayed around the School of Human and Community Development (Appendix A) once permission had been obtained from the Head of School. Potential participants²⁵ who volunteered for the study were prepared beforehand for the sensitive nature of the research either through telephonic contact or e-mail as per their choice.

After full discussion of the purpose of the study (Appendix B) and methods of measure to be used a consent form (Appendix C) was provided for participants to sign. Written informed consent was also sought from participants for the video recording of interviews (Appendix D). A demographics form was completed by each participant (Appendix E). In the first interview the AAI was administered (Appendix F) as was the OLQ/SOC-29 (Appendix G). The psychoanalytic research interview was administered in the second interview (see Appendix H for guidelines used). Participants were fully informed about their rights to decline to participate in this study at any time without any disadvantage to themselves. Confidentiality was protected. When the tape was used to write up the transcript, only the researcher and supervisor had access to it. Everything is kept in password protected files on the researcher's computer, which only the researcher is able to access. No personal information, such as names or specific places were used in the transcripts. Only the researcher and her supervisor had access to the transcripts and videos, however, the supervisor did not know any of the participants' identifying information such as the name, address or contact details of any of the participants. Access to the videos means that the supervisor was able to visually identify participants, however, participants were informed of this prior to the study and the supervisor kept all information confidential.

Participants were informed that direct quotes would be used in the final write-up of the study, however, that no identifying information would accompany these quotes and that

²⁵ Participants were **not therapy clients of the researcher** but volunteers willing to participate in the study

they would be used with quotes from other participants. After the report is finished, should publications arise, the interview recordings and transcripts will be kept in a password-protected file on the researcher's computer for two years. If no publications emerge out of the study, this research material will be kept for six years and thereafter archived in anonymised form. Interviews were conducted in complete privacy in an office at the Emthonjeni building at Wits University. Participants were emailed a summary of the findings of the study.

The fact that participants may read about themselves in the final research thesis was kept in mind by the researcher while writing up the research. Therefore attempts were made to convey the findings with sensitivity and attempts were also made to minimise identifying information while maintaining the integrity and authenticity of information and analysis in the study.

Actions were taken to reduce the possible distress caused to participants by the research e.g. debriefing of participants and referrals to colleagues for psychotherapy and further support if deemed necessary by the researcher and/or upon request from participants. Some of the participants did express some distress when speaking about certain aspects of their trauma or loss and analysis of interviews did reveal that the researcher tended to become more intuitively containing for them at these times, assisting them in processing their feelings and reactions. Three participants were encouraged to return to their therapists (who were perceived by participants as very supportive) for further counselling. The researcher is an educational psychologist, registered with the HPCSA, with experience in play therapy with traumatised children as well as trauma counselling with young adults (at the University of Johannesburg) and has attended regular supervision pertaining to her work.

CHAPTER 6

FINDINGS I

6.1 Introduction

These findings are a reflection of the exploration undertaken into discovering the internal representations of self and others developed and maintained by several young women who had been exposed to domestic violence in childhood. These individuals' understandings of their experiences and of the effects of such experiences upon themselves intrapsychically and interpersonally are also considered. Of particular interest are issues of narrative coherence and security of attachment as well as participants' outlook on life in terms of expectations for the future in attaining goals and securing supportive relationships. The way that individuals coped (defensive organisations) and used protective factors in childhood and adulthood, in mediating the effects of their trauma, are also fundamental to contextualising their lived experiences and creating in-depth understanding of elements of resilience that are demonstrated.

For this study, interviews were conducted with seven University student participants ranging in age between 18 and 28 years. Each participant was interviewed twice and the AAI was administered in the first interview as well as the SOC-29. The second interview or psychoanalytic research interview, took place approximately one week after the initial meeting with each participant. This was less structured and the researcher tracked the participant as themes emerged during the conversation. This study was predominantly concerned with links between object relations, attachment styles and demonstrated resilience in young adults who have been consistently exposed, either through overhearing, witnessing or even direct experience, to domestic violence between their primary caregivers in childhood. The posited impact of this exposure upon each participant's sense of self, attachment state of mind, object relations and SOC was therefore carefully considered.

All the participants in this study had successfully completed at least their first and second year of academic study. Four were currently completing their third year of study, three were completing their postgraduate degrees. The assumption is therefore made that considerable individual intellectual capacity was available to buffer some of their experienced trauma and to foster some aspect of inner resilience in their lives. It is hypothesised that they may, to differing extents, all have had the intellectual mastery at their disposal to be able to think about and re-organise the traumatic sequelae of childhood to the extent of being generally functional and even furthering their psychological development and reflective capacity.

Since domestic violence inevitably involves extreme emotions and the acting out of these in hostile behaviours, splitting between internal representations may therefore be more pronounced in individuals exposed to domestic violence in childhood. Such experiences may evoke powerful paranoid/schizoid fears (Klein, 1932) coupled with later struggles to

integrate split representations. Due to this, transference and counter-transference reactions have been reflected upon in this study through the use of the Kleinian principles (Klein, 1932, 1937; Segal, 1973) of paranoid/schizoid and depressive positions which seem to bear particular relevance to experiences of domestic violence.

In this analysis, an overview of findings is provided through the use of three tables, the first of which depicts AAI classifications and descriptive sub-scales for the AAI, for each participant (Table 6.1a.). The second table displays the AAI classifications, SOC readings (global as well as component readings) and themes emergent during the psychoanalytic interview for each participant (Table 6.1b). These themes have been arranged according to several categories which predominated in the interviews such as **early objects**, **defensive organisation**, effects on **adult attachments** and areas of **resilience**. The third table (6.1c) depicts a summary of significant internal stressors experienced by participants, the type of specific exposure to domestic violence and the SOC score obtained. This is followed by measures of central tendency of SOC scores for this sample indicating the mean, the median and standard deviation (6.1d).

Thereafter these findings are reported on and discussed in a specific sequential order, for each participant starting with the AAI classifications, then SOC-29 findings and lastly the psychoanalytic research interview analysis. AAI classifications entail the analysis of participants' adult attachment states of mind and therefore their thoughts, emotions and memories about early attachment experiences and how these are related in the present. Under SOC (29) the participants' SOC pertaining to the three dimensions of comprehensibility, manageability and meaningfulness is evaluated and discussed. These dimensions incorporate the individual's evaluation of self and others in the past, and present and future relationships with specific reference to attaining of goals and securing support from others. The psychoanalytic research interview explores participants' internal representations formulated within early object relations and their defensive organisations as reactions to their traumatic backgrounds. Issues of transference, counter transference and adult attachments are also addressed. However, there will be sections where some integration of findings is merited between the three sections and these will be included in the exploration. Each individual participant's results will be explored first before any overlapping themes are presented. The area of resilience is discussed under overlapping themes as all participants demonstrated some form of adaptation and impetus towards the health end of the continuum. Although links to particular theories are made in this section given the theory-driven nature of Cartwright's (2004) narrative analysis, a more in-depth theoretical discussion of relevant themes in these findings will be undertaken in the discussion of findings in chapter nine.

In this initial chapter of findings, four participants' (Participants 1, 3, 4, and 6) analyses are presented due to their shared, slightly dismissive features which were demonstrated on the AAI and this is done for ease of comparison as well as to facilitate the review of the findings.

In Chapter 7 the remaining three participants' (Participants 2, 5, and 7) analyses are presented and these are linked by their slightly more preoccupied features of attachment on the AAI. In chapter 8 common shared themes identified in participants narratives are discussed.

6.2 Overview of data

The following table depicts participants' AAI classifications and the descriptive sub-scales used in scoring the AAI.

Table 6.2.a Participants' AAI coding and descriptive sub-scales

AAI sub-scales	P01	P02	P03	P04	P05	P06	P07
	Hannah	Kreveshni	Ilsa	Leigh-	Jane	Lerato	Annie
				Ann			
AAI Coding	F2	u/d /E2	F1a	u/d/F1a	F4b/F2	F1a	u/d/F4b
Role Reversal							
Rejecting			\sqrt{father} ,	$\sqrt{-father}$	$\sqrt{-mother}$	$\sqrt{-step} father$	$\sqrt{-}$ father
Behaviour			mother			$\sqrt{-mother}$	
Pressuring	$\sqrt{}$						V
Neglecting							
Involving Anger							
Derogation			$\sqrt{-father}$				
Idealisation				$\sqrt{}$			$\sqrt{}$
Parents'Loving		$\sqrt{}$		$\sqrt{}$		$\sqrt{}$	$\sqrt{}$
behaviour		Instrumental	Instrumental		Instrumental		instrumental
Balance				$\sqrt{}$		$\sqrt{}$	$\sqrt{}$
Appearance/							
reality distinction							
Metacognitive						$\sqrt{}$	
monitoring							
Valuing				$\sqrt{}$		$\sqrt{}$	$\sqrt{}$
attachment							
Ease with						$\sqrt{}$	$\sqrt{}$
imperfections							
Moderate to high				$\sqrt{}$		$\sqrt{}$	$\sqrt{}$
coherence of mind							

Table 6.2.b AAI classifications, SOC readings and themes emergent in the Psychoanalytic Research Interview for each participant

Participants	Attachment	Sense of coherence		Themes revealed in interviews (according		
-	classification	score		to Cartwright analysis)		
1.Hannah	F2	111	C =40	Early Objects		
			MA=39	Role Reversal		
			ME=32	Annihilation anxiety		
				Trauma		
				Maternal substitutes		
				Fear		
				Compliance		
				Defensive organisation		
				Avoidance		
				Thought suppression		
				Rationalisation		
				Intellectualisation		
				Idealisation		
				Splitting		
				Somatisation		
				Numbing		
				Adult attachments		
				Trust/mistrust		
				Fear of conflict		
				Fear of intimacy		
				Resilience		
				New objects		
				Faith		
				Forgiveness		
				Physical separation		
2.Kreveshni	u/d/E2	101	C=27	Early Objects		
			MA=42	Anger and fear		
			ME=35	Trauma		
				Role reversal		
				Mental confusion		
				Emotional regulation		
				Body boundaries crossed		
				Enmeshment		
				Compliance		
				Caregiving		
				Defensive organisation		
				Splitting		
				Somatisation		
				Displacement		
				Projection		
				Intellectualisation		
				Projective Identification		

-				
				Regression (mild)
				Isolation
				Adult attachments
				Trust/mistrust
				Avoidance of intimacy
				Enmeshment
				Isolation
				Social fears
				Resilience
				Therapy
0 11		405		Friendships
3. Ilsa	F1a	105	C=28	Early Objects
			MA=30	Role reversal
			ME= 47	Fear and anxiety
				Trauma
				Confusion
				Depression
				Caregiving
				Defensive organisation
				Splitting
				Avoidance
				Thought suppression
				Idealisation (mild)
				Rationalisation
				Adult Attachments
				Compliance
				Avoidance of intimacy
				Trust/mistrust
				Trauma
				Resilience
				Capacity for concern
				Therapy
				Friendships
				Physical separation
4. Leigh-	u/d/F1a	115	C=42	Early Objects
Ann			MA=38	Role reversal
			ME=35	Annihilation anxiety
			33	Traumatic loss
				Fear
				Parental substitutes
				Caregiving
				Compliance
				Defensive organisation
				Projection
				Thought suppression
				Altruism
				Intellectualisation

	1		
			rationalisation
			Humour
			Dissociation (mild)
			Adult Attachments
			Compliance
			Caregiving
			Fear of conflict and loss
			Resilience
			Capacity for concern
			Forgiveness
			New Objects
5. Jane	F4b/F2	150 C=60	Early Objects
		MA=43	Maternal substitute
		ME=47	Anxiety
			Role reversal
			Caregiving
			Defensive organisation
			Idealisation
			Splitting
			Rationalisation
			Identification
			Moral defence
			Humour
			Adult attachment
			Trust/mistrust
			Affiliation
			Motherhood
			Resilience
			Reparation
			Mourning
			Capacity for concern
			Faith
			Physical Separation
			New objects
6. Lerato	F1a	125 C=43	Early Objects
		MA=41	Annihilation anxiety
		ME=41	Fear, helplessness
		1415 .41	Hate and destructiveness
			Emotional regulation
			Trauma
			Role reversal (adolescence)
			Depression and anxiety
			Compliance
			Defensive Organisation
			Splitting
			Avoidance
			Cognitive Distortion (minimisation)
			Cognitive Distortion (minimisation)

	Dissociation
	Autistic fantasy
	Projective identification
	Adult attachments
	Fear of intimacy
	Mourning
	Reparation
	Resilience
	Creativity
	Therapy
	New Objects
	Physical separation
92 C=24	Early Objects
MA=36	Trauma
ME=32	Body boundaries crossed
	Dependency
	Compliance
	Caregiving
	Enmeshment
	Depression and anxiety
	Defensive Organisations
	Regression (mild)
	Projective Identification
	Splitting
	Altruism
	Somatisation
	Adult attachments
	Maternal substitutes
	Affiliation
	Fear of intimacy
	Compliance
	Caregiving
	Resilience
	Rescuing
	Therapy
1	
	MA=36

C=Comprehensibility, MA=Manageability, ME=Meaningfulness

6.2.c). SOC-29 measures of central tendency for the sample

These measures serve as a guideline for comparison of SOC readings within the group as well as with the average range of means for population groups. It should however, be kept in mind that participants are part of a rather unusual and unique sample that has been exposed to cumulative trauma in childhood. This is hypothesised to have had a potentially detrimental effect upon the development of the SOC in an individual (Volanen, 2011).

N=7

\overline{X} = 114.14

The average SOC for this sample falls below the range of average of means for most population samples: 125-170, which was obtained through direct communication between Antonovsky and Baker (1998). However, 114.14 serves as a more fair comparison within the group since this is a unique sample composed of individuals exposed to cumulative relational trauma in childhood.

S=19 (suggesting great variance between scores on a very small sample with one outlying score)

Median= 115

6.2d) Summary table of variables: SOC score, Experienced Stressors, Exposure to domestic violence

Variables	P01,	P02	P03	P04	P05	P06	P07
	Hannah	Kreveshni	Ilsa	Leigh-Ann	Jane	Lerato	Annie
SOC Score	111	101	105	115	150	125	92
Significant times of illness experienced	х	√ Childhood, Adulthood	х	х	х	√ Adolescence	√ Adolescence
Separation anxiety Experienced	х	٧	٧	х	٧	٧	٧
Suicide	Х	٧	Х	Х	Х	٧	٧
Ideation		adolescence				adulthood	adulthood
Type of exposure to domestic	Witnessed Overheard	Witnessed Child	Witnessed Overheard	Witnessed Overheard	Witnessed Overheard	Witnessed	Witnessed Child
violence		intervened directly					intervened directly
Type of	Verbal,	Verbal,	Verbal,	Verbal,	Verbal,	Verbal,	Verbal,
domestic	physical	Physical	Physical,	Physical	Physical,	Physical	Physical,
violence			sexual		objects		objects
					thrown		thrown

Average SOC for sample: 114.14, Range of SOC population means: 125-170

6.3 Participant results

The following participants demonstrated secure attachment states of mind on the AAI with some indications of dismissive features such as the setting aside of troubling early experiences with parents. They all made deliberate attempts to move away from their traumatic past through the use of psychological defences rooted in avoidance and through increased self-reliance but all also made deliberate attempts to re-evaluate their personal experiences.

6.3 a) Hannah (Participant 1)

Hannah was completing a postgraduate degree and living in residence, on campus, at the time of the interviews. She would regularly visit her parents during holiday periods but the majority of her time was spent away from the parental home. She also maintained contact with her grandmother and extended family at the time and these family members remained a source of support for her. Hannah presented as a reliable, contained and mature individual who was motivated to participate in the study and discuss her experiences. Some minor avoidance of certain affectively laden topics was depicted throughout both interviews. This was understood as being a deliberate attempt to protect herself from painful memories and the feelings that these evoked. Hannah also gave the impression of being a rather careful, socially vigilant individual who perhaps monitored the responses of others in order to assess the emotional safety or lack thereof, of her environment.

Adult Attachment Interview (AAI)

Hannah was assigned the adult attachment classification of F2 or securely attached with some dismissive features. A stance of dismissive attachment was present initially in Hannah's responses on the AAI but was not maintained as she expressed care and forgiveness for both parents and a valuing of her relationships with them:

I think both of my parents tried so hard to compensate for what was happening in their marriage, so my mom would go out of her way to try and protect me and do nice things for me and I guess at that stage to try and make me like her 'cos I preferred my aunt and my dad used to buy a lot of stuff so he would buy things for me and I think I felt quite loved by both of them even though I didn't quite understand what was happening between them but both of them went out of their way to great lengths to try and make things ok.

Speakers who are securely attached with some dismissive features typically express a moderate lack of memory for past events, some idealisation of both or one of the parents as well as a fear of loss, usually the loss of their own child (Hesse, 2008; Roisman, Fraley & Belsky, 2007). The latter is not applicable to this participant as she did not have children at the time of the interview. There were however, childhood fears of losing either parent to the violence, which remained in adulthood, in this case.

I remember being quite frightened most of the time 'cos I would overhear the stories that my mom would tell to my aunt and they were quite scary, of...I remember this once they thought I was sleeping in the bedroom and my mom was telling my aunt that my dad took her in the car so they were having their usual fight and my dad put her in the car and he had a gun, I always knew that he had a gun and I had seen the gun and he drove at a really fast speed and asked her to jump out of the car, and he held a gun to her and that, I think that was the most frightening moment and I always had thought of one of them, one of my parents is gonna die, either my dad or my mom.

Hannah described her childhood relationship with her mother as satisfactory or 'okay' although she felt closer to her aunt and described her as being her primary mother figure,

while growing up. Hannah also demonstrated ambivalent feelings towards her biological mother and used adjectives such as 'warm', 'strict', 'stern' and 'loving' to describe her. Her descriptions of her mother are, for the most part, supported by examples and memories she related during the interview fulfilling Grice's maxim of quality (Grice, 1975; Hesse, 1996). For example she related several incidents where her mother exhibited extreme stern and strict behaviour to the point of making her give back a valentine's card that Hannah had received from a boy at school because "God was watching...". Conversely she also related episodes where her mother would be available to comfort and pray for her when she was distressed and stated: "...every time I'd be upset I think that my mom would understand more".

Hannah's mild idealisation of her father is depicted in her choice of words to describe him, despite some lack of evidence for these. She stated that he was 'fun loving', 'open minded', 'friendly', 'accommodating' and 'warm' but failed to provide supportive, experiential evidence for all of these descriptors. Her father appears to have been an emotionally distant figure in her childhood despite providing for her physical needs and supplying possessions. They seem to have had a superficial relationship and Hannah showed an awareness of this, reporting that: "I've never been vulnerable with my dad or cried or showed any emotions" and "We never really had deep conversations".

Hannah appeared to use splitting, which had enabled her to perceive her father as two different people: the caring, safe father he was with her and the violent, dangerous man he was with her mother. She reported:

....my mom would say things and talk about him and I would overhear her telling my aunt, but to me that side of him was never revealed. When I actually saw him beat up my mom, it was still quite scary but I didn't really...I wasn't afraid of him I felt quite safe around him, most times I thought there was something my mom did wrong, I wasn't close to her, I didn't even like her much so I just thought there was probably something she did wrong, ja.

There were also times when Hannah's mother was emotionally unavailable to her daughter due to her own personal challenges and evidence of role reversal is clear: "She was always crying and frustrated" and "...If I am with my mom she would be crying half the time and [I] wouldn't know what to do".

There is also evidence of role reversing behaviour with her father: "...even when my mom would threaten him with divorce he would tell me about it and he would cry and tell me to go speak to my mom and try to convince her otherwise...".

This role reversal is still perpetuated into adulthood, particularly with her mother: "I can't really tell her about my stuff but she's always offloading on me 'cos there is much more happening in her life...". Despite this Hannah demonstrated the ability to reflect in a balanced way upon her relationship with her mother and upon the contribution of her mother to the emotional context of the marital relationship: "There's a lot of positives in her saying no to certain things..." and "....there was something that drew him to have those

affairs, that drew him to be violent and I think there are some things that my mom contributed...".

Although there were times when her mother was experienced as a frustrating, bad object, she could also be a good object for Hannah, able to provide structure, discipline and protection. Overall Hannah demonstrated compassion towards both parents while remaining aware of their role in making their relationship destructive and frightening. Her early childhood environment is also marked by the accessibility of her grandmother and aunt who were to a certain extent, maternal substitutes until she turned 12 and moved in with her parents. These early relationships may have paved the foundation for a relatively stable and balanced person who seems to value attachment and has a sense of being wanted and cared for: "I viewed my aunt more as my mother because I had grown up with her, so my mom was just another...I used to call her my other mom, my second mom because my aunt was my mother figure...".

Caregivers in her childhood seemed to be able to provide her with a 'good enough' holding environment in which she could feel for the most part of her early childhood, safe. Residence facilities at University continued to provide that 'holding' environment where she could engage her sense of control over her lifestyle and environment. This is evidenced, despite the relationship dynamics between her parents remaining confusing and fear inducing for her, even as a young adult: "I....I was quite scared and I tried not to show it to my parents because I didn't understand what was causing them to fight so much" and "Ja I still have fears of them harming each other especially since it's just the two of them and my brother has also moved out...".

Hannah demonstrated a clear lack of identification with her parents' destructive behaviour which has led her to seek a different way of relating and being related to:

I think it, it has somewhat, distorted I would say, my view of just relationships, so I find that I'm quite...I'm not really violent myself but I, I have no tolerance for someone who beats up a woman and I usually defend myself, not physically though, but I always say that I will never let anyone beat me up or anything like that and it has never happened so, ja I guess...'cos I am quite scared when I get home, even now, it hasn't happened in a long time but I'm quite afraid my dad would go back to that , ja.

She also acknowledged her deep discomfort with feelings of anger and with potential conflict as well as her own guardedness and avoidance of intimacy with others: "I think it comes up in the fact that I don't even like confrontation, when someone does something to me personally I would rather just avoid the person instead of being in conflict with them...".

Hannah was capable of acknowledging the effects of her childhood experiences on her sense of self and lifestyle as well as the impact upon her relationships (Hesse, 2008). Hannah stated:

I think my interpersonal relationships as a whole were quite affected 'cos I was afraid of being around people" and "I still feel quite restricted like it really stunted my interpersonal relations to people 'cos I find it quite hard to relate to other people and it's something I'm working on right now where I can have good meaningful relationships where I'm not always scared of what the next person might do.

Overall coherence of speech and mind were maintained throughout the text as well as relevance. There was a demonstrated ease with the topics of discussion and few examples of violation of quantity were found (Hesse, 1996; 2008). She also exhibited the ability to distinguish between what might appear to be the case at home but which may in reality, have been different: "...but now he's quite I would say tame where he doesn't get as angry or as physical, I think, 'cos I'm here, but I've never seen him quite as angry...". Hannah acknowledged that there were possible appearance-reality distinctions between her expectations and what may have been happening between her parents in her absence. Due to all these factors she therefore warrants the classification of F2.

Sense of Coherence (SOC)

Hannah's SOC global score was 111 which could be considered to be a moderate score falling slightly below the average for this sample but falling considerably below the range of means that characterises most samples (125-170) (Baker,1998). Hannah depicted good verbal acuity and was able to demonstrate, in the coherence of her narrative, her clear cognitive understanding of some of the reasons behind the domestic violence between her parents as well as her feelings about it and how her perspective had changed over time:

Ok, I think for both of them the reason why they fought so much in the past, one of the reasons was because my dad always had affairs and things like that or he'd be out of a job, and ja and things like that. So, till today he still has some affairs but now he's quite I would say tame where he doesn't get as angry or as physical, I think, 'cos I'm here, but I've never seen him quite as angry so my mom talks and he just walks out or goes to another room or something, so I still have some fear that he might go back to being that person and I think now I see that my mom didn't really do anything to deserve that because I used to somewhat blame her....

Hannah's Comprehensibility score was 40, suggesting a balanced, cognitive stance in comparison to other participants' scores, where she acknowledged the previous unpredictability of her past without overt avoidance and was able to tolerate the impact upon her current behaviour. On the SOC questionnaire Hannah declared that she was always surprised by the behaviour of people whom she thought she knew well (Question 5, SOC-29) but that when something happened she generally found that she perceived the situation in the right proportion (question 26, SOC-29). This was corroborated by reflections made during the interviews. She reported being surprised as a child, by reports of her father's violence:

I felt safe around him [father] but when my mom was around him it was scary, it was confusing because I just couldn't understand how that could happen 'cos with me he

was extremely sweet, extremely calm, I have never witnessed him not even shouting not even verbally so it was quite confusing as a child when I was growing up, 'cos to my mom he was I think, completely different....

Later Hannah was able to reflect on how both parents contributed in different ways towards the maintenance of a destructive marital relationship:

....and I get the impression that the reason was that he was always out of jobs unemployed and there are certain things I guess, that my mom said to upset him, I think that he felt quite emasculated and he would try and regain that in a physical way, that's how I think it happened before and ja, so I attributed it to him being unemployed and then he had affairs all the time so I guess even there I don't know the full story but I would say that probably my mom had something to do with it, not him going out and having affairs but there is some problem in the marriage that causes him to go and have affairs and he doesn't really talk to me about.

She also openly acknowledged the impact of such early experiences upon her current behaviour: "I think my interpersonal relationships as a whole were quite affected 'cos I was afraid of being around people, just people in general, either friends or I wouldn't keep friends for very long..." and "...I think it comes up in the fact that I don't even like confrontation...".

Hannah's Manageability score of 39 reflected a moderate ability to draw upon her current relationships and her faith in God for support in meeting current challenges as well as managing the impact of the past upon her daily life: "I think for me the big part of it has been my faith as well, so I pray about it a lot, I speak to people at my church about it who pray for me about it..." and "...ok so I think the big part of how it changed for me even in terms of how I relate to my father is, when I consider my relationship with God I see him as a father to me, so even when my father has his shortfalls, whatever, I consider God to be the perfect father for me".

Although Hannah reported that she sometimes felt unfairly treated (Question 9, SOC-29) suggesting the presence of some persecutory anxieties, she also maintained that she was able to say "ok that's that, I have to live with it and go on" (Question 18, SOC-29) signifying that she was able to tolerate the consequences of her experiences. She also indicated an ability to depend on others and resources in the environment in meeting challenges.

Meaningfulness suggests that the individual will be able to make emotional sense of his or her experiences instead of being over burdened by these and will be motivated to continue to search for resources and understanding (Antonovsky, 1979). Hannah's score in this component was 32 which was a moderate score (in comparison with other participants) suggesting that Hannah may have still been in the process of searching for deeper meaning in the reasons for her experiences although she certainly appeared to be able to cope well and was looking forward to the future (Question 22, SOC-29). There were, however, concerns about her life purpose (Question 14, SOC-29) as well as questions that remained

about situations experienced in childhood and this was evidenced in statements made in the interviews:

As much as I believe that there is some reason I don't think I've actually come to know or realise what the actual meaning or message is or something like that, but I do think there is a reason why that happened and there is a reason why I reacted the way I reacted and turned out the way I turned out from all of this, I just haven't discovered it yet, yeah, to a certain extent I do feel like that.

...also I think I have come to just the conclusion that there must have been a reason why it happened, so instead of me looking at the situation and being angry or bitter at my dad or the entire family not just my dad ...there should be a good reason, or not a good reason but a reason why it's happening and I always reason in my mind that some people have gone through worse and although it happened, things are ok now and I'm just trying to move from the past and go forward so I think that's what has helped me through it.

It is evident that Hannah displayed a reflective capacity (Fonagy, 1999b) which enabled her to experience concern for others and recognition of how they were attempting to change their lives and behaviour. This was suggestive of a sense of agency in being able to take perspective of others and their behaviour, and will assist her in future attachments. It was also evidence of a more integrated internal representation of significant, loved but feared objects which was manifest in Klein's (1932) movement towards the depressive position.

.... firstly my faith and also just instead of asking why me, trying and find some positives, I do that a lot trying to find some positive things from both mom and dad and just looking past that and looking at now, he's not that perfect, it's not ok there's still a whole lot of stuff that he does...but there are things he does now that are much better than back then, although I do have fear that he might resort to being physically abusive again, but I still see there's been a significant change to how he was before and how he is now, so yeah that's like hope for me.

Psychoanalytic Research Interview

Hannah: "Quite heart wrenching"

Hannah: ...it's ok if relationships really are...if ideal relationships are good but I feel like real...the reality of them is quite heart-wrenching.

Hannah's early exposure to the domestic violence between her parents was filtered through a childhood spent with her grandmother and aunt while simultaneously overhearing conversations between adults about the violence and observing severe bruising on her mother's body, whenever she visited. These experiences were considerably frightening for her and elicited much anxiety. To her parents' credit, they had placed her with her grandmother from an early age, perhaps realising on some level that they lacked the capacity to provide a secure and safe environment for their daughter. This is also not unusual in South African families where parents work full time and grandmothers take over

the caregiving of grandchildren. In this particular case however, the whole family lived within very close proximity of each other.

I think it was happening with my parents so my mom would come and visit during weekends if I didn't go there she would come and she would visit frequently at my granny's place, and she would come bruised and badly bruised and hurt and she would tell my aunt about it and when I asked what caused the bruising, she'd say she fell in the bath or something, from when I was quite young I think around 5 or 6 and she would always be bruised and hurt and I would overhear them talking with my aunt saying that my dad beat her up.

The first direct exposure to her parents' bidirectional verbal and physical violence took place at the age of 6 or 7 when Hannah spent the weekend at her parents' house.

I remember I went there one weekend- the first time I actually witnessed them fighting, one weekend, when I think they would usually fight in the bedroom, so my dad would come home and then they would usually argue in front of me and then they would move to the bedroom and that is where all the fighting would take place. So that particular day my mom she stayed in the kitchen and just refused to go with my dad and my dad hurt her then and it moved outside, I am not sure what age I was when it happened, that was the first incident I witnessed, maybe 6 or 7.

On this particular occasion Hannah recounted how her fear and anxiety tied her stomach 'in knots' in her psychosomatic response to trauma and reflected on how hesitant she was to spend time with her parents again after that. The distress experienced could not be verbalised at the time and was experienced in the body. Hannah was able to link her mental representations of fear and anxiety to bodily signals:

I was present and witnessed it happen and then I was quite reluctant to go visit my parents during weekends but my granny would always coerce me to go there so that it would stop them from fighting, so if I was there they would fight less and I remember I was quite scared, I remember my tummy would be tied in knots the whole ...'cos I would hear them fighting from the bedroom and the door would be locked and there wasn't much I could do about it.

What was perhaps observed here is the misunderstanding by adults that children can somehow 'fix' adult relationships when clearly this was not the case and served only to traumatise Hannah further. At the age of 12 she was forced to move in with her parents exposing her more frequently to the violence. Fear was a prominent state of mind from then on due to the unpredictability of the home environment: "...but I was always scared, I used to live in constant fear".

....most of the time I would hear screams from my mom and she would call me or my brother's name the whole time but the door would be locked so we wouldn't have access inside and you could hear furniture falling and ...in the bedroom and that, things breaking and what I'd do usually is just be in my room and try and block my ears 'cos there was nothing I could do so ja...I was just so afraid, I just remember I was just so fearful, ja that's what I do remember.

Early object relating

Hannah's mother appears to have been repeatedly emotionally unavailable to her daughter largely due to stress and a problematic marital relationship negatively impacting her capacity to mother, at times eliciting a care-taking self in the child. This was evidenced in role reversing situations:

I think for as long as I could remember she was always crying and frustrated, so if it wasn't because of my dad it was because she had too much debt, she was always sad, and she used to complain quite a lot- just so many things that I'd look at her and even now I go I don't want to be like that, there would be times when she would be quite happy but she was always so sad and frustrated so as a child when I was around her I would be quite frustrated when I was around her, 'cos I would even compare her to my aunt who was also fun to be around and if I am with my mom she would be crying half the time and wouldn't know what to do.

In childhood, Hannah would also frequently witness her mother severely physically disciplining an older sibling. At these times she feared her mother's capacity for anger and physical aggression. Consequently, Hannah was able to make contact with her anger and dislike for her mother from an early age, and although she could not express these feelings directly she remained consciously aware of her hatred for a maternal object who could be over-controlling and aggressive and who was, in her eyes, to blame for the marital violence. This is reminiscent of the Kleinian paranoid schizoid position being initially adopted as a transitory stage of development where the object is assigned a predominantly persecutory status: "Most times I thought there was something my mom did wrong, I wasn't close to her, I didn't even like her much so I just thought there was probably something she did wrong, ja".

Despite this, over time it appears that her internalised image of her mother seemed to have become more consolidated in the sense that the sad and unavailable mother who could also be protective at times could be simultaneously held in mind: "...so my mom would go out of her way to try and protect me and do nice things for me and I guess at that stage to try and make me like her 'cos I preferred my aunt".

Hannah's internalised representation of her father appeared to have remained slightly less integrated perhaps due to Hannah's need to retain her connection to her father and fears of the loss of the good object, should she fully make contact with her fear of him.

I felt safe around him but when my mom was around him it was scary, it was confusing because I just couldn't understand how that could happen 'cos with me he was extremely sweet, extremely calm, I have never witnessed him not even shouting not even verbally so it was quite confusing as a child when I was growing up, 'cos to my mom he was I think, completely different....

The discrepancy between her experience of her father and his behaviour towards her mother was confusing to her as a child and splitting and idealisation became ways of retaining the loved but feared object. This stance was not maintained however, and on some level Hannah was able to acknowledge her ambivalence and sense of loss at the emotional distance between herself and her father and their inability to connect on a deeper level:

I don't expect a lot from him, I think that's another thing that's really helping me 'cos I don't expect him to uhmm want to be emotionally attached...I don't want him...I don't.....I do, I would love for it to happen but it's not something I expect from him so I don't get frustrated when it doesn't happen.

While her ambivalence towards her father was apparent in the content of the above quote, it was also evident in the difficulty she appeared to experience trying to word her feelings towards him. It seems that she would have liked to maintain a stance of indifference towards him, 'I don't want him', however, she was not able to do this and could acknowledge that she would in fact like to be closer to him, 'I do, I would love for it to happen'. Acknowledging this desire implied an ability to tolerate the pain that came from knowing that she did not have this closeness.

Separation individuation

It seems that maternal overprotection, in childhood, did not allow for active exploration of the environment, which, in turn, may have negatively impacted the development of secure attachment between Hannah and her caregivers. Intellectual development was encouraged over socialisation and considerable emphasis was placed on retreating to the safety of an inner world where external society was considered dangerous and fears elicited by the domestic violence were reinforced in connection with the world and others. An observable trend is detected in the transmission of a paranoid view of the world by the maternal objects to Hannah as a child, ironically, without acknowledgement of the danger within the intimate family space.

When I was growing up my grandmother didn't really let me go out to play with other kids, I so didn't really have friends that I played with, not at all I can't remember any, but my mother used to buy a lot of educational toys and puzzles, I don't even remember owning a doll it was always puzzles and educational toys and all that stuff so I remember when I was growing up and I learned to read, I used to read a lot so I'd read fantasy books and hmmm ja I would read anything that I would pick up and I used to read quite a lot because I was always in the house, there was not really anything I could do.

Later, Hannah reported complying with rules and regulations out of fear of her mother's hostility, which she observed being expressed towards her sibling, and possibly also out of fear of the loss of her mother's love. As a result she appears to have developed a compliant self to avoid conflict and emotional abandonment and this had enabled her to cope with her

mother's need to over control and to circumvent the loss of the relationship with her mother: "I think I went out of my way to not really upset, especially my mom because I saw her more beating up my brother than anything else, so I would go out of my way not to upset her and I think that is what caused me not to like her much, ja".

Views of the world and others as persecutory seemed to have remained until the present but as Hannah entered University she seemed to find ways of distancing and extricating herself from maternal fears, being able to attain some distance and autonomy.

I was just told by my mom when I come here I must just find the Christian society and join them and just hmm be a good girl and she told me all the things that could happen...possibly happen and I should just stay away from all those things and as a result I didn't even move to res so I used to travel from Soweto every day because I just wanted to stay away from trouble and I did, the first thing I did was actually come and join a Christian society here on campus as I was instructed by my mom and I just felt quite frustrated I felt so sad and so bound up in rules....

I did the Philosophy of religion...yes I remember and they were talking about the existence of God and if God is there why do bad things happen and the arguments were quite convincing and back in first year I was like this thing has all been a scam there is no way I believe these things and that is where I got a bit atheist and I just disbelieved all these things uhmm 'cos of how miserable it was making me feel so hmm, that was me going through first year, the thing was I couldn't really stop going to church because my mom would force us so every Sunday, there was nothing else we could do but go to church but it was very...I disbelieved everything and I based my beliefs on the theories that I heard in Philosophy.

In her crisis of faith Hannah was perhaps able to find a way of rebelling against an upbringing which she found oppressive and frightening. It also appears to have allowed her to acknowledge her anger and disappointment in an authority who was meant to protect her. She began to discover her own identity, eventually leaving the family home, moving into residence and rediscovering her faith in God as an alternate attachment figure, far removed from the purely punitive deity she was introduced to in childhood.

So it's just moved from it being about rules and doing right and wrong to just a loving and a caring relationship with God and I feel that even if my parents are not necessarily there all the time to provide you with the necessary emotional care and my mom is depressed half the time and she doesn't really admit that she is, but it's just that emotional aspect has never been there for me from my parents so I think turning to God for that it really influenced my faith and I guess just really releasing them and not really expecting love from them and just finding everything that I need like emotionally from God and my relationship with him is the significant part, so it moved from being about the rules and that to just me finding the comfort which I was exposed to when I came here to varsity....

These progressions also seemed to pave the way for Hannah towards a more balanced view of her mother, who remained unappealing in some respects but was nevertheless loved and

needed, despite the frustration elicited. "She's a pleasant person but I think her judgments are always in the way of how she relates to other people and how she would relate to some friends of mine and some decisions that I make uhmmm I'm sure she wouldn't be really proud of, 'cos of her religious world view". She also stated:

I feel I was quite restricted, that [there are] some merits to it, I feel like there's a lot of positives in her saying no to certain things, and...I feel that if it was just my dad raising me then I would have turned out way worse than what I am, so I'm quite grateful for it because she was the only disciplinarian I remember when I was an adolescent, there were certain things that my dad would permit, he would even ask me if I wanted to do them, certain things and I wouldn't, just couldn't conceive of that so I am a bit grateful 'cos it spared me a lot of heartache and other things.

In being able to make contact with her real feelings, Hannah had been able to separate her own identity, somewhat, from that of her parents and their relationship and this was evident in her ability to differentiate between the feelings of the other and her own, as well as her capacity for compassion and forgiveness for her parents.

My mom tries and...uhmm tries to make us feel the anger that she is feeling and the frustration that she's going through and it works with my brother 'cos my brother can turn against my dad but I also feel like he's alone in all of this and that's what will push him further away to go and have affairs and things like that...as much as I'm frustrated at him it's sort of mixed with sadness even feeling sorry for him.

Although there was a strong identification with her mother in some ways, as with her original response to faith and isolation from peers for instance, a balanced and complex evaluation of both parents was provided without extreme descriptions or inconsistencies, suggesting some integration of object representations. There were clear boundaries between self and others as well as clear differentiation of object representations. Hannah was also well aware that her primary significant objects were unable to care for her in the way that she needed: "I feel like as much as I have love for them and care for them I just feel like they don't even know how to love and care for me, especially my brother, his experiences I'm not sure if I mentioned that he was beaten up by my dad physically (barely audible)".

Instead she found solace in the discovery of new replacement objects that provided her with the support and affiliation she sought:

I do speak about it to close friends of mine and people who are just available to listen and yeah that for me was sufficient I didn't feel like it was necessary to go for formal therapy session to a therapist or psychologist because I talk about it, I cry about it actually, I reconciled how I feel about it, and...so I think I've dealt with it adequately and ja.

Consequently she was able to reflect on changes that have taken place within herself as a result of new experiences: "I think the way I am now as compared to how I was in first year or something is quite different...".

Defensive organisations

Although Hannah still felt troubled by her parents' violent relationship she had managed to attain some psychological distance through intellectualisation and rationalising which enabled her to defend against mental states of pain and trauma. She repeatedly used the word 'objectivity' throughout the interview and it seemed that Hannah felt more comfortable relating information in a cerebral way rather than to dwell on affective states.

I think that just for me the big one is separating people from their actions and trying to love the person despite their actions and also an understanding of people just trying to be concerned why people behave the ways that they behave instead of another way so I think even to a certain extent it informed the career choice that I made...

There was also evidence of some dissociative numbing and conscious suppression of troubling states of mind that were elicited during the AAI when she recounted episodic memory, as a way of defending against trauma related affect:

I felt quite numb about the whole thing, I think I've come to a point where I can block certain things out so I felt very numb...so I blocked it out, and uhmm, I just reason in my mind that it was something that happened long ago and I think I've dealt with it so I didn't necessarily have any significant negative feelings.

Although this was her initial reaction at the beginning of the interview, it was not maintained and later she was able to tolerate and hold her pain in mind when discussing the fear and anxiety that was elicited by the domestic violence between her parents. It is possible, therefore that such defences were deliberately used to enable general functioning rather than being rooted in denial proper.

Adult attachments

As with any situation involving cumulative exposure to trauma it becomes necessary to acknowledge that there are areas of functioning in an individual that may remain negatively affected by in the present. Exposure to domestic violence of simultaneously loved and needed objects that are out of control, communicates something to the child about relationships between men and women in the current context. Since anxiety and fear were so often experienced and associated with her parents' relationship, Hannah's threshold for intensity of emotions may have been lowered (Crittenden, 1999) to the extent that avoidant behaviours were implemented regarding possible conflict in relationships. This was particularly evidenced with regards to her friendships and her attitudes towards romantic attachments. Hannah may have developed hyper-vigilant behaviour which is expressed in a reluctance to develop intimacy or fear of the anger of others and the possibility of her own angry affect.

...not so much friends...I guess it does impact how I relate to friends but I feel that friends are...in the sense that I feel that friends can be...not really replaceable but it's...I always feel like something's gonna happen, something wrong is gonna happen and I am always quick to move on from that relationship 'cos now that I think about it now that I have mentioned that's one part that I don't like about my mom, so if I feel like there's some conflict or something I need to leave for my own sanity so I don't stay and stomach being mistreated like my mother so I think in terms of friendship that's the trend that I've noticed, that for me if something doesn't work out or if there's conflict no matter how dear the friendship is to me I just feel like I should move and I will not stay and stomach all the hurt and in terms of dating relationships it has affected that quite a lot 'cos I just generally don't trust males or someone who could be a potential prospective boyfriend in terms of... I just have this notion that If I see even if it's very early stages if I see anything that resembles what my father was like in terms of something as small as for example if the person's phone is on the table and they won't let me go through the phone or touch their phone...so that's for me...immediately I feel like this person's probably cheating.

The presence of persecutory anxiety and of uncertainty regarding the benevolence of intimacy outweighing the potential for destructiveness was quite prominent in Hannah's discourse on relationships and something she readily acknowledged:

....she [mother] was telling me, she tells me most of her stuff so she was telling me in the past hmm when she met my dad initially she was saying how sweet he was and what a good man he was and she never ever could relate to that he would have done the things that he did or that the marriage would turn out the way that it did so for me hmm I feel like the good times they're short lived and the rest so much hard work...

This was clearly an aspect of life that Hannah may still need to come to terms with as she matures and she acknowledges that at this stage in her life she just did not yet feel ready to enter into a romantic relationship. Her ability to do this was suggestive of the reflective processes of mentalisation in being able to understand one's state of mind and affect in this particular area of functioning. "It is just me trying to let go of those formal experiences and trusting God for something better for myself so I'm not really at that point but it's something that I'm working towards...".

Transference and counter transference

Domestic violence, by virtue of its typified physical hostility and oppression imposed within the family context, may tend to amplify an individual's awareness of patriarchy and power differentials between men and women in society. Although damaged object relations and attachment representations have best served to explain the dynamic of the violent couple (Doumas et al., 2008; Dutton, 1999; Henderson, Bartholomew & Dutton, 1997), on a conscious level the individual may remain especially sensitised to expressions of hegemonic masculinity and to stereotyped role expectations for men and women.

In this particular case, struggles with concepts of gender dominance and subservience were particularly noticeable for Hannah as she grappled with issues of faith and how gender roles

are in fact, enacted within Judeo-Christian belief systems: "Yes the whole trust thing and also just I guess respecting them and also hmm 'cos there's some aspects of Christianity that advocate you need to submit that has been quite tainted, so for me the whole aspect thing of submission is quite hard because I feel like I can't do that".

Hannah's position triggered the researcher's own feelings of frustration and disappointment with enacted religious patriarchy evidenced in a paranoid/schizoid counter transference reaction and her own sensitised perception of double standards:

Researcher: Yes that is so powerful that concept of women submitting to their husbands, there is always a part missing, they labour upon a woman submitting to a man they don't seem to labour as much on the fact that God says husbands love your wives as much as Christ loves the church and that kind of gets left out.

This statement was made in direct response to Hannah's search for guidelines in her Christian Faith and in her exposure to teachings within the church that appear to overemphasise women's passivity and neglect the admonition for men to love as Christ does²⁶. A reparative depressive attempt was then made by the researcher to bring into more balanced focus the fact that just like parents, the church, as in a replacement family for Hannah, may exhibit harsh and misguided as well as more benevolent, loving parts and that these two sates can co-exist:

Researcher: It's very interesting that's how...and it's I suppose what you are talking about that uhm being aware about both, your father's good qualities but also of his destruction, potential for destruction being aware of your mother's loving nature and protective nature but also of her capacity to wound and I guess that's also what you're also talking about with the church having the capacity to teach also only the one side and not the otherso it makes sense what you're saying that people do labour on that aspect of submission and they forget that submission really comes with love.

6.3 b) Ilsa (Participant 3)

Ilsa was completing her third and last year of her degree when she volunteered to participate in this study. She was living alone in her own flat having left the family home years prior, during her parents' divorce. Ilsa maintained a relationship with her mother, who had remarried, but not with her father. She seemed reliable and was very punctual for both appointments giving the impression of a commitment to the process. Ilsa was serious, sad, engaging and contained. There were instances when she was very guarded and almost insular, suggesting a need to be treated with care and caution. At the end of the second interview the participant lingered a little, perhaps demonstrating a reluctance to end the interview due to the process feeling not quite finished for her.

Adult Attachment Interview (AAI)

2

²⁶ The exact verses from the New Testament are found in Ephesians 5: 24-26 and Colossians 3:18-19 of the ESV (English Standard Version) of the Bible.

Ilsa, a 23 year old student who was exposed to the verbal and sexual abuse of her mother by her father (whom she considered to be mentally ill) earned an adult attachment classification of F1a. This classification denotes secure attachment with some initial setting aside of attachment but simultaneously a valuing thereof as well as deliberate attempts to move away from harsh past experiences with caregivers. Ilsa demonstrated a re-evaluation and re-direction of life through actively escaping from her unpredictable family environment which she described as tense and stressful: "...but everyone was like that in the house at the time so yeah, my dad would just lunge."

Throughout Ilsa's script there were various examples of intense and persistent role reversing behaviour on the part of both parents with clear attempts by the parents to involve their young daughter in their discord and even turning to her as a confidente:

My mom always used to tell me things that she probably shouldn't have, she used to come and ask me questions even when I was young like 7 and 8 years old she used to be like oh do you think dad and I should get divorced, this is wrong and she'd come into my room and say oh dad's doing this and don't believe whatever he says when he comes in and ...so she was kind ofI think both my parents lack boundaries in different areas so I don't feel like I was ever treated as a child, like I was treated as my mom's friend or counsellor or something and my dad's whatever he needed me to be at the time until I didn't perform to his standards.

When they fought, they used to not talk to each other, so there would be like this tense silence or they'd say something to me and expect me to go and tell the other person and then we would have this backwards and forwards thing all the time and it was horrible and my dad being the way that he was he would come home and you never knew whether he would be in a good mood or a bad mood....

There was also the presence of some mild idealisation of the mother figure despite most of the examples given featuring instrumental loving behaviours: "...my mom, she is protective, and she is loving, I would say she is a bit overdramatic, or likes to draw the drama in, she's like a planner instead of a doer" and "...like I had measles the one time and she went and got me a singing box because I wasn't allowed to watch TV or anything like that so she would do that and then bring the food yeah so she was definitely the one who did everything".

Some mild derogation of her father was also present in comments such as 'It makes me sick, my dad...' but these were not maintained throughout the script and may be connected to the use of splitting between parental figures in childhood as an attempt to cope with the family environment and the domestic violence. This had, to a certain extent been maintained in adulthood with Ilsa's deliberate move away from her father and rejection of a relationship with him, however this seems to have been done to preserve her own emotional safety and to keep her internal good objects safe:

...since I've moved out and I don't see or speak to my father anymore not as much so uh...I moved out when I was 19, I haven't spoken to my dad at all in the last month, but

before that I hardly spoke to him, ja it's definitely decreasing [the panic attacks, anxiety and depression] the further I am away from all of that.

Some examples of instrumental loving behaviour by the father were given followed by outright rejection by the paternal figure in later childhood years:

my dad and I when I was younger we were very close, we did everything together, we went sailing and he was a part of my school life and he played tennis with us, but us being all of us but him and I were particularly close, uh, as soon as I started developing for myself he kicked me out, he wanted nothing else to do with me and then my brother became like the favourite child and he told him that he always wanted a son first, all these other things...

Overall, balance was demonstrated when Ilsa reflected on her experiences with her parents in her attempts to contextualise their behaviour and understand the reasons for their difficulties (Hesse, 2008):

Ok, well my dad's sick uhm...he would never admit to it...been to so many doctors and every time they would say ok this is what we think and he'd just cut them off, he owes everyone money because of their opinion uhmm which I think led to my mom's behaviour I mean she's not innocent but at the same time... like they sort of fed off each other so....

She also expressed a balanced perspective when relating her experience of losing her paternal grandmother whom she valued and perceived as a supportive attachment figure: "Like I think more about her life and what she did for us versus her death, I don't like how she was treated, so".

Ilsa's parents do not appear to have provided a secure base during childhood as both engaged in role reversing behaviour and one was abusive and rejecting eliciting states of great anxiety, confusion and dread in Ilsa (Hesse, 1996; 2008). According to Ilsa, her father was also sexually abusive towards his wife and often engaged in inappropriate sexual behaviour such as telling his wife about his infidelity, for instance. This information was then transferred to Ilsa by her mother and created feelings of shame and trauma in her, as evidenced in her inability to finish the following sentence "...it upset me he'd have prostitutes and he would name them [Ilsa]²⁷, uhm but so I don't know and I know that he..ja..." Confusion and unpredictability were therefore exacerbated by the parents' relationship.

...because I was always being told different things like I never knew what to think or what was really going on so like I didn't know are they getting divorced, are they not getting divorced ok this week they're not getting divorced, tomorrow maybe they are getting divorced, like it kept this whole...like I had huge muscle tension issues because I was always so tense waiting for something to happen or for them to start fighting again or the silence to end uhmm ag.. because we never knew what was going to happen, we

²⁷ Ilsa's father would call the prostitutes by his daughter's name

never knew what was coming home when my dad came home kind of thing so ja, we spent a lot of time worrying about stuff.

A tendency to relate present experiences with parents tended to feature in Ilsa's AAI in response to questions related to childhood and this was perhaps more related to a conscious setting aside of painful experiences in childhood as an active process and as deliberate, something which was later acknowledged by the participant, rather than necessarily due to a prominent preoccupation. When asked specifically about childhood experiences with her parents she admitted: "uhm...I don't know, I like to kill that sort of stuff".

Attempts at killing 'that sort of stuff' may have been further connected to attempts at minimising negative experiences with parents which were present at times in the text. When reporting on her experience of being left with her grandmother, by her parents, for some weekends when she was young, Ilsa reported: "It was nice because ...I mean it was like a treat weekend, my gran always treated us, we didn't have to do chores, the chores or anything like that and I don't remember [it] being bad, my gran was quite a fuss pot but uh...".

Yet, more frequently, she would clearly and realistically comment on effects that her past experiences had upon her. "...[I] probably just closed off even more, like I would never go and tell friends or family or anyone it was more of withdrawal than anything else..." and "....hmm, I felt alone often and a lot." And "I think I'm quite sexually reserved as well because of that [the sexual abuse in the marital relationship], like I am always thinking is this deviant or weird or whatever because you know...ja".

Ilsa demonstrated that she valued attachment and that relationships were clearly important to her and this was evidenced in appearance-reality distinctions as well as in her attempts to create new experiences and relationships (Hesse, 2008; Main, Kaplan & Cassidy in Bretherton & Waters, 1985). At the age of 16 years she moved out of her family home and in with the family of a friend for a period of 3 months. She described her experience as being mixed with relief and also with longing for her sister and mother: ".... It was amazing, it was so relaxing, I missed my sister a lot and my mom a little bit uhmm... but it was so nice to be out of the house".

In her current relationship with her mother and their level of relating, she also remained aware of what she would prefer but did not have: "Yeah, I wish that If I had a problem or something she would just give me a hug and be like it's ok and whatever, but she....she tries to give advice, and sometimes it's not what I want uhmm...it's just s**t".

In some ways Ilsa idealised her step-father as 'wonderful' and 'the polar opposite' of her father perhaps in a libidinal attempt to balance out her anti-libidinal position (Fairbairn, 1952) of her biological father.

Little jargon was used throughout the interview but there were a few instances where experiences specifically related to the sexual abuse of her mother, were related in ways that were characterised by mild lapses in discourse such as unfinished sentences or change in language usage, suggesting some minor unresolved/disorganised responses to this particular type of trauma: "And I know there was sexual abuse going on uhm, my dad would have friends come and stand in the closet and they were watching, stuff like that, my mom never knew about them, I don't know...a whole lot of stuff". However this was not maintained during discussions of other experiences of trauma and loss.

Grice's maxims of quality and quantity were predominantly maintained throughout the script with clear and ordered discourse (Grice, 1975; Hesse, 1996, 2008). Relevance was at times coloured by moves into the present which appear to be deliberate attempts at avoiding the trauma of childhood and do not portray angry preoccupation. Coherence of mind and script were also maintained thus warranting a classification of F1a for this specific participant.

Sense of Coherence (SOC)

Ilsa's global SOC score was 105 which is below the average for this sample and was the third lowest SOC score within this sample of participants. At first this may have seemed to suggest that the participant exhibited a lower propensity to meet stressors with fortitude than others who had perhaps scored higher on this dimension of the study. Upon investigation and considering the three individual component scores of the SOC, however, a very different representation emerged.

Ilsa's comprehensibility score of 28 was a lower score (compared to those of other participants) suggesting that she perceived the outside world as chaotic and unpredictable. This was not surprising given the volatility of her upbringing and her exposure to a life changing traumatic event at the age of 20 (this particular event will not be discussed in this thesis as it does not bear specific relevance to the topic). These experiences may have indeed served to make Ilsa weary of experiences with others, due to fear of them being sometimes disordered and unpredictable (Question 5 of the SOC Questionnaire which warranted a score of 2 from the participant) suggesting that she was frequently surprised by the behaviour of others whom she knew well. It is hypothesised here that particularly confusing experiences that violate trust (such as sexual abuse of a parent or ill-defined boundaries in the sexuality of a parent) in significant others and that induce trauma may have negatively impacted the element of comprehensibility in the participant. Ilsa had also experienced her life as being full of changes and as irregular (Question 10 of the SOC Questionnaire).

I was always being told different things like I never knew what to think or what was really going on so like I didn't know are they getting divorced, are they not getting divorced ok this week they're not getting divorced, tomorrow maybe they are getting divorced, like it kept this whole...like I had huge muscle tension issues because I was

always so tense waiting for something to happen or for them to start fighting again or the silence to end uhmm agh...because we never knew what was going to happen....

This stance was also observed in the text of both interviews where she expressed anxiety at the perceived manipulation by significant figures which rendered them untrustworthy in her experience:

When you're talking to him [father] and he's actually there, he is so convincing and caring like in a twisted kind of way and he says all the right things and always knows what to say and uh he'll tell you ja but I love you so much you're my first born and all this rubbish and then he'll leave and you're like dammit he got away with something again 'cos with something that he came that he wanted and he usually gets it in the end uhm, so often after he leaves I'm so frustrated with myself and uh.

This unveiled the sense of confusion felt in terms of expectations from others and their behaviour: "I don't trust people at all, it has affected so many relationships for me, uhm... it's...I think it's mostly the trust thing that...I always think someone is out to get me especially when I get close to someone..."

Her search for order, explanations and understanding was possibly made difficult by her harsh and confusing experiences with her parents who were engaged in and perhaps consumed by their own marital troubles. Although Ilsa demonstrated coherence of mind when discussing her background and was aware of her own affect and behaviour, she seemed to perceive that of others as mostly confounding and persecutory, reminiscent of the paranoid schizoid position (Klein, 1932). Her core assumption about others was that they tended to be unpredictable and untrustworthy and therefore she needed to be very careful about whom she chose to trust.

Ilsa's manageability score of 30 also implied that she may not have perceived herself as having access to many internal or external resources that would enable her to cope well with the challenges of life. This is expressed in her feelings of aloneness in childhood and adolescence as well as in her fear of being alone in adulthood and in states of 'anxiety' and 'depression' which she reported experiencing, although there appeared to have been a more positive shift recently: "...'cos I've said that before and then I just let my standards slip, uhmm...'cos I don't want to be alone kind of thing, whereas now being alone is not such a bad thing at the moment so I'm hoping that maybe I can sort of stick to my standards in the future".

In a sense there appered to be a fear of being abandoned and disappointed in relationships which invariably happened: "Well it's happened every single time after like a serious relationship I've gone...there were so many things that weren't right or that he didn't respect or you know stuff like that but...ja I don't know".

It is the score on the third component of meaningfulness that projected a completely different image of this participant's SOC. Antonovsky (1987) maintained that

meaningfulness was the most fundamental dimension of the SOC since an individual has to care about and be motivated to seek out resources and to attain understanding to be able to improve one's life situation. Without this type of motivation there would be a lack of engaging with the world and a giving up or a lack of agency in being able to participate in shaping outcome. In this sense, without meaningfulness, both components of comprehensibility and manageability would be rendered temporary. Ilsa's score of 47 for this component was the highest in this particular sample of participants (and was shared with participant 5). There was evidence that despite her struggles, Ilsa was very much motivated to meet the challenges of life and to search for real connections with others who demonstrated qualities that she valued.

Someone who is just caring and truthful and uhm...sort of respectful......and ...and want...well it's the same thing but wants to do things because I want to do things or just wants to spend time with me not necessarily because they're going to get something out of it but just because...or do things just because I ask.

Ilsa also indicated that she was looking forward to the future (Question 11 of the SOC questionnaire) and that 'it feels good to be alive' (Question 14 of the SOC questionnaire). Antonovsky (1987) described individuals with lower scores on Comprehensibility and Manageability but a high score on Meaningfulness as 'most interesting' and went on to describe them:

Such a person is likely to show a profound spirit, deeply engaged in the search for understanding and resources. There is no guarantee of success but there is a chance (Antonovsky, 1987, p. 21).

Psychoanalytic Research Interview

Ilsa: "I felt alone, often and a lot".

When reporting on her experiences Ilsa tended to remain very much in the present in what appeared to be a conscious effort to suppress thoughts about traumatic experiences in childhood and in order to maintain strong affect under restraint: "I blocked all of them [childhood experiences of the domestic violence] out pretty much."

Predominantly, Ilsa described a childhood spent in a strained atmosphere of 'silent treatment' and unpredictability in which she was often given the responsibility for intervening in marital disputes between her parents.

He would say oh I can't believe your mom is so useless she won't even just fix this little thing for me you know it's gonna break up our mana...marriage and everything so he wouldn't tell me go tell your mom to do this, he would go like a round about way and I'd be like agh mom please won't you fix this for dad because he says that it's important and whatever uhm, he's gonna leave if you don't do it so he would make an issue around something without actually telling her directly to do something uhm, but if you didn't do it he would be like ah don't you have my back kind of thing.

Early object relating

Ilsa's father was reported to have victimised his wife verbally, physically and sexually leading to the development of a constant family environment of animosity and tension between the parents which appears to have eventually incapacitated both from being emotionally available for their daughter: "...I was always so tense waiting for something to happen or for them to start fighting again or the silence to end..."

At first Ilsa's relationship with her father was experienced as positive as they would spend time together: "we used to sail together and have the same sort of interests...so." As she reached middle childhood this relationship became combative and rejecting leading to a deep longing for the paternal object who had once been available and supportive:

...my dad and I when I was younger we were very close, we did everything together, we went sailing and he was a part of my school life and he played tennis with us, but us being all of us but him and I were particularly close, uh, as soon as I started developing for myself he kicked me out, he wanted nothing else to do with me and then my brother became like the favourite child and he told him that he always wanted a son first...

...it still sucks 'cos I still wish that I would have had a father figure like I see my friends have uhm...I don't think I'll ever get over that kind of thing but uhm it's also frustrating on the other hand 'cos I know that he can never be that person so.

In her adolescent years Ilsa attempted to create distance from the marital relationship by moving into a friend's house for 3 months. This coincided with Ilsa's growing awareness that her mother was being sexually abused and that there was considerable infidelity in her parents' marriage. In her young adulthood she had finally cut off all contact with her father to protect herself from perceived manipulative attempts to keep her embroiled in the acrimonious divorce between her parents:

...him and my mom are still in court over my younger sister and he'll want me to like back him for something or tell your mom this or uhm, can you believe her she's such a liar and this is the truth and whatever mean time I've been to the lawyers myself and I know what the truth is but he sort of convinces you and he's like but I'll e-mail you all the bank statements and I'm like dad I don't want to know, like you and mom are fighting, and then you get the e-mail with all the bank statements and you're like agh! You know.

These frequent experiences of manipulation and role reversing behaviour tended to provoke paranoid schizoid feelings of anger and frustration towards her father as a bad object who 'uses everyone that he can to get what he wants'. Ilsa rationalised that her decision to not have a relationship with her father was the best possible solution:

Ja...my mom made those kind of decisions for us in the past and when there was a restraining order he wasn't allowed in the house for a while and stuff like that...(deep breath taken)so to be able to sort of make that decision on my own and for it to be the

same decision that my mom had made sort of...that she made the right decision then it's uhm...it's tough but it's good at the same time.

The loss evoked as a result, however, was considerable and feelings of hatred towards the object appeared to be very much mixed with feelings of tenderness and compassion towards her father which co-existed simultaneously. Ilsa appeared to try to defend against her love for her father but this did come through in her discourse:

Sometimes I just hate him, uhm..like how can you...what kind of a person does that sort of thing but I remember once we went for a walk (voice tone altered, higher) and he was walking in front of us and I looked at him and he's quite small we always joke about him having triple S [short s**t syndrome] as well so he was walking in front of us and for the first time I was like I feel so sorry for this person because he is so sick, doesn't even know what he's doing, doesn't even know that he's just killing relationships left, right and ... he has no friends, not one, and uhm, his family has left him, his mother disowned him, and I'm like hmm his kids don't want to talk to him, his wife left him, like you know, shame it was the first time I felt sorry for him.

Despite her rage she remained able to conceive of the possible states of loneliness and rejection that her father may have been experiencing and of his suffering demonstrating a capacity for mentalisation and for depressive position functioning. There also appeared to be a deliberate and balanced move away from the moral defence (Fairbairn, 1952) and a realisation that her father ultimately needed to take responsibility for bad parenting which was not attributed to her as a child: "...it's not me it's him now whereas in the past I thought I have done something wrong and now I'm gonna fix it and get someone to do it like this and...so."

In her longing for a father figure, Ilsa may have tended to idealise her stepfather as a possible substitute object of attachment, who was described as 'awesome', in an attempt to retain paternal goodness and avoid loss of the internal good object. This was also echoed in adolescence when she experienced considerable anger towards her mother for divulging the sexual abuse and threatening the complete loss of the good father object that she had managed to internalise. This was perhaps due to the intensity of badness threatening any semblance of love and goodness left in her internalised representation of her father.

I was really angry, it hurt her telling me, and then, like at that time I was still...sort of didn't believe that was going on so I thought that you know she's trying to gang me up against my dad and he's trying to tell me what to tell my mom and they're like fighting and there would be all these silences so...like, I don't know, I suppose I was irritated that she told me and I didn't quite believe it for a while.

Both parents appear to have involved Ilsa in the marital relationship with attempts at having her 'fix' their problems leading to her early parentification as a child who was also expected to look after siblings. She was prematurely pulled out of her childhood in having to deal with adult issues while she was not yet ready to do so. While her parents remained unable

to resume their appropriate roles, overreliance on Ilsa to oversee her youngest sibling was apparent:

...a lot of that time my mom was very depressed 'cos I would look after my sister and.....uhm....my brother had also gone off to boarding school so he would just be there in the holidays and he would never believe what was going on even if I said to him can you believe dad he's such an idiot and I told him exactly what was going on uhm...but like it totally made me...I think that's when I started feeling so alone 'cos my mom was dealing with her stuff....

There remained a persistent impression that Ilsa felt overlooked, silenced and ignored while growing up and that she also felt abandoned by both parents. This sense of prevailing and looming abandonment was markedly present for Ilsa as she grew up in an environment which provided few opportunities for the development of inner states of security and trust: "I don't know where it came from but if we were in a shopping centre and I couldn't see my mom I thought that I had been left behind and I'd run frantically trying to find her again".

my mom...sometimes it's like she doesn't even hear you or you say something or...or she doesn't listen to the whole thing and she'll just carry on about something else, and even when I was younger I would be talking about something and she would just change the subject and I'd be like uh you know...focus, so that...it was like she was ignoring what I was trying to get at I suppose.

...as I was getting older my dad was ignoring me, flat out ignoring me.

Attempts to provide examples of maternal loving behaviour were met with vague, general statements which hinted at Ilsa's mild idealisation of the mother object possibly as an attempt to protect this internalised image from the destruction of disappointment:

I don't know, it's like a feeling that you get from her it's not something that she's actually done it's just something that you feel when you're with her so ...like I live on my own now, when I go home it's just a whole...like a tone because my mom is there, it doesn't matter where she is it's just like this...she ...she tries to do things for you because she knows that you like them, she'll like make your favourite meal and go and visit friends and stuff like that.

Despite this there were also indications that Ilsa was able to make contact with her anger towards her mother for the inappropriate role reversing behaviour she had engaged in while growing up. "I mean I was still angry with her for telling me things that she probably shouldn't have, when I was younger".

There were also some reparative guilt feelings expressed towards her mother due to rage expressed in adolescence. Ilsa may have felt intense anger and shame at being told about the sexual abuse by her mother. It is possible that she felt extremely angry due to this information threatening internalised good father objects, and that she felt persecuted and therefore projected her anger onto her mother for disclosing the information. Later she

experienced guilt at her own response towards her mother and at her own siding with her father that this had provoked:

I feel so sorry for my mom in a way that I was so angry with her and uhm...I kind of not stupid but stupid for believing my dad and...when he said to me ah go tell your mom this and it's your mom's fault for the silent treatment look at her she won't even talk to me when I walk in uhm...ag my mom and I argued quite a bit when I was...from about 17 till...probably peaked when I was 19 and I moved out uhm...until like 21, 22, ja, argued a lot and only after did I start realising you know it wasn't her fault, ja

This depressive position was balanced by acknowledgement that the maternal object was not always available and supportive, but sought support for herself, and also by deep sadness that her mother remained in the relationship despite the destructiveness of it:

She said it was for us (tearful tone)...Ja, which is also really hard because I mean I like...I think if she got divorced earlier we would have probably realised earlier because it was sort of during that time that everything started falling out or not falling out 'cos she'd told me before but I started accepting it, uhm...and I don't know just to know the facts or understand the facts earlier might have been better than how it was.

Equally Ilsa was reflective on the disappointment and deep loss that inevitably arose due to the failure of her caregivers to parent her in a consistent and safe manner: "I think both my parents lack boundaries in different areas so I don't feel like I was ever treated as a child, like I was treated as my mom's friend or counsellor or something and my dad's whatever he needed me to be at the time until I didn't perform to his standards".

A sense of self and defensive organisation

Despite her early experiences Ilsa demonstrated the potential to separate and differentiate her identity from her parents and their conflict up to a point. She did experience depression suggesting an internalisation of the injured object and identification with it (Waska, 2008). Although she resided alone in her own flat there had also been times in the past when she had struggled with being alone, perhaps due to the lack of internalisation of enough secure and safe objects. There also appeared to be an aversion to setting boundaries in intimate relationships and a fear of becoming the bad object for the partner, even when circumstances required it: "Because I hate fighting...I hate fighting and like I don't want to be alone, but I'm better at it now I think since uh...ja since January like I've slowly gotten stronger and it's actually been quite nice to be alone for a while, 'cos in the past I've had boyfriends like straight after each other uh...so ja"

She demonstrated insight in acknowledging that her identification with her mother and fear of being alone had at times placed her in a position where she felt she had compromised her standards and sacrificed her needs to maintain relationships that did not satisfy her and left her feeling more alone than ever: "...and I think it's also like in a relationship where

because I don't trust myself maybe to...to keep my standards and therefore keep in my relationship or if I am in a relationship I don't say no, so then ..I still feel alone in the relationship because I'm not getting what I want" and "...well I recognise although I'm not very good at doing it, is still like saying no to people, and standing up for myself which I think my mom didn't do and she should have done and I haven't done in the past and I've often said agh this isn't what I want and then in the end I 'm like okay fine I'll do it anyway".

Fears of aloneness appear to have dissipated somewhat as Ilsa had experienced a break up with a long standing boyfriend four months prior to her first interview and had been able to tolerate being by herself for the first time as she reached out to friends for support:

...the first wasn't like it was just very quiet so I didn't want him back but at the same time it was quiet uh...but it's...at the same time it's been nice 'cos I can do whatever I want to do, go wherever I wanna go and he was also very jealous of some of my guy friends uhm...he'd be like go out with them but I always felt guilty doing it going out with them without him so I've just been able to just be free in that sort of sense.

A false compliant self had perhaps been evoked in romantic attachments in order to maintain the relationships and defend against possible abandonment and rejection. This compliance alternatively may have also provided Ilsa with a viable way of avoiding real intimacy: "uhm...often happens...well it's happened every single time after like a serious relationship I've gone...there were so many things that weren't right or that he didn't respect or you know stuff like that but...ja I don't know".

Adult Attachments

Unconsciously, real intimacy may be perceived by Ilsa, as extremely threatening and dangerous given the potential for betrayal, abandonment and pain. A cynical perception of relationships was maintained in her expectation of failure in attachments: "I'm sceptical as well as to whether I'll ever find that sort of relationship, uhm...I mean my ex and I were together for almost two years and he proposed to me and broke up with me all within one month it was like...shh...(hands raised, palms up) so ja, I was just ja" and

Yeah. It was very, very hectic, but I mean it was just like a like a really...agh just like a stamp of approval of what I'd been thinking the whole time, there isn't this romantic idea of marriage and commitment and all that being more...which you know, I still kind of hope that I'll find it but on the other hand I'm like well don't be stupid and just think it's gonna happen.

As such she may have unconsciously been attracting to herself partners who were unable to provide her with a holding space or who were emotionally unavailable and who seemed to be self-involved, displaying characteristics similar to that of her parental objects.

Well my brother said something very interesting to me the other day and he's so right, he says I always date arrogant guys, he says they are so arrogant they're so full of

themselves they don't take a second to think about you they just want you to tag around with them and do what they want to do and you do it so he goes –stop, and it's so true....

Like for sss...I am such a...like a person pleaser especially when I'm in a relationship and all these guys haven't done anything of...just because I wanted them to do it kind of thing uhm...ja so I would do something just because they want it they would never do something random...I would just be like ag please do it for me and they're like no.

Ilsa may have also been attempting to reach beyond the deprivation to hold on to the paternal object and repair the damage to the image of the father thus maintaining the good internalised object safe from harm. She sought relationships with men who were physically very different from her father but to whom she felt unable to be close to and who could not commit to her. In her 'people pleaser' mode she perhaps re-enacted the drama of childhood where her father would require compliance in exchange for his acceptance and support: "....he would also use that as part of his manipulation so he'd be like uhm...if you don't do this then I don't pay for your varsity fees, if you don't do this uhmm you're not gonna get this or if you do do something that he liked he would like give you an extra something...".

Emotional closeness may have been so frightening for her that she would alternatively only seek relationships where she was able to maintain emotional distance for reasons of self-preservation. Despite having the capacity to attach securely she may have been psychologically defending against this because of the terror that possibly accompanied it. Ilsa desired intimacy but by maintaining emotional distance she may have protected herself from the hurt and the pain of abandonment (Årseth, et al., 2009).

Transference and counter transference

With Ilsa there was a Kleinian depressive pull to protect and assist which triggered and was manifest in counter transference from the researcher at times. This was evident in attempts to respond to the desired and projected need for reassurance and for someone to provide care and disturb the aloneness. This was due to Ilsa being experienced as a fragile, vulnerable individual and her way of being in the interviews tended to elicit empathetic and protective feelings in the researcher which were also apparent in her tentativeness and attempts at minimising intrusion:

Researcher: How old were you...I'll help you along that might be a little easier because we're not going to go into the details necessarily but I'm more interested in your experience, how you experienced that and I'm just wondering how old you were when you found that out?

Researcher: Ja, so that may be something to do in the future because I think you also used the therapy well, you know so it would be...and it's nice to hear that you have a relationship with somebody already that you can go to. Okay so how are you holding up?...If there is at any stage something that you really don't feel comfortable with you can just give me the heads up.

6.3 c) Leigh-Ann (Participant 4)

Leigh-Ann volunteered for the study while completing her third and last year of study at University. She presented as friendly, very young looking for her 22 years and gave the impression of having a 'sunny' personality and humorous attitude. In fact laughter was always bubbling beneath the surface, perhaps as a defence against pain and trauma. She was easy to reach for the most part but there were times when she was quite evasive and this may have been for two reasons. The first is surmised as being possible conscious attempts on her part at blocking traumatic events from memory and the second as being the fact that she has perhaps not really made sense and thought about everything that has happened in her life and still needed time to process these experiences. At the time, she was involved in a romantic relationship with someone who exhibited possessive behaviour towards her and in between interviews she broke off the relationship due to an incident of verbal abuse by her boyfriend. In the second interview it seemed as if she just could not wait to discuss it and was clearly quite upset and hurt about it. It is possible that themes raised in the first interview may have sensitised her to relationship issues that she was unhappy with and this may have precipitated the eventual break-up to some extent.

Adult Attachment Interview (AAI)

Leigh-Ann was assigned an attachment style classification u/d/F1a unresolved/disorganised with secure attachment states of mind suggestive of a setting aside of earlier, traumatic attachments for new ones and a re-evaluation of personal experiences. It was clear that Leigh-Ann made deliberate, conscious attempts to move away from the past. In childhood, she was exposed to harsh, unpredictable incidents of domestic violence on a weekly basis which eventually claimed her mother's life and culminated in her father's suicide while he was incarcerated, awaiting sentencing. There was a history of further traumatic loss with the accidental death of a guardian followed by the suicide of a close friend.

The u/d classification was assigned due to lapses in the monitoring of discourse during the discussion of traumatic events (Busch, Cowan & Cowan, 2008; Hesse, 2008; Hesse & Main, 2006): "yes, actually, they took us in, they took us back, because when my mother passed away she...she said that she wanted us to be with her parents".

According to Hesse and Main (2006) slips indicating that a dead person is believed alive are usually brief and made by high functioning individuals during the constant questioning about loss found in the AAI. These brief slips were found in this case, during Leigh-Ann's relating of the loss of her mother, symbolising some possible interference from memories triggered by the topic of discussion which are clearly described by Hesse (2008) as follows:

Marked examples of reasoning lapses are seen when speakers make statements indicating that a deceased person is believed simultaneously dead and not dead in the physical sense (Hesse, 2008, p. 570).

This is often suggestive of entrance into partially dissociated states of mind that are temporary but that may affect the overall coherence of mind displayed in the script of the speaker (Hesse, 1996). Leigh-Ann also demonstrated unusual attention to detail as well as linguistic disorganisation when talking about loss and trauma (Borelli, et al., 2012; Hesse, 2008).

yes, I do, uhmm...I won't forget, it was...I think it was...yeah it was just after spring so like toward summer, and I was in class, we were making finger...what do you call them? Peacocks, finger peacocks for art and my teacher asked me could I please stay while the class went to music so I said ok but she didn't tell me, she didn't give me a reason she just said she wants to speak to me so I started sweeping 'cos it was art and cleaning the classroom so long, my class went to music and then my teacher sat me down in the centre of the classroom and she said to me: Leigh-Ann, your mother passed away this morning and then my first question was how? And then she said, no your father beat your mother to death, so that's how I found out.

After a particularly violent episode between her parents, Leigh-Ann's paternal grandparents were called to assist. During this process Leigh-Ann's father walked out of the house and her mother, requested with urgency, that Leigh-Ann lock the door, ensuring he remained outside. Leigh-Ann did so but this elicited great anxiety in her as her father became very agitated, demanding to be let in. "I felt really sick at that point 'cos I didn't...I was torn between my mother and my father, my mother being protected because my father threatened her...and then nothing".

Some mild idealisation of the maternal figure was present in the text although Leigh-Ann's mother does appear to have been a thoughtful parent to her daughter since good examples were given for the choice of adjectives made when describing her. "ok, my relationship with my mother was always...we were very close, we had a really close bond, she was like my best friend, I'd honestly tell her everything when I'd come home from school, I was like Miss Chatterbox".

My mother was really supportive with regards to the fact that I was really uncomfortable one year with her past teaching colleagues that she had in college, teaching me. 'Cos they build up such a strong relationship with my mother that I got so scared I didn't want to be in their class so she just supported me and motivated me to just do my best and that I can't change classes just because it's her colleague or her friend and uhm...she just in some way consoled me because it like wasn't the end of the world, she said.

Leigh-Ann described her father as being 'distant', 'absent', 'controlling', 'aggressive' and 'abusive' and provided specific examples of this behaviour. She also stated that no relationship had developed between her and him.

...on the days he was there he wouldn't even pay any attention to us, we would always linger to my mother, he was always out working, late at night, which we never understood, uhm...we used to get Christmas gifts that we weren't allowed to play with, so with regards to him being a father figure, I don't understand where that role actually mattered to me.

Statements to this effect were frequently balanced by demonstrated compassion and forgiveness for her father. She expressed strong feelings of sadness at hearing of his suicide in prison.

It was, it was really painful because uhm...l'd forgiven my father in my heart and I was...even though I was so young, I was programming my mind to...later build up a better relationship with him even if he was found guilty of murder, at least he would have served his time and when he gotten out we would have still been able to have some kind of relationship but I was really hurt, I remember running out of my granny's house right down the road...and I was just crying and they just left me because they knew that it would affect me in some way.

I feel sad for him, because he didn't have to do that because there were other ways of getting around it uhm...but for me I feel it was...it..it hurt me 'cos I would have liked to have a relationship with my father, he's my father...but I can't say that I...I miss it.....'cos I would have liked to have a relationship but if he would have allowed it....

Examples of role reversing behaviours with both parents were stated frequently within the context of Leigh-Ann protecting her mother and at times even protecting her siblings from witnessing the domestic violence by taking them into her room while attempting to distract them. "I used to try and stop him, I used to say 'daddy, please don't do it to mommy' and he'd just push me aside and carry on and then I'd just take my sister and my brother" and "I'd take them to my room and I'd close the door".

Overall Leigh-Ann provided good examples to substantiate her descriptions maintaining Grice's maxim of quality and fulfilling relevance (Grice, 1975; Hesse, 1996). Violations of quantity were rare and the overall coherence of the script was mostly maintained with exceptions of temporary lapses due to discussion of traumatic loss. Some dismissive elements in the setting aside of concerns related to attachment were noted throughout the interview, which substantiated the classification of F1a and suggested a conscious setting aside of problematic attachment experiences.

I actually think it made me stronger...uhm and it...it gave me...how can I put this? ...yeah it just...it it...it really made my personality stronger and it...kind of gave me a better appreciation for my life because not everybody has the opportunity to go through all of this and still end up in tertiary, studying towards a degree.

Honestly I don't really think about it.

However the fact that Leigh-Ann clearly valued attachment also featured prominently throughout the script:

...It wasn't...'cos we were really close and our time was really short and I was bridesmaid in her [deceased aunt and guardian] wedding in the same year so those are the memories I keep close but uhm...to remember I just constantly speak about her when...these days I'll just come up with a conversation and then we'll just speak about my mother and my aunt together 'cos obviously they were sisters and then we just think about all the happy memories that we shared with them, so we grieve...or I grieve in a healthy way 'cos I speak about them positively.

During the interview she also acknowledged imperfections in herself and the effects of her experiences on her sense of self (Hesse, 2008). "I think just my short temperedness, I'm very short tempered".

We had to adapt to everybody else's rules, always new rules, always new living environments, never stayed in one place for too long and up and go again, so we could never like...get used to just being a normal family.

Overall her tendency towards humour and balanced perspective despite the extreme experiences of traumatic loss she had experienced, suggested that Leigh-Ann was able to tolerate the past and did not feel overwhelmed by events or by her affect about these events. Throughout the interview there were few examples of identification with the parents' negative behaviour and Leigh-Ann's discourse was, for the most part, clear, orderly and lacking in jargon. Internal consistency was maintained in the overall script and there were no indications of attentional inflexibility (Hesse, 2008) thus warranting her specific classification on the AAI.

Sense of Coherence (SOC)

Leigh-Ann's global SOC score was 115 and was an average score for this sample which was suggestive of a stronger placement towards the health end of the 'ease/dis-ease continuum' as described by Antonovsky (1987), than for other participants with lower scores.

Leigh-Ann's Comprehensibility score of 42 indicated that she expected life experiences to be generally predictable, tolerable and ordered despite the unpleasantness and the changes that she had experienced in her life through loss and relocation. For the most part she expected life in the future to be consistent and clear (Question 17, SOC-29). Leigh-Ann seemed to ponder on the reason for others' behaviour and used this to make sense of traumatic events as was evidenced in her understanding of her father and his choices.

I think maybe he killed himself because he felt a sense of guilt uhm, remorse because not only did he possibly murder the love of his life he also lost his children in the process and it wasn't just one child it was 3 children, neither one of us wanted anything to do with him because the court social worker at the time did ask me as the eldest do I want to see my father and I said no so he lost that.

In being able to do this she managed to gain perspective on experiences that may otherwise be considered damaging or intolerable.

Her manageability score of 38 indicated that she had some resources at her disposal but did feel a sense of disappointment in not being able to count on people she had expected to be able to count on (Question 6, SOC-29). Nevertheless Leigh-Ann indicated that when something negative or unpleasant happened she was able to say 'ok, that's that, I have to live with it and go on' (Question 18, SOC-29). Leigh-Ann also indicated that she doubted that there would be people whom she would be able to count on in the future (Question 23, SOC-29) and this may be related to the multiple losses she had experienced beginning with the murder of her mother when Leigh-Ann was 10 years of age, her father' suicide when she was 13 and her guardian's death when she was 16 years of age. "I.....I accepted that life is short and that ...if it's... if your time has come then it's come. 'Cos I didn't understand it for so many years".

Leigh-Ann may have perceived most of her resources as being within herself rather than being present in the external environment or as coming from others around her and this was corroborated by statements she made in both interviews. "I think it did, it had a huge impact on the person I am today. I don't think it changed much from who I was when I was 10 'cos I was already hardworking I think it just motivated me to keep working hard and to keep making a success of my life" and "I've realised that I have more positive characteristics about myself than I thought I did, that I'm...that I'm a lot stronger than I thought I was".

She also maintained that she seldom had feelings that she could not keep under control (Question 29, SOC-29) and this may have been related to her conscious setting aside of traumatic events and problematic aspects of relationships as evidenced in the results of the AAI.

Leigh-Ann's Meaningfulness score of 35 suggested that she considered herself as being able to engage with life and that most of it was perceived as being completely routine (Question 7, SOC-29) but with meaning, clear purpose and goals (Questions 8 and 22 SOC-29). She was able to experience satisfaction in the things she did every day (Question 16, SOC-29) and she also found meaning in family relationships and in caring for others.

For me uhm...I was always with my siblings it was...I...I used to go out with them with my with my father's sisters but that's because I was the eldest and they always asked me to go with but other than that I was never separated from my siblings so I think that my maternal instincts kicked in at a young age (laughter). My mother taught me that my brother and sister are important because I was important to her so they became my children in a sense....

In some ways Leigh-Ann was able to rationalise her circumstances within a larger context and to place her experiences in perspective such that these did not dissuade her from exercising a sense of agency in her life and future.

I see myself as being okay and everybody else my reason....I always say that everybody goes through something everybody goes through ...everybody suffers death and everybody has their own problems, just it depends on how the individual copes with it on their own that's always how I've seen...how I've consoled myself in a way everybody has problems it just depends on how the problem affects the person and how they're able to overcome it.

Psychoanalytic Research Interview

Leigh-Ann: "I don't want to be a hateful person"

Initially, Leigh-Ann grew up with her parents and paternal grandparents in a house shared by both couples. Her mother fell pregnant again when Leigh-Ann was four years of age and her parents then moved into their own residence. It was here that the domestic violence escalated substantially, taking place on an almost daily basis and involving verbal abuse and intense physical assaults that left her mother badly bruised.

Cos there were even nights when my father would come home at 2, 3 o'clock in the morning and then he'dhe would just want to beat my mother up for no reason and he'd drag her down the passage and I would have to stop my brother and my sister from crying, to try and shield them from seeing that because my sister had pre-school in the morning, is that the memory she's going to go to school with, what thoughts are going to go through her mind?

Perpetual fearful states of mind were induced at these times where the persecutory fantasies of childhood involving loss were enacted by her parents in reality. "...we were very afraid.......because my father he had a gun so he...we wouldn't...it was never predictable when the gun would be in his bag because we never had a safe for the gun it was always either on him or in a bag that he carried so there was really a lot of fear because he had the gun".

Leigh-Ann's capacity for concern was seen to manifest very early on in her ability to reflect upon the possible mental states of another (her sister and brother) who was younger and more vulnerable than herself. What emerged was her 'good mind' and ability to mentalise (Fonagy, 2008) but which culminated in her parentification as a child. "Yes, and I had to assume the mother role fairly early in my life because I'd take my brother and my sister".

In being the emotional container for her siblings, Leigh-Ann may have avoided the threat of loss of control over her own feelings and that of being overwhelmed (Mikulincer & Shaver, 2008) as she provided the care and protection she would have desired for herself. At first she described herself as feeling predominantly angry about the domestic violence inflicted upon her mother and stated: "...but I never cried." This was a sentiment that was repeated at various times during the interview whenever Leigh-Ann related incidents of trauma and

loss. There seemed to be a need to come across as strong and to defend against feelings of vulnerability and possible 'weakness'. It was only when talking about herself in the third person that Leigh-Ann acknowledged underlying affective states which she could contemplate and hold in mind only when some emotional distance was afforded. ."She [referring to herself as that little girl back then] was feeling confused and hurt and uhm...(long pause) ...and in some way betrayed".

Predominant role reversing behaviour featured throughout the text of both interviews becoming more evident when at the age of 9, after a particularly brutal beating on her mother, Leigh-Ann attempted to intervene in the marital dyad by threatening to take out a restraining order against her father.

I threatened one morning, one Monday morning because I got so sick of it that if she didn't get a restraining order against him then I would, and I was only in grade 4 so I think that made her wake up, so that same morning she took a restraining order out against him because how can a grade 4 child take out a restraining order against her father?

This event led to a separation between her parents that lasted one year after which Leigh-Ann's father accosted her mother. One day, as she left for work he beat her to death outside of her home, while one of her work colleagues witnessed the murder. Leigh-Ann was 10 years old at the time, her sister was 6 and her brother was one year old. They did not witness the attack.

Early Object Relating

The mother figure was portrayed as emotionally available for the most part and as a supportive object with whom she strongly identified, if a little idealised.

P: She was talkative, she wouldn't give you a gap to speak at all, you'd start the conversation and she'd ramble on about everything even if it had no relevance with the topic you were speaking about but she spoke so much, she was really talkative.

I: Did you sometimes feel a little bit frustrated that you wanted her to listen and she was kind of talking?

P: No, I think that's where I got it from, because I am...I don't seem to give anybody a gap when I start speaking so I think...I...think that rubbed off on me that quality.

P:I felt the closest to my mother, she was always there for us, she was the one who always took us out.

There is also support for the presence of early attunement and of exposure to an early holding environment evidenced in Leigh-Ann's capacity for concern (Winnicott, 1963a) and her ability to regulate her own affect during extreme events eliciting severe fear, anxiety and traumatic loss. As a teacher, her mother encouraged academic performance and valued education highly and was an area of identification between Leigh-Ann and her mother. "....because she was always proud of my achievements, I received awards from Grade One

right through to matric, I was ...she was so proud of me that she would like hug me and kiss me she uh you know that song 'butterfly kisses'? That's the motherly version I got".

It is possible that eventually Leigh-Ann learned to use her mind to supplement the mother object in order to master and control internal objects and anxiety states when upset (Sheppard, 2009). As a child who was privy to the destructiveness that unresolved hateful states of mind may inflict upon a family, Leigh-Ann seemed to have used her mind and reasoning to cope with the trauma and loss that she had experienced. When asked what she would do when upset and worried she reported: "I don't remember a time when I never did school work, I always found something to do even if I didn't have to do it".

Examples of physical affection and loving behaviour between mother and daughter featured throughout the interview suggesting that there was closeness and support in the relationship between mother and daughter. "Hugged...I remember being hugged by my mother but she always with our award ceremonies she was always...be the most proud parent there, she went coloured²⁸!"

Yet Leigh-Ann was also able to provide a balanced and insightful understanding of her mother and her behaviour.

Yes, her teaching job was priority for her next to her children, she...she...I used to go with her to school sometimes 'cos our school used to end a few days earlier if the syllabus had finished then I'd go with her to school, she was exactly the same with her class, with her learners as she was with us, there was nothing that differed, it was exactly the same, she brought work home, marked, she drew up her syllabus, there were 12 piles all over the floor and she needed to finish it before she spent like any time with her children because that was...that...I think she also hid her pain...like drowned her pain in her work sort of thing.

Leigh-Ann was able to identify feelings of rejection felt from both parents when her little sister was born but most of the felt rejection was experienced in relation to her father whom she felt to be inaccessible and unapproachable:

For me specifically my father was very distant with me, I...I still have to understand why but he was more of a father figure towards my sister, he'd always play with my sister and lift my sister up more but he'd never do that for me and uhm...back when I was younger there was...was a longing for that from my father on my part because I'd always see him doing it for my sister but he'd never do it for me.

There were also suggestions of some identification with the aggressor and of angry states of mind being present of which she was conscious and which concerned her:

P:....I said last week that I've noticed that I'm really short tempered but there was (fidgeting with glasses) one incident when my brother really made me very angry and I

²⁸This is a term which may be used in a derogatory way when talking about someone of a mixed race ethnicity, referring to a stereotyped notion of exhuberant behaviour associated with this ethnicity. In this case, this is the ethnicity of the participant and is therefore used by her in a humorous way.

became aggressive towards him because I slapped him but it wasn't intentional it was a reflex but that for me was.....(long silence).

I: Something that connected you to the past?

P: Yes, it was heart breaking because I've...I never wanted to ever hurt him and I hit him"

And later:

I...I....actually I broke down I started crying because I told him that I never wanted to see any element of my father in myself and that's exactly what happened I saw that image of my father being portrayed in my character (uneasy laugh, smile).

Although Leigh-Ann did demonstrate considerable inner conflict in dealing with her own angry affect she also demonstrated the capacity to experience reparative guilt feelings and an ability to express anger at loss. "I was...I was upset but I never cried, I remember being so upset that I burned my father's photographs, that we had of him 'cos I couldn't bear to stand the sight of him".

In her anger and hatred she attempted to symbolically destroy her father and evidence of him. The emphasis on not crying again may suggest a fear of breakdown (Groarke, 2011; Winnicott, 1963a) and a lack of available objects that could contain her pain and grief at that time. Instead there was a need to defend against intolerable anxiety as a result of environmental failure. Later, despite the disaster there was a resuming of hope and of continuation of being as she was not annihilated despite her fears. "I became less angry, and I developed less resentment 'cos I don't want to be a hateful person and if I keep all that inside I am going to get really sick".

There was also the realisation that unresolved hatred can damage but equally that sadness and pain could be a part of life and yet not destroy. Inevitably, there were indications of splitting between the parents as internalised objects with the father as the bad, persecutory object and anything connected to him being derogated. "...then my stupid aunt, my father's sister, phones and she says oh I just got the news..." and "...my father used to be an angel in front of everybody else and then when nobody's around then he's the devil himself".

Conversely, there was also evidence of reparative feelings of forgiveness being extended towards her father. "Yes, but I was really hurt, I remember sitting in my grandmother's dining room and thinking yes he hurt me by killing my mother but I didn't want him to die" and "...it hurt me 'cos I would have liked to have a relationship with my father, he's my father...but I can't say that I...I miss it...'cos I would have liked to have a relationship but if he would have allowed it..."

Such expressions of grief and disappointment were suggestive of a move towards the depressive position and of the mourning that was inevitable at the irretrievable loss of the object instead of unresolved states of mind that could accompany what was taken away and how it was taken away. Leigh-Ann was also able to contextualise her father's behaviour by

reflecting on his past and exposure to violence as a child. "I think it might have resulted from his childhood because his father was also really aggressive towards his mother 'cos his father broke his mother's ribs, and her leg, so I think that kind of damaged him in a way."

Years later, when the loss of the replacement maternal figure occurred through the accidental death of her aunt and guardian in a car accident, Leigh-Ann was able to mourn, to get in touch with her grief and to finally cry. "That hurt because I even remember crying and saying 'not again".

Leigh-Ann's current guardian appeared to be a maternal substitute and there was evidence of transference of the role onto her aunt as Leigh-Ann experienced the irritation and frustration she could not fully experience with her mother, with her aunt as the frustrating object but available.

Yes, and I don't also like the fact that she uses me an example, she uses me as a case study with her...with her sister she speaks about my personal stuff that I speak to a primary caregiver about, a mother figure about and she goes and she tells her sister which is totally uncalled for because how can you confide in somebody if they go and they're telling everybody your business?

What is evident in Leigh-Ann's story is the fact that despite her using her mind a great deal to defend against intolerable anxiety states brought about by traumatic loss, she was still able to acknowledge and comment on her feeling states and experiences. This suggests that intactness was kept through highly adaptive defences and various strategies such as humour, which she was able to make use of, to avoid negative effects of anxiety.

Defensive organisation

Thought suppression was often used as a retreat from unthinkable experiences but not as a concealment of such. Conscious control was maintained and the disconnection from painful affect and memories seemed to be deliberate and volitional. "Honestly I don't really think about it" and "Yes...it was hard but uhm...after the funeral I wasn't sad anymore 'cos then it just felt like uhm...another person gone".

Intellectualisation and rationalisation were also used by Leigh-Ann as a way of emotionally distancing herself from feelings of loss regarding death and suicide in particular. "I don't understand it, honestly, I'm tryi...that's why I chose abnormal psychology to try and figure out what would provoke people to commit suicide, what psychological factors would impact on someone wanting to commit suicide".

By appealing to logic she had also managed to defend against pain and anxiety and reinterpreted her reality, allowing for the truth of traumatic loss but modulating its emotional impact thus making experiences more bearable.

I see myself as being okay and everybody else my reason....I always say that everybody goes through something everybody goes through ...everybody suffers death and

everybody has their own problems, just it depends on how the individual copes with it on their own that's always how I've seen...how I've consoled myself in a way everybody has problems it just depends on how the problem affects the person and how they're able to overcome it.

I: so in a sense it's how we are all damaged to a certain extent...?

P: Yes, but your situation isn't worse than mine the...we are the same level.

When discussing her relationship with her father, Leigh-Ann mentioned the fact that her father had taught her how to clean a gun. This was, for her, a symbol of the detachment that she felt in her relationship with him and something which she found 'damaging'. During the conversation she would frequently use humour to divert from the impact of her experience, at one stage diverting the 'scene' to something lighter and more (arguably) comical such as movies featuring Steven Seagal.

Well for me a gun in the movies it will always symbolise a form of protection because my mother wasshe really loved Steven Seagal, so we'd watch all his movies all the time and he always protected people with his gun with his kung fu moves so that's what it symbolised for me at the time, a form of protection because...Steven Seagall had a gun my dad had a gun okay he's going to protect us, and we had a break in at our house so I...again that reinforced my thought of it's a form of protection because he had a gun to keep the bad people out (Laughter).

For Leigh-Ann, altruism may have also symbolised reparation and re-connection of attachment which allowed her to receive the protection and security which she would have liked to have received as a child. When asked about protecting her siblings during the violence she stated: "Yes...ja I've never been able to think about it that way...why I did it...I always reasoned because I love them [siblings] so much and **because their happiness means more than mine**" and

....I was asked by one of my mother's ex-colleagues to speak to a...it was also a 9 and 10 year old, their mother had also been murdered by their father but she was put in a black rubbish bin for Pick-It-Up to come and collect, so I was asked by her to just kind of speak to them and try and console them in some way, just share my experience with them and that was the most amazing experience for me because I got the opportunity to share something with two children that were younger than me that went through the exact same thing.

As is common in cases of exposure to acute stress (Bowins,2004), dissociation provided Leigh-Ann with the ability to detach from adverse emotional states and gave her the emotional numbness which blocked off strong affect that may have negatively impacted her daily life. "I didn't have any feelings honestly" and "It's ok because I've never had like any feeling towards the death besides that day when he died".

All of these defence structures enabled Leigh-Ann to maintain a form of homeostasis and to continue functioning in daily life as well as in relationships, which she seemed to value highly.

Adult attachments

At the time of the first interview Leigh-Ann was involved in a romantic relationship with someone who was displaying possessive characteristics such as jealousy and controlling behaviour. Her boyfriend would attempt to curtail her communication with friends over the social media and would require her to be available to attend to his phone calls even when she was busy with her studies and could not do so. Due to her early experiences with her parents, Leigh-Ann had experienced difficulty being comfortable with closeness and was able to reflect on how her background had impacted her personal attachments.

Yes, it has, uhm...I had a very, a very hard time forming an attachment with my boyfriend at first because I couldn't open up to him at all, I think that was as a result of I don't know maybe the absence of father figures or male figures in my life where I could...where I never spoke to a male figure about anything, the females were always there for support and to communicate with me but the males didn't pay any mind to me they'd ask how you are but that's as far as it went.

Intimacy in this context may have been experienced as extremely threatening eliciting anxiety and fear but the threat of the loss of the object may have been as equally painful, motivating her to adapt and sometimes over-comply with requests from her partner as a way of maintaining the relationship.

...at the time uhm I deleted Facebook and what's...I deleted what'sApp first, sorry Facebook first because I thought if I want to improve my relationship and not have unnecessary fights because my friends really have a tendency if they don't see me on campus they'll write on my Facebook wall to ask me how I'm doing and I would get cross questioned every single day about a message or something so for my own health and my own sanity I was going to delete Facebook.

In between interviews Leigh-Ann experienced an incident of verbal abuse from her boyfriend, due to her perceived lack of availability, which led to a serious altercation between the two and Leigh-Ann put an end to the relationship, something which she did not regret but that left her saddened and angry.

...It was really heart breaking especially on Wednesday night when I said it's over it was emotional uhm...on Thursday and on Friday for me because I'm so used to him coming in the afternoons and spending that time with me and then that didn't happen so I got a bit emotional **but by Saturday I was over it** and I was fine.

In minimising the impact of the break up Leigh-Ann was perhaps attempting to split off her needy, dependent parts as she defended against the pain of loss and abandonment. Evidenced is also the need to recover quickly and to be 'strong'. She rationalised her decision for the break-up in the following way:

I feel okay...uhm...he also put me under a lot of pressure 'cos he doesn't...like I said he's not a student so he never understood the pressure that I was under but when it came to uhm...like understanding things other than school work he was perfect...just school work he got so aggressive 'cos I didn't have time for him.

It is possible that the altercation with her boyfriend may have triggered feelings of rage which elicited a need to separate from her boyfriend whom she may have perceived as a untrustworthy and persecutory object, due to the verbal abuse, thus enabling the disentanglement. She then reflected on other issues within the relationship which had made her unhappy in the past. "...and he had such trust issues with me but he flirted with other girls".

It is also possible that elements of the first interview may have sensitised her towards potentially abusive behaviour making her more vigilant to this in her boyfriend, thus precipitating the break-up. However, Leigh-Ann was also able to draw upon her experiences with new objects when taking perspective of the relationship:

when we lived with my aunt that passed away, uhm, her husband never used to verbally abuse her or physically abuse her and the same with my aunt and uncle that we are living with now, they don't swear at each other and they are not physically abusive towards each other so that for me just shows that uh eh...I can't allow a guy to treat me like that because my uncle isn't doing it to my aunt why must he do it to me?

Her deep commitment to family attachments, which was amplified due to repeated experiences of trauma and loss, activated her attachment behavioural system and she may have attracted needy, dependent partners whom she would tend to look after through her caregiving self. Leigh-Ann appeared to be more comfortable in the role of independent caregiver rather than in receiving caregiving and this may pose obstacles to real intimacy in relationships. Because she may fear vulnerability she may defend against neediness and then it may be invariably be projected outwardly as others are perceived as needing her; such as siblings who require mothering, other children who have lost their mother whom she can console, and a researcher who needs her participation.

The need to maintain family relationships intact, to recover these, to repair and salvage was marked in Leigh-Ann's story. Shortly after her father's suicide, she discovered that she may in fact have a younger half sister whom she wondered about and desired to meet.

It would have been difficult but I would have wanted a relationship with him like the last time I saw a psychologist I was about 13 or 14, and she told me that there might.....there might be but she's not too sure a chance that my father had another daughter with somebody else, and it hurt me at the time because at his funeral I...I did see a little girl with her mother and the girl is the split image of my sister, so huh...I asked my sister last year 'cos her name is X (name given) I asked my sister last year uhm, would she want a connection or to build a relationship with X and my sister said no she asked 'for what? He couldn't spend time with us but he could make another child, he must form a relationship with her' and she said 'if you want to go and form a relationship with your sister leave me and my brother out of it'.

...it would be exciting because I love family but it would also be really I think painful...some sort of hurt because you think it's only your family how could your father betray your mother like that, to maybe go and have an affair and there being a child and how could he do that knowing that he has another baby on the way, did he really

love my mother before he went and did something like that...there would be so many questions I'll ask before attempting to make contact.

In her ambivalence Leigh-Ann was able to acknowledge her lack of readiness to make contact, her need to hold the implications in mind and to make sense of a troubling family history with hope.

Transference-Countertransference

Whenever Leigh-Ann discussed experiences of loss she would engage in a very low tone of voice, almost a whisper, perhaps as an attempt to minimise the impact of such painful experiences, of the unspeakable as it were, and make them more tolerable. Perhaps, this quietness and softness of voice kept the trauma manageable and made it less jarring.

I found myself following her to her quiet, hushed and safe places in the hope of not losing her but also in a depressive attempt to provide support, a safe space where suffering was shared and understood. The sense was that what she was sharing was extremely sensitive material and that I was the caretaker of this, handling her emotions and story carefully, with sensitivity and attempting to understand the sadness that this caused for her. Interestingly, for certain short segments of the interviews, there were some noticeable shared silences and low whispering before the conversation resumed its usual tone and lift.

6.3 d) Lerato (Participant 6)

Lerato was 21 years old and in her third and last year when she volunteered for this study. She was living in residence for the last two years at the University, after a year of residing with her father and stepmother in Johannesburg. Lerato presented as a rather serious and intense young woman with an evident frailty and vulnerability that was quite disarming. She suffered from a speech impediment which became more pronounced whenever she talked about the domestic violence perpetrated on her mother by her stepfather. Lerato also experienced noticeable difficulty thinking about her traumatic experiences suggesting that this may still have been experiencing this on a predominantly emotional level and it may not have been fully cognitively processed yet. There were times when she would use the swivel chair in the interview room to rock herself to and fro perhaps in attempts to comfort herself a she spoke about her childhood experiences.

Adult Attachment Interview (AAI)

Lerato exhibited a prominent stutter which became increasingly pronounced as she related incidents of domestic violence inflicted on her mother by her stepfather. This, however, did not negatively affect the moderate coherence of mind which was present throughout the script (Hesse, 2008). She was also slow to warm up to the interviewing process but eventually engaged well.

Lerato obtained the attachment classification of F1a demonstrating a secure attachment style with a re-evaluation of her personal attachments after harsh experiences with caregivers. F1a speakers tend to demonstrate a setting aside of relationships due to the trauma and rejection experienced in early life (comments on transcript by AAI coder). When asked to describe her relationship with her stepfather, Lerato maintained that she did not have one and that she had only developed a perception of him. "...he [step-father] wasn't there during my teenage years by then they had split so it...I think it just remained just perception, honestly".

There were clear indications of the valuing of attachments despite this setting aside of problematic aspects of relationships as well as appearance reality distinctions that featured throughout the text (Hesse, 2008; Main, et al. in Bretherton & Waters, 1985): "cos I...in..in the beginning it was normal you know for me, but then when you get to school and everyone has a dad it..it still felt like...it still felt a bit normal but there were times when I would wonder what it would be like to have both my parents living with me".

Lerato also acknowledged that her perception of situations may have differed from the reality of the situation itself.

At some point in my life...well I, I remember as a kid we'd always ask my mother who she loved the most and she'd tell us the the generic answer all of you the same and I remember at some point I was so convinced that she loved my oldest...my eldest brother the most because someone at madresa said it's always the oldest kid who is always loved the most so then I started looking for that of course and ja so I was really convinced of that.

Lerato was highly aware of the nature of her experiences with her parents and also provided various examples of the effects of her earlier experiences upon herself. She acknowledged the effects that her attachments had upon her attitude towards relationships in general. For instance, she commented on how her early experiences had affected her perception of others and her lack of trust in a world which she had perhaps found to be dangerous and rejecting. "I think I'm very morbid and very untrusting. Well not very just pretty morbid pretty untrusting, I used to be worse though, and it, it has it has improved has become less morbid less untrusting".

Despite this her relationship with her mother had improved as Lerato had been able to resolve some of her conflicting feelings towards her parent. "I think it's much closer now but uhm I mean we...we were speaking about between the ages of five to 12 it wasn't as close then but ja now it's much closer".

Some moderate idealisation of her biological father was evident perhaps due to the fact that Lerato had not experienced consistent and frequent contact with her biological father in her childhood and therefore this was one of the ways of maintaining connection with the good but elusive object of childhood. "...he's really funny, has a good sense of humour,

uhm...he's also, he's also a very kind person and...uhm...he's generous, and uhm he's also very proud and...".

This stance was not maintained throughout the interview and Lerato was able to acknowledge that her image of her father was not based on a solid relationship and connection with him and that it may have been coloured by childhood idealisation. "I think, I think my perception of my dad is still kind of absolute now I think, I think now I'm at that stage with him where uhmm...I'm a child with him you know so I kind of see him in a very absolute light yeah".

Lerato's description of her mother as very loving and very caring was not substantiated fully but was based on vague examples which did not clearly portray such behaviour on the part of the parent. However, there were clear examples where her mother demonstrated protectiveness over her and at such times Lerato also expressed a fear of her mother's anger. "I remember once a neighbour smacked me, a neighbour I never really liked...and I...when my mom came back from work I told her about it and she totally lost it like she went to their house and broke windows and stuff... hmm. It ended badly...it ended very badly".

Overall the image of her mother was perceived as being more balanced and realistic as the idealisation was also not sustained.

...I think...I think my mom and I are very close now because I am finally mature enough to understand what goes...what goes through her mind or like try to understand her and to understand why she reacts in certain ways and understand the stuff that happened before and exactly how she is now and...and I think it was very important to...to break down that whole perception of like absolute strength because now I can accept her as a human being instead of this this uhm...this person I perceived as very, very, absolutely strong, I...I think that's changed how I react towards how, how she is sometimes as well...

Lerato sometimes maintained that she had little memory of her childhood, a prominent feature of F1a speakers (comments on transcript by AAI coder), but this was evidenced to be more a part of her conscious setting aside of troubling memories. It was also observed when she described role reversing behaviours between her mother and herself as a teenager. "I think, I think that I wasn't seeing it as you know her, her weaknesses and stuff I still saw her as a very strong woman and it was just I don't know maybe it was just information to me, I don't remember how I felt about her confiding in me".

When describing her parents, Lerato demonstrated balance in setting them in their relevant contexts (Main et al, in Betherton & Waters, 1985) and manifested forgiveness and compassion for their flaws and failures as care givers. "...I think in, I think, I think her [mother]...her what you may call it, her lack well not lack of but like the realisation of the fact that she has pain as well, she isn't absolutely strong reflected in my writing." And "His

[stepfather] parents were...well his dad was basically what he became, his dad was also abusive to his mother...".

Lerato also demonstrated collaboration with the interviewing process where she clarified points that had not previously been correctly understood (Hesse, 1996, 2008). She had made mention of her mother loving fiercely within the context of protectiveness and when the researcher contextualised it in this way, Lerato went on to clarify that this was not always the case with her mother.

Well for us f..for us as her kids it's uhm well it..it..it's I..I wouldn't say it's a fierce love except when you see the protective side come out then it's a bit fierce and scary as well, but just like on a general day to day basis it's how she is with us, you know how she speaks to us, her tone of voice and how she always wants to do things for us you know.

Although there were a few incidents of breakdown of language usage pertaining specifically to descriptions of the domestic violence, these were not dominant in the script. Lerato also maintained quality of the script by adhering to the topic of discussion and not displaying attentional inflexibility (Hesse, 2008). Quantity was maintained as was coherence of discourse for the most part and the use of jargon was minimal.

Sense of Coherence (SOC)

Lerato's SOC score of 125 placed her within the average range characterising most samples and was one of the highest scores obtained by a participant in this study. However, Lerato's responses on the OLQ were mostly undifferentiated and lying on mid-points of the Likert scale for each question suggesting that she may not have had extreme opinions or attitudes.

Her Comprehensibility score of 43 suggested that she found most events predicable but once again most of her answers on this component were undifferentiated. She did indicate that sometimes she had feelings which she would rather not have (Question 21, SOC-29) and this was supported by feelings of helplessness which she still experienced when thinking about the domestic violence that she witnessed. "I think...I think I still feel that very helpless in that situation, because we didn't know who we could speak to as kids and also the whole factor of not being able to trust people like if you went to speak to someone would they help or would they just amuse themselves with the information".

Although on the questionnaire Lerato indicated that she felt that she could take perspective now and think about her experiences (Question 26, SOC-29), there were indications in the interviews that she still experienced difficulty thinking about and ordering information related to her trauma in childhood. There were also times during the second interview when questions had to be repeated as Lerato appeared to dissociate slightly in relation to particular topics:

P: Can you please repeat the question?

I: Say for instance looking back now at what was happening then, how do you understand what was happening, 'cos at the time it was just an emotional reaction whereas now as you said, you are more analytical about it?

P: uhm...I think I still feel helpless about it.

Lerato's manageability score of 41 suggested that she perceived herself as having access to resources that would assist her in coping with life challenges. She acknowledged feelings of disappointment towards people she had counted on (Question 6, SOC-29) and this could be related to her disrupted relationship with her older brother who may have been an attachment substitute for her, in childhood. Lerato related times in childhood when she would go to her brother for assistance perhaps because parental figures were not available. She also indicated that her older brother was the 'only one I was ever sure of'.

She also reported struggles with keeping certain feelings under control (Question 29, SOC-29) which was evidenced during interviews and may indicate some difficulties with emotional regulation due to experiences of cumulative trauma. Lerato may therefore look for external support and may rely more on external resources such as social support through friendships and on her romantic attachment relationship rather than on her own internal resources in dealing with challenges from her past which still impacted her.

....a friend of mine actually the guy I'm dating now he used to send me a lot of stuff to read you know and uhm...a lot of it was by this theorist Eckard or something and...and it, it was a lot of pain and letting go of pain and reading that 'cos 'cos I always felt like what's speaking to my soul and that's how I'd get to living those words and reading that and realising that pain like it...it'sss...it was like realising something I already knew that pain has so much power....

Despite her current struggles with processing traumatic events in childhood, Lerato indicated a willingness to engage with her environment (Question 4, SOC-29) with expectations that her future would be better, full of meaning and purpose (Question 22, SOC-29). Her outlook on her current relationship was very positive as was her ability to trust new objects and new attachments she has made suggesting that she did see a positive way forward (Antonovsky, 1998). Her meaningfulness score was 45 which was quite a high score supporting her desire to find meaning in fostering supportive relationships with others with whom she could talk openly: "...I think I'm very glad that I have a few friends that I can trust that I know I can trust and those are the friends I confide in and I know they're people I can talk to and I can...I can completely trust them and...it..it..it's very comforting to know that there are people like that".

Psychoanalytic Research Interview

Lerato: Pain is not forever

There were moments of abject terror experienced by Lerato, in childhood when she and her three brothers (one younger than her) believed that they would lose their mother to the violence. Lerato's mother and father had divorced when Lerato was an infant and her mother remarried 8 years later. It was in this second relationship that the abuse first started. The domestic violence was described as sporadic, as if times of build-up were observed before culminating in intense physical beatings and verbal abuse during which Lerato's mother would be expelled out of the house. The violence was not directed at the children specifically but took place in front of them and during which the children would scream at their stepfather to stop. This second marriage dissolved four years later when Lerato was 12 years old.

Childhood was spent mostly in the company of her brothers where a close attachment to her older brother was formed. Unfortunately this older brother later became involved in drug addiction leading to him leaving the family and living on the streets, being arrested and returning to the world of addiction again. At the time of the interviews Lerato did not know where her brother was residing or the state of his physical health which caused her considerable pain and anguish. The scarcity of meaningful contact with parental figures in childhood was evident in Lerato's assessment of her childhood environment and she denied having a relationship with her caregivers back then but only had a 'perception' of them. It was as if these objects remained fleeting, unreal and unable to be connected with except through idealised images of them.

At the time of the interviews Lerato was involved in a romantic relationship which she found to be supportive of her. She had frequent contact with her mother as well as with her biological father and demonstrated hope in terms of developing a closer relationship with her father. Lerato had attended therapy towards the end of her second year at university for a few months. She intended to return to the process at a later stage.

Early object relating

I think at the beginning well, I never had much of a relationship with anyone so it was.... I think my strongest relationships as a child was with my brothers 'cos we were always together and like, my two older brothers.

Lerato depicted her childhood as being mostly a desolate space void of close attachments to parental figures, that were emotionally unavailable, and of looming dark fears of abandonment and loss. Lerato's biological father left the family when she was only 3 months old and moved to a different province. Although he visited her and her brothers three to four times per year, he appeared to have remained a very much idealised but undifferentiated and unintegrated image in Lerato's psyche. Lerato described her father as being very kind but examples given to support this were contextualised by his attitude towards others rather than towards herself, in particular. "He's [father] very kind to us and like everyone else he interacts with, like when I'm with him and we go to some you know, like buy food somewhere he'd be nice to the people there as well, he'll joke with them, make them laugh, ja".

Through the idealised father the good object was preserved and not lost even though later Lerato was able to reflect on the lack of a real relationship with the paternal figure. "I didn't really know my dad, didn't spend enough time with him." And "I think my perception of my dad is still kind of absolute now I think, I think now I'm at that stage with him where I'm a child with him you know so I kind of see him in a very absolute light".

In contrast Lerato's experience of her stepfather was that of a distant, angry and wounded object capable of demonstrating rare moments of thoughtful behaviour towards her younger brother and her mother, on occasion. The splitting in this case was not so extreme as to prevent Lerato from acknowledging the potential in her stepfather for both care and destructiveness. Her stutter intensified when she discussed episodes of the domestic violence during which Lerato firmly believed, her mother's life was in danger: "There was a time well, this happened a few times actually where he beat her up so bad that she started frothing and that was really scary for us 'cos we thought she's dying and we were kids, we didn't know what it meant ja, and that happened quite a bit".

Exposure to this violence and the lack of connection with the adults in her life may have given rise to internalised helplessness and fearful states of mind connected to potential loss of the primary love object. "I used to cry, I used to pray that he would stop soon, I used to pray that he would stop like really soon and I used to wish it was the last time and he would leave like forever, I felt really helpless as well".

I think I still feel that very helpless in that situation because we didn't know who we could speak to as kids and also the whole factor of not being able to trust people like if you went to speak to someone would they help or would they just amuse themselves with the information.

The potential loss of the maternal object may have been associated with damage to the self, suggesting a traumatic interruption to the ongoing process of separation-individuation for her between eight and 12 years. Although differentiation between mother and daughter would have been a process which would have started earlier (Mahler, 1968) it was perhaps complicated by the presence of domestic violence.

At first her mother was idealised as strong and obsolete in this strength. Lerato may have identified with her pain and helplessness absorbing this as her own as expressed in states of helplessness which she reported still feeling with regards to her mother's pain. This splitting enabled the mother image, as omnipotent in her strength, to remain protected from emotional states that challenged this. Change occurred when at the age of 15 her mother began to confide in her. Although perhaps deemed a negative role reversal situation, it was this that enabled Lerato to revise her internal split image of her mother. Her mother did demonstrate protectiveness regarding attacks on Lerato from outside the family but on one occasion this escalated into aggression being directed at a neighbour that had hit Lerato. On an emotional level the busy and possibly overwhelmed and terrified mother remained protective but emotionally distant and unavailable. On some level Lerato may have

identified with her mother's aggression depicted in her justification of her mother's actions as being deserved and in contextualising it as 'fierce loving' and protective. This may have reinforced her early 'obsolete' perception of her mother as strong and powerful, intensifying the split object. "I mean, they got you know what was coming and in the end she punched a window and she got cut so we had to call an ambulance and she still has like the stitches I mean she still has the scars from the stitches till this day."

In her particular family, Lerato not only felt alone and helpless during the domestic violence, but her belief in the basic benevolence of others may have also been shaken leading to potential isolation and mistrust in people. As a child she would rely mostly on herself when emotionally upset, alone and in pain and would engage in singing, reading and writing to self soothe rather than seek comfort from significant others. Her fears in fantasy were enacted in reality by her mother and stepfather as the 'would be protector' became helpless and suffered potential destruction at the hands of an external persecutor (Lieberman, 2007). The violence continued until she was twelve years of age and ended with the divorce of her mother from her stepfather. Unfortunately, Lerato already had difficulty trusting significant others and perhaps even her internalised images of them, which may have evoked severe mistrust and fears of intimacy. Her mother's intolerable painful states had possibly become her own as the representation of the other was internalised as part of the self and the broken, damaged mother was split from the strong, obsolete one that was protected.

At the time of her mother's divorce from her stepfather, a young adult cousin passed away unexpectedly, evoking in Lerato a fear of loss of her objects, of what could have happened and possibly of doubt regarding how the maternal object would survive the latest abandonment. Although her relationship to her cousin was described as 'peculiar' and distant with Lerato admiring her from afar, she responded to this as an intensely devastating event as her personal trauma and fear of loss was displaced upon the death of her cousin, who was a mother to a young boy at the time of her death. "I think it was the first death in the family that I was actually devastated about, yeah I was devastated and I and I genuinely cried because I lost her and not because I'm at her funeral or everyone else is crying so I must".

Her image of her mother as strong could not be maintained in adolescence though, as rage and hatred overflowed and were directed towards her mother. The relationship between mother and daughter became troubled but simultaneously real and more grounded in authentic affect.

As I grew older I started having a relationship with my mother, during the teenage years it was very strained because we had a very strained relationship but, but I think like with me sometimes it would be closer. I have no idea why I just sometimes I hated her, I know it's a very teenage thing to say but I really believe that I did at that time. I think I started to realise a lot of things of my childhood you know like I think I felt she was very unfair how she brought us up, there was always a whole way to go so we should be this

way and with my brothers she was a little more lenient, I started realising that and I think I was acting out against every single thing she said because I felt it was a matter of how she thinks we should be as girls, as a girl and as boys.

During her teenage years, Lerato appeared to be dominated by her antilbidinal ego state in relation to her mother. She felt enraged, treated unfairly for many years and engaged in the splitting off of hateful, angry parts and projected these onto her mother who became identified as the external persecutor in a paranoid-schizoid way of relating. The libidinal omnipotent mother may have been just as powerful in her strength as an internalised object given the intense splitting between the two images and Fairbairn's (1952) assertion that split internalised (libidinal and anti-libidinal) objects are usually matched in their intensity. However, in this process of questioning and evaluating her childhood, Lerato began to slowly separate and disentangle herself from the idealised mother of illusion. In her anger, hatred and expressed antagonism she possibly felt real for the first time (Winnicott, 1960b), and was metaphorically killing off the illusory, omnipotent mother (Pearce & Simonowits, 2003; Winnicott, 1971). The real mother survived the hatred and was not destroyed by these annihilatory parts that were projected.

I used to tell her all the time you know what, just because I mean I used to tell her it's unfair that she says I should be this way because I'm a girl an like the girl should wash the dishes even if the guys are telling her it's not fair and eventually it did change, she did start telling them you know, wash your own stuff.

[but] if I ask my mom and dad like at that stage in my life I used to scream I mean really act out a lot and I don't know maybe it was a bit liberating for me 'cos it's something I never did and it's something I don't do today as well.

One of the primary attachment figures in her childhood was Lerato's older brother who provided her with a semblance of security and stability by demonstrating acceptance and protectiveness when she was in distress regarding her peer relationships at school. "Well he told them off for calling me names and stuff and then he told me to come and hang out with him and his friends".

Lerato's brother seemed currently to be both a source of reassurance and a source of fear and pain for her. In moments of great distress she sometimes dreamt of her brother aggressing towards her and wanting to annihilate her. These dreams confused her since he was the one person she was 'always sure of' in childhood. As a possibly abandoning object, due to his own neediness, Lerato's internalised bad object threatened to kill off the good. The struggle between love and hate, and the rage of experienced neediness which can destroy good internalised objects was being acted out in her mind. "It like happens when I'm going through a really dark time like sometimes I have these nightmares of my brother and that, that kind of depresses me for a while and then I start being neurotic again and you know and very, ja I feel very haunted sometimes".

After completing matric, Lerato moved from her mother's home into her biological father's house which he shared with his fiancée. It was here that her longing for the idealised father was frustrated and her very real rage was awakened. At first she distorted the experience in a defensive attempt against remembering. "It was pretty nice actually yeah it was really nice".

Later it emerged that the experience was emotionally arduous for her, leaving her angry, battling depression and suicidal thoughts:

I remember then I was thinking about being removed from home, and from my brothers and my mother and everything and then I lived with my mo...with my dad and my stepmom who was really, really harsh and mean to me, it made it easier for me to think about things more analytically, well about my childhood and, but then I was also really angry with my stepmother.

Her relationship with her stepmother was reportedly fraught with intense conflict and may have disturbed and activated her rage and hatred which was then directed towards internalised objects that could not satisfy. Unable to reflect on her own mental states without the presence of an available and accessible other (being far away from her mother and brothers), this internal world may have been experienced as frightening and dangerous to the self (Fonagy, 1999b). Suicide then may have become a way of controlling these mental states that were found within yet were potentially intolerably terrifying. The largely persecutory and hateful image of the experienced stepmother in the anti-libidinal ego state may have reawakened the untouchable strong and protective image of the good mother without weakness, in the libidinal ego structure. The intensified split mother image may have maintained the status quo and prevented differentiation and integration until hatred and rage were able to be processed in therapy.

As her experience of her mother began to move towards more integration, Lerato started to perceive her mother as a flawed, hurting but loved object. Her experience with her stepmother pushed her into further contact with her hatred and destructiveness and in the process of therapy she was able to make contact with the real mother as well as with her feelings of sadness and guilt at the loss of the object. This led to reparation and preservation of the real, more integrated mother object.

I think my mom and I are very close now because I am finally mature enough to understand what goes through her mind or like try to understand her and to understand why she reacts in certain ways and understand the stuff that happened before and exactly how she is now and I think it's very important to break down that whole perception of like absolute strength because now I can accept her as a human being instead of this person I perceived as very, very absolutely strong, I think that's changed how I react towards how she is sometimes as well.

Reparative feelings arose for a mother who was not absolute in her strength leading to empathy and a more depressive position in relatedness, as feelings of love developed in spite of her aggression (Klein, in Khan, 1985). "It hurts her [mother] and inside it hurts me as

well and that's the main reason why I get so emotional when I speak about her because every time I speak about her I just see the pain that she's wallowing in".

Although there is still some clinging to the internal painful object, as alluded to in the above quote, there is also some relief at letting go and separating from the pathological elements of internalised objects. For instance Lerato was able to distinguish between her pain and that of her mother and she also acknowledged that she sometimes gave her pain too much power over her. The process of differentiation appeared to have been initiated.

Defensive organisation

Lerato made attempts to make her experiences of the world less threatening through distortion of unfavourable events which tended to minimise their impact. When relating harsh disciplinary methods she had experienced in childhood, Lerato laughed, perhaps as an attempt at minimising potential states of anxiety which this topic elicited. She also commented on her reactions to events in ways that suggested the need to feel in control and maintain a perception of such (Bowins, 2004). "...she hit with the hand uhm sometimes a stick.......we had a pipe once (laughed)" and "I think I did yeah, 'cos I'm, I'm not one to scream and you know like over-react, like my reactions are non-reactions...".

There were also indications of reliance on imagination and some fantasy states to cope with the adverse environment of childhood. The absence of good enough maternal availability and care by a traumatised mother may have interfered somewhat with normal development. As a child Lerato may have taken refuge in fantasy perhaps more than would have perhaps been expected. This may have been a spontaneous reaction against an unbearable 'pool of pain' introjected into a fragile sense of self. "I was very, very internal I actually like realise how internal I was then, than compared to how I am now, 'cos I...us...I literally used to live in my own mind like I'd be around people but I'd just be you know living in my own mind, so".

Mild flight into fantasy life suggests the presence of early defensive structures of a dissociative nature as responses to failed dependency in childhood (Colombi, 2010) which in and of themselves enabled Lerato to function. When contextualising Lerato's childhood environment it becomes evident that a single mother, recovering from an abusive relationship, looking after and providing for 4 children after a divorce, may not have been able to provide all the needed emotional and physical availability to her children. Parents drawn to and involved in relationships characterised by domestic violence may, to differing degrees also present with damaged and damaging internal objects (Dutton, 1995, 1999) and this in itself may limit and compromise their parenting and attachment capacity. Although Lerato was exposed to domestic violence from the ages of eight to 12 years (the duration of her mother's second marriage) attachment trauma and obstacles to successful early dependency may have already occurred prior to her exposure to domestic violence. It therefore becomes difficult to attribute her withdrawal from others and use of fantasy in

childhood solely to the family trauma, although such experiences would certainly have magnified and perpetuated her developing defensive structures, making these perhaps more entrenched.

A child who possibly already felt alone in the presence of an overwhelmed, unavailable mother, became even more alone in the presence of a now also abused and terrified maternal object. Initially Lerato appeared to have remained stuck in her unprocessed pain, which interfered somewhat with her ability to make real contact with others, but this changed gradually as the need for the defence decreased.

I actually, I actually when I'm with people I'm with them now I mean it doesn't, I mean I used to listen to what they say and I'd go home and record what people said and I'd like go and analyse my days like I'd really overanalyse every single thing but I still had... like I had a dual attention going on, I'd be able to concentrate on what people are saying and what's going on but I'd be more happy just you know, concentrating on my own little mirage, whatever.

Fantasy seems to have provided her with the ability to be distracted from a frightening environment in a way that enabled her to learn about the world and relationships and that seems to have allowed her to feel as if she could be in control:

I think I found escape like in books, I used to read a lot as a child, so I used to just like read book, after book, after book after book and I remember, I remember I was in primary school and I spoke about how just being in a book gives you this opportunity to just live a completely different life and I mean obviously then I didn't think of it as anything but now I realise why I did that.

Lerato may still have experienced traumatised states of mind in relation to her early experiences, in the present, as aspects of her trauma appeared to remain unprocessed and unintegrated. Some mild dissociation may therefore have been used to make internal states of pain more tolerable. This was evidenced throughout the second interview in particular, as Lerato would shift her attentional focus slightly and questions had to be repeated. In tangent to this and perhaps linked to the need for diverting focus from pain, was her use of introjection as a child. Dominated by her internal world and her anxieties which were not disproved by good enough experiences, Lerato received and identified with her mother's projections of intolerable pain and helpless states of mind. "When my brother started spiralling downwards, 'cos that affected all of us and I saw her pain even more, and I absorbed it even more".

Uncomfortable with her own frailty and pain, Lerato may also have split off these parts and projected these onto others. This was something which may also have conveyed her fear of her own potential for destructive neediness and rage. On some level she also had renewed awareness that damage could be done to others and that the capacity for destructiveness could potentially wound others psychologically: "Yes. I think so because I even think that about a lot of people as well and I...'cos I've always felt like it's okay if I feel pain but I don't

want anyone else to feel pain because I don't think people can handle it and I know that's crazy...".

Projective identification between mother and child may also have communicated to Lerato as a child she was helpless and powerless or incapable of engaging in healthy relationships (Levendosky et al, 2012). In itself this may have promoted the development of avoidant patterns of interaction with others and negatively impacted her attachment in adult relationships.

Adult attachments

Lerato: I think I think my perception of the world is kind of tainted by that and my, my faith in humanity isn't as high as it could be. Yeah.

Mental states of fear and rage may be evoked in children who are exposed to violence between parents and these experiences of trauma may remain into adulthood, affecting the way they think about and relate to others. Avoidance of vulnerability, intimacy and fear of closeness and connectedness, especially to others in whom Lerato may be emotionally invested, appeared to have prevented attachments from taking place. "Oh well, I have this thing that I used to do a lot like if I really like a guy, then I wouldn't date him. Uh I think I was just afraid to be in that vulnerable space so I would date people that I don't really like you know as much and that wouldn't last, it would literally last like a month".

It would therefore hurt less to lose someone in whom she was not really invested than to risk loss of another to whom she felt emotionally connected. This social isolation or alienation may have also existed along a continuum composed of different degrees of avoidant behaviour, as in Lerato's case where she did not completely isolate herself from dating opportunities or necessarily display fully dismissive attachment patterns, but at the same time ensured that these romantic experiences were short lived by avoiding partners for whom she could really care for. This may also have served to reinforce an image of the self as not being good enough or strong enough to maintain healthy relationships. Lerato avoided connecting to individuals she could care for and be vulnerable with and this was perpetuated in adulthood up to a point. Recently she had met and developed a relationship with someone whom she cared for. "We met last year and I just liked the person that he is, he's a really good person and he is with other people and I think that was the main attraction factor for me, and it was post therapy, ja, I'm just realising that".

Lerato realised that she did not walk away but rather engaged with someone she could care for and was feeling strong enough to do so despite the risk. She reflected on this, having the realisation while discussing her boyfriend in the interview, demonstrating the capacity for metacognition and the ability to evaluate her own behavioural changes over time. "He asked me out and I was…obviously I didn't say yes I like in fact at the beginning I was…I made it, I made a promise that I would not date him because I liked him but then eventually I just did, ja, it happened".

Previously, vulnerability in dating relationships was avoided, possibly due to intense early experiences and messages obtained from parental figures whose behaviour communicated that such relationships inevitably incurred the likelihood of abandonment, intolerable pain and abuse or some form of betrayal. The transition to making a true connection with another suggests that Lerato had been able to disengage from pathological internalised states that maintained her own social alienation and that some relief had been experienced: "I'm actually glad I went back on that promise because I feel like it's what I've been doing all along, yeah, I'm glad this time I broke that".

It was upon reflection that Lerato was able to explore her journey in therapy from a traumatising childhood along a road of discovering new objects and therefore new attachments. This journey continued for her as she made new connections and battled her natural tendencies to withdraw from contact with the world and seek refuge in states of fantasy. For Lerato, her early experiences of domestic violence have alerted her to a world that could be particularly persecutory: "I think I'm very neurotic and paranoid so that helps the fact that I'm protective over myself but at some point it might just, be overthinking things because I do get that a lot, that I do overthink".

Despite this, in her shift into a more depressive position and in her transformation of rage into grief, Lerato was able to make contact with her longing for a mother who was many times experienced as distant and unfair. This experience made space for renewed connection and love where grief became a mixture of sadness, longing and loss (Kavaler-Adler, 2007). Internally she fostered her capacity for compassion and made allowances for the failures of others. This process became necessary for the future separation of affect states and further differentiation from parental figures. In this process Lerato began the journey of trying to re-organise and understand the difference between her own pain and her mother's: "I think my mother is also stuck in the whole pool of pain thing and the worst part about that is that realisation is usually coincidental so I don't know if she'll ever be able to ever truly appreciate everything else that's good and that's going on".

Although she felt deep sadness for her mother, she was able to continue to live separately from the maternal object's pain. Her formerly unconscious rage which was directed at the internalised maternal object became conscious. The grief at the loss of the idealised mother opened up the possibility of longing for the lost mother and for preservation of a flawed but present one. Instead of continuing to 'live inside' her head, Lerato was attempting to rely on trusted others in her distress and is seeking affiliation and contact. Despite her trust in people being impaired by her early experiences, new opportunities had arisen and were being used for further growth. "I think I'm very glad that I have a few friends that I can trust that I know I can trust and those are friends I confide in and I know they're people I can talk to and I can completely trust them, and it's very comforting that there are people like that".

Space in current relationships was made for Lerato to be able to continue living without feeling profoundly paralysed by and lost in internalised painful objects. Overcoming her

isolation, she was able to relate to others which represents a sense of a budding interdependence on significant others (Fairbairn, 1952) and is essential for the development of self-worth and a sense of efficacy (Hong, Adams & Lilly, 2012). She was aware that the journey was not over and that she still had a way to travel in her discovery of new objects and a more authentic sense of self. "I feel like I' still a bit closed off. I'm not as open with him [boyfriend] about what I go though and stuff, yeah I'm trying to work on that".

At the same time the sense of hope created in this new relating was evident: "It's going really well, it's actually been the longest I've ever been in a relationship, I'm hoping for a future with this guy, ja".

Transference-Countertransference

For Lerato, it seemed that the traumatic experiences of domestic violence and the observed physical damage to the maternal object were difficult to think about and explore. As such, past incidents were still experienced on an emotional level with re-visitation to states of helplessness and intense anxiety. Disorientation with regards to time and space was also observed as an indication of traumatic loss. The researcher found herself picking up on this and became concerned with making sure that Lerato could think about and order the sequence of events so that her experiences did not remain a disordered muddle inside her mind but were contained within a time frame, to make them more manageable. The counter transferential response from the researcher was therefore rooted in the need to provide structure and decrease the confusion thus attempting to address the helplessness and anxiety in the participant. This did seem to reduce some of the disquiet in Lerato and was a therapeutic response to the interviewee from the researcher.

P: Well, uhm...I think I was in grade....I can't remember...'cos it was maybe when I was in grade 2 and then he moved out before (some mumbling, thinking going on, talking to herself, chair swivelling stopped)...I think I was in grade 6 when he moved out yeah I think it was four years that they were together.

I: ja...so you would have been...ja so you were 8 when they got married... about that age, and then he moved out when you were about 12?

P: Yes...I think 12...ja.

I: 12 or 11. Okay but the thing is that what happened between them stayed in your memory?

6.4 Summary

In this chapter, findings pertaining to this study's exploration of mental representations, SOC and attachment states of mind in individuals exposed to domestic violence in childhood, were initially presented in table form for ease of review. This was followed by an analysis of the experiences of four participants who were classified secure on the AAI but who demonstrated slight tendencies towards dismissive attachment states of mind. The SOC scores of these participants demonstrated considerable variation from each other

although most (Hannah, Ilsa, Leigh-Ann) did seem to be more willing to trust themselves in meeting challenges in life (self-reliance) than to trust others and their ability to help them in doing so. Lerato was more willing to trust others but she was also very cautious about who to trust. They were all therefore, very careful in their selection of friends and significant others. Equally, a variety of spontaneous defensive responses to the trauma in childhood were evidenced. Lerato and Hannah used their imagination in childhood to cope with their environmental strain while Leigh-Ann and Ilsa seemed to have used their intellect and academic success more to overcome their anxieties. One participant (Leigh-Ann) was classified as u/d in relation to the unresolved traumatic loss of her mother while the other three participants had not experienced this same type of loss. All participants demonstrated tendencies towards avoiding troubling aspects of attachment depicted in fears of intimacy which were better resolved in some (Lerato) than in others. They all also depicted slight idealisation of parents, particularly the mother, and were compliant children who experienced role reversal situations with their parents. All also demonstrated oscillations between the paranoid schizoid and the depressive position with feelings of compassion and forgiveness being expressed by all towards their parents. The following chapter outlines the results from the case studies of the remaining three participants' (Participants 2, 5, and 7), who are linked by their slightly more preoccupied features of attachment on the AAI, signifying a slightly different set of defences mobilised to manage their childhood experiences of domestic violence.

CHAPTER 7

FINDINGS II

7.1 Introduction

This chapter continues the detailed analysis of mental representations, attachment states of mind and SOC in individuals exposed to domestic violence in childhood. In this particular chapter the analysis of participants 2, 5 and 7 's (Kreveshni, Jane and Annie) narratives are undertaken and have been placed together in this chapter due to slight features of preoccupied attachment being detected on their AAI's. Two participants tested secure while one obtained the classification of insecure preoccupied attachment. These three participants also demonstrated a slightly more intense preoccupation with their parents and the internal representations that these relationships evoked. There was also more demonstrated and reported interdependency between them and others, a greater need for the retaining of attachments and less emphasis on self-reliance than for other participants.

7.2 Participant results

7.2 a) Kreveshni (Participant 2)

Kreveshni was the youngest of the participants to volunteer for this study. At the time of the interviews she was completing her third and final year at University in the Faculty of Humanities. She presented as rather animated, verbose and very anxious during both interviews. Although there were times when she seemed highly emotional, there were also times when she gave the impression of attempting to assist the interviewer by providing as much information as possible. As a result there was considerable over-elaboration, which was predominant in the first interview. Despite this she came across as having a lively personality with an ability to find appropriate humour in situations and in her own exaggerated responses to her past experiences.

Adult Attachment Interview (AAI)

Kreveshni, who was still residing with her parents at the time of the interviews, fitted the adult attachment classification of u/d/E2 or currently unresolved/ disorganised with an underlying preoccupied attachment. She expressed a great deal of antagonism towards her parents and other family members and aspects of unprocessed traumatic experiences were evident in lapses of discourse during her discussion of her traumatic experiences. At times, excessively long, affect laden descriptions of her experiences were recounted. Her early relating with her parents and exposure to their domestic violence appears to have elicited states of extreme fear and resentment which lacked containment and remained unintegrated into the present. These were evident when she discussed her childhood with involving anger. During the interview she was often demonstrative of her angry feelings

towards her parents, at times addressing them in the present in run-on sentences which expressed her outrage and difficulty with regulating emotion at times.

...because I said you are impacting me so you need to make a decision and then she says...she says she doesn't know what she wants and she can't make a decision and...and...and I had a humongous fight with my mother which I never had before and it helped her because she didn't know where she wanted to go, and I said how many years is this you're avoiding the issue, you need to make a decision for my own and I said if you are not gonna do that I am gonna move out, I'll move out and go and stay with my uncle and I'm going because you're leaving me in this sort of toxic environment, If you won't make a decision that's sort of best for you, not for me I don't want you to...you always thought it would be best that we were together and that I had a father and I said that was probably one of the worst decisions that you made because you made it because you thought it was best for me and not for you and then you think now this child will pick up all these things and the emotions....

Kreveshni had moments where she blamed her present difficulties on her parents and other family members and although it is reasonable to assume that such experiences adversely impacted her frame of mind, there was a slight lack of perspective taking in her reporting, perhaps because feelings of trauma remained unprocessed and were therefore just beneath the surface and overwhelming for her.

I was never a happy person and had happy uh things happened and that was the worst in first year I deferred most of my exams I was in a terrible state I don't know how I'm actually going to pass anything and and...and I went through a lot of change and that's when I told my father off, and I told him why didn't you ever leave me...why, you know why did you ever leave me in this situation from childhood and It's made me the way I am, you know you say Oh why can't I deal with these social events but then it's created the thing and it was like...then there's a fear of men, I didn't date anybody until...and I haven't actually dated and I am very shy and I am sceptical and then everyone else my age is having boyfriends or at least is having a boyfriend for a while and it was like I was too afraid to socially engage. I don't want that sort of relationship because it will end up like this, I would rather be on my own and all of that became conscious It was all unconscious actions I was taking because of the fear that I had, very much that child fear, so I didn't want to do things which I liked because I was afraid of being around other people or letting them see my emotional side so it was very difficult for me to form emotional attachments or let them see my vulnerable side so even now, I won't let my friends see me cry so it's not something I feel I can do so I'll go away somewhere else and cry so anything emotional or upsetting I don't want to share that with others so and I went for therapy and I built myself up and now it makes me comfortable to talk about it whereas before I wouldn't even...I would run away from sort of a situation like this....

Due to her unprocessed emotions in relation to her traumatic experiences, Kreveshni seemed unable to be able to provide a clear, succinct evaluation of her childhood or to be able to reflect on the behaviour of others. As a result her discourse was excessively long, depicting violations of relevance and exhibiting past-present invasions as depicted in the above excerpt (Hesse, 2008). She also related examples of extreme behavioural responses to her experiences such as the utter isolation she imposed upon herself while at school, an

attempted suicide at age sixteen and a 'complete shutdown' during her first year at university which prompted her to seek therapy, perhaps initiating a move towards healing for her.

Some linguistic disorganisation was noted throughout the interviewing process which was characterised by unfinished sentences, restarts, hesitations and dysfluency (Hesse, 1996; 2008; Borelli, et al., 2012): "Hmm, he was very sickly and then he was in hospital, and then he went into a coma and then after a few days he passed and so the worst thing was he was...uhm...the hospital days were worse than the sort of funeral 'cos you don't...it's traumatising and uh...".

It became evident that to a certain extent, Kreveshni's sense of self remained connected to her fearful experiences with her parents. When asked what she would do when she was emotionally upset as a child she reported withdrawing further for fear of burdening her mother until eventually she could not contain her own distress any longer:

...you can't harbour all those feelings and not deal with it and I think the adult in me said this has to be over with maybe that's what made me be physically sick I was holding all those emotional things and I was a very sickly person, I used to miss a lot of school even up to matric very sickly, and I used to think it was all physical things, and I would have flu for a month and that was because I was holding all that stress and that frustration and anger inside of me and I didn't let it out anyway so I just carried it with me and I...I realised you know what I should have been happy, I'm an adult now why do I still feel like a afraid child? And that's when everything just sort of fell apart for me, I was at my complete lowest point ever, uh I haven't had one suicide attempt in...what age? 16, 17...It was after an incident and my uncle was talking to my mother and no one was with me and so I felt so upset that I found any sort of tablets I could take and I took them all and sent a sms to my father goodbye and he phoned my mother and said what the hell is going on and that's when they all rushed me to emergency....

Here Kreveshni described her struggle with somatisation of trauma and her acting out on her body of her own feelings of hate, destructiveness and need for revenge. In her descriptions of her early relationship with her parents it becomes evident that the domestic violence was experienced as a threat to the self and to protect her internalised good objects, Kreveshni often engaged in splitting and idealisation. For instance her father is described as being loving towards her but she failed to provide adequate examples that substantiated this position, only making an allusion to them going camping together. Evaluatory oscillations were also present when Kreveshni spoke about her father (Hesse, 2008; Borelli et al., 2012).

....he was affectionate, we went camping and did things it was just that irreconcilable, he was so loving and affectionate towards me and there was that sort of violence towards him and like he never perpetrated any violence towards me but I could feel that ...you know when you've witnessed it, you see it, you hear it, you feel that emotional pain you sort of have that conflicting sides and I think that still till today I have nightmares where I'm having arguments with him and I am fighting with him and he's being belligerent and angry with me and it's unconscious so I still have that strife

with him and with his mother and he won't go for therapy, I don't think he'll ever go, he's gotten stuck in his ways and he won't go for his own issues which I feel he needs to do, he needs to do he needs to recognise certain things but I don't know.

The use of splitting, as a defence assisted Kreveshni in managing her internal representations of her parents as did the idealisation, since through this she may have been able to preserve her internalised good objects and keep these from destruction by the bad, thus maintaining her relationships (Klein, 1932). Her idealisation of her mother was expressed in her description of her as being very compassionate, kind and very caring, very sensitive yet examples of this were yet again somewhat vague and most, although not all, were evident in her mother's relationship with others and not in relation to herself: "Yes, ...very caring very sensitive person, she takes on everyone else's burdens, she shouldn't you know my burdens or anyone else's so she would put herself last".

I had a bullying incident and she came in for me and spoke to this person for me because I was unable to do it and I could feel that whenever I had a teacher that was giving me a hard time or ... I think because I was also very sickly as a child so I didn't like school, I didn't want to go in so I wouldn't, there was many times I wouldn't go in....

Her brothers are not married and then they want somebody to cook or fetch or pick them up and it's like you know they are grown men let them do it themselves, and uh....

It seems that Kreveshni's mother could be protective of her and provided instrumental care when she was ill but was not often emotionally available to assist her daughter in regulating her own emotions and trauma. Instead she would seek this regulation from her daughter for herself instead after episodes of domestic violence, raising doubts as to her ability to be sensitive enough to her daughter's mental states of mind of terror and confusion at the time.

Role reversing parenting experiences (Hesse, 1996, 2008; Roisman, et al, 2007) were often described with Kreveshni's mother becoming emotionally distressed and requiring and eliciting containment from her daughter, who was young at the time.

Yes, so I think because my mother didn't have anywhere else to go, she used to cry with me, so I was small and she would be there in the room crying with me so it was a lot of physical from my dad and a lot of like emotional from my mom, not towards me but she used to give it towards him, and so it used to be always a conflict situation so you know if there is a conflict it's going to escalate into something bad and then I become, terrified and then I didn't have anyone to speak to about it because my mother never went to speak to anyone about it so it's sort of something that is harboured within myself and I kept quiet about it, so that's how it was for most of my childhood.

Psychological expressions or jargon, which are more characteristic of the preoccupied style of adult attachment also appeared throughout the script (Hesse, 2008) which may have been attempts at making sense of her own experiences:

I think it was, mainly a very depressed, pessimistic, upset person so it very negatively affected my identity, I didn't have a identity I was just that person in the marriage with

my parents, I wasn't even the child so I was just...it was like a three-way sick sort of marriage and I didn't have a sense of who am I and what do I like so I...I...my identity was very enmeshed with theirs so it was like...even their friends were my friends when they went somewhere, I didn't have anybody, It taught me to grow up quickly and sort of deal with things and yeah.

Given the repeated and most prominent characteristics of discourse and guidelines for classification of the AAI, Kreveshni was therefore classified as $U/d/E_2$. Most of Grice's maxims were violated during the interview and the coherence of the script was low with the participant showing frequent distraction with specific experiences and exhibiting an ongoing involvement with her parents and preoccupation with own affect.

However a more balanced image of the participant may also be obtained by focusing on the presence of tendencies towards health where Kreveshni clearly demonstrated that she did not identify with the parents' negative behaviour during the domestic violence and demonstrated a capacity to confront her parents and acknowledge her anger.

So I had to confront them and say look you're sort of damaging my life it's not because, because I put it there it's because of the experiences I had and it was very difficult to confront my parents about how I felt about these things and uhmm that they hurt me and that I was angry with them and to express that... so it was very difficult, ja, but I'm glad I did.

There is also evidence of a capacity for a more balanced view in terms of her perspective of her father's violence and although this position is not dominant in the interview it does suggest the potential for movement towards a healthier, more integrated stance able to set parental figures within their context despite their negative behaviours.

I don't know if it will help but maybe just some background into that, but It's physical violence, he used to beat her, and that was because of uhm his father used to abuse him, used to physically abuse him, so it's uh he inherited that from his childhood where he had a very violent father and then his mother sort of naturalised it made like ok, this is fine, it's acceptable, so he grew up with that: I don't know if it will help but maybe just some background into that, but It's physical violence, he used to beat her, and that was because of uhm his father used to abuse him, used to physically abuse him, so it's uh he inherited that from his childhood where he had a very violent father and then his mother sort of naturalised it made like ok, this is fine, it's acceptable, so he grew up with that....

Kreveshni also demonstrated an ability to speak about her own imperfections and took responsibility for her self-imposed isolation in childhood.

I think I isolated myself so if there was possibly somebody they were not drawn to me because I was just so afraid, I was afraid of other people, and I never really made friends and sort of made myself a target for bullying because they could see that insecurity and uhmm so it was quite bad and I think because it was so traumatic I can't remember a lot of my younger...because when I speak to other people, they seem to remember age 6, or 5 or ..I can't even remember age 11 but...and I think that is because it was so traumatic the experience of living in our household, where that was happening I mean I

think I just pushed it out of my mind and I don't really recall much of childhood positively.

There is clear evidence of a lack of integration of polarised internal objects which maintain Kreveshni's perception of the external world as predominantly dangerous and potentially annihilatory, but there is also an indication of a desire to make new connections and to establish more stable object relations. She was also capable of acknowledging the adverse effects that her childhood experiences have had on her although these were sometimes coloured with extreme phrases such as 'this is going to carry on until eternity' and 'oh my gosh it basically affected everything, I didn't have an identity until I was sort of 19, 18...'. The image depicted is that of a young woman who is taking steps to come to grips with her experiences of childhood and who is still working through her internal trauma.

Sense of Coherence (SOC)

Kreveshni's global SOC score was 101, which fell below the group average and is also one of the lowest in this particular sample. She appeared to experience difficulty in ordering information and conveying understanding of her feelings and experiences. Her comprehensibility score was 27 and one of the lowest scores on this scale depicting undifferentiated answers and a sense that events were not reasonably predictable for her. Kreveshni was quite aware of overestimating or underestimating occurrences (Question 26, SOC-29) and therefore of lacking proportion in her reactions at times. There were indications that she sometimes felt alienated from people with whom she was in contact daily (Question 3, SOC-29) and that she may have experienced difficulty with tolerating some of her own emotions (Question 21, SOC-29 to which she gave a 2 as a response).

Because domestic violence essentially created disregulated mental and emotional states in children (Lieberman, 2007) the individual may lack the opportunity to process the trauma experienced after being flooded with fear, anger and anxiety. This was well illustrated in her statements where the impression was created of a child left alone in the chaos of marital violence:

I felt like they were so consumed with their own dynamics and their fighting they were so consumed with their clashes that I was so lost in the chaos and no one even thought about me and they used to have these moments of like engaging craziness and my mother would come cry by me and then it would be like the next day like nothing happened and then I used to be like, what is this, is this normal? Is it not normal to have this uh...thing and you like can't really speak to other people about it so they have a violent clash and the next thing they're like nothing happened...and so you're sort of lost in the flow, it's like what about me you know no one ever speaks to me about this to ask how I feel and uh...so no one ever directly approached me or spoke to me about it 'cos not even my uncle was telling me you can't but no one would speak to me they would speak to her so they speak about me but not to me so it used to feel like I'm the invisible person in that no one is actually speaking to me.

Kreveshni was also one of only two participants who would directly attempt to intervene in the conflict between parents in order to protect the maternal figure thus incurring some mild injuries. This would often lead to body boundaries being transgressed and to the intensifying of the trauma, perhaps negatively impacting her ability to cognitively process it. Her earned AAI classification of u/d corroborates her lack of coherence of mind, compromised emotional regulation and the diminished ability to think about and order these traumatic experiences years later.

Her Manageability score of 42 provided an interesting depiction of how her ability to draw upon resources in her environment had changed. Kreveshni indicated that she did not feel unfairly treated in the present (Question 9, SOC-29) and that in her opinion, solutions could be found to painful things in life (Question 13, SOC-29). She indicated that she had adequate resources in the present but this was not always the case in the past where there was low co-operation from external sources (Question 2, SOC-29). Once again this was supported by statements she made during her interviews, for instance when asked who she would go to for help as a young child Kreveshni stated:

Oh nobody, so I used to go somewhere isolated and cry and I'd ...I think I ...I just knew that I don't want to burden my mother with this so I would never be upset because she 'd be upset in front of me so didn't feel comfortable speaking to any family member or any friend so I just didn't so I just used to cry by myself and then say ok cry yourself out then pull myself back together then carry on so that's how I was functioning for a long while and then all of that was held inside me and had...had to eventually explode at some point....

But later she is able to draw on the support of others and entered therapy:

We actually spoke to our GP who knew of our situation and she said 'look I can recommend a psychologist to you and uh...and the psychologist was really, really good, we clicked well and I was already doing first year psychology at the time so I had a sort of inkling of what it was and I was enjoying it and I spoke to her and she said you know...and she really helped me, she helped me through a lot of things.

With regards to meaningfulness Kreveshni achieved a score of 35 suggesting that she was capable of engaging emotionally with the world and that life has clear purpose and goals for her (Question 8, SOC-29). She appeared to have a found a way of beginning to confront challenges and believed that life was worth the investment: "You are going to have unhappiness, you can't be sheltered your entire life, not everything is going to go your way, so how to pick yourself up and say I can actually...this is not going to debilitate me...".

Since Antonovsky (1979) considered this to be the most important component of the SOC, it becomes significant to note that despite not fully understanding or being able to cognitively order the traumatic events in her past, Kreveshni appears to find satisfaction in her life and this may provide her with a platform to greater understanding and individual differentiation as she develops.

Psychoanalytic Research Interview:

Kreveshni: Lost in the chaos

Kreveshni's childhood environment appears to have been one where not only did her parents fail to provide a holding space (Winnicott 1960a) where emotions were understood and contained but where they also created an environment where frightening mental and emotional states were elicited through consistent exposure to domestic violence (Herman, 1999). Cumulative trauma, in Kreveshni's case, seems to have led to "emotional upheaval" or poorly modulated emotions where there was no adult available to assist her in managing her intense anxiety, fear and anger. The image created was that of a child who was drawn in and became too involved in the marital strife sometimes adopting the adultified role of 'referee' between two emotionally dysregulated parents.

Kreveshni demonstrated slight moments of regression as she spoke of memories of the domestic violence occurring in front of her, as a small child, which remained vivid, almost as if these were happening in the here and now. These moments were suggestive of unresolved experiences of trauma which she had been exposed to:

...so I think it was just you see these things happening to your mommy and you want it to stop, so about 5, 6, 7 small so I used to cut in between and there was like this little person there and it was just, it was sort of uhm...I tried to do that and as I got older when things started going that way I used to push it away, say listen I'd push my father away and say go, go to your mother's house leave now, you know.

She also was capable of reflecting on the effects that the exposure to domestic violence had on her incapacity to relate socially to her peers:

I had a good relationship with them[parents], but obviously because of the domestic violence it made me very timid, very quiet, I was quite withdrawn...so it was my father that was physically abusive to my mother, and I was a very quiet child who was bullied a lot so childhood is not very happy memories for me, uhmm I think I was very affected by my social situation in a way where I couldn't interact in other situations so I was very reserved and bullied like right up to high school.

The experienced difficulty in developing coherence of mind which was depicted in the text of both interviews, may have been exacerbated by the intensity of the domestic violence and its frequency, leaving no room for respite in a child already emotionally vulnerable. This is suggestive of difficulties with clearly identifying and processing her internal and external world. For instance, there were times when Kreveshni attempted to explain her state of mind but inevitably this came across in a confused, vague and unclear way, with contradictions or sudden changes in focus from speaking about her father to suddenly speaking of her mother. Oscillations in how she perceived her mother were also present, with the weak mother being a role of the past but then being simultaneously also in the present:

Ja, it was like...I think maybe just reliving all those emotions put me in a bad space where I couldn't physically think about the father at home right now, because my mind was stuck back then, and so I couldn't...and even with my mother I needed that weak, that emotional...because that was the mother of that time or in this, I could say...that first year which was like 2011 after that it's changed, it's not a big span of time but it's...it has been for me you know, yes.

As the quote above demonstrates, she was also aware that 'reliving emotions' in the past had affected her ability to integrate her mental representations of her parents.

Early object relating

Kreveshni's preoccupied anger towards her parents suggested that these relationships were very much at the forefront for her and may still have confused her:

...see the roles changed a lot of the time sometimes mom was rescuing me and sometimes I was rescuing her so and sometimes even I would be perpetrating especially in that uh, specifically where I was very angry and I was making things more difficult in sort of trying to antagonise them, which said look this is because you did it I...I'm like this because you did this so, sort of to exacerbate things so the roles changed a lot so it made it very confusing because I didn't know who to feel sorry for and that whole sort of thing as I said, who am I, who are they, I'd sometimes feel bad for like my dad and sometimes feel bad for my mom and she used to be sort of a verbal perpetrator, where she uh, would push her point, she would poke you, poke you, poke you till you act, she was waiting for you to act and she uh, she's uh...pushing you, she's pushing you....

This appeared to be especially the case with her internal representation of her paternal figure where there appeared to be a clear split between the anti-libidinal father of childhood and the libidinal image (Fairbairn, 1952; Rubens, 1994) of the current father who was more open and less frightening. These two images may still have been difficult to integrate and to hold simultaneously. Kreveshni commented on her own disparate view of her father during the second interview and this suggested that since she could consciously notice and comment on her split views of him, she may have been progressing in her ability to integrate these representations:

...the other thing that struck me was it was so difficult in the interview [AAI] to convey positive feelings about my father, when I am at home and I am with him I said I wonder why I actually didn't mention this or that because in the moment I was so caught up with the otherness that I...it was like he was...the father (fidgeting with her left earring) that I know now was completely blocked off because of the father I was remembering was the father of many years ago and not the father I have now. So it was...I said oh wonder why I was struggling so hard to think of good things about him now we're having such a good time we hardly fight about anything.

This comment, made in the second interview may also have been due to feelings of guilt that she may have experienced due to feelings of anger and hatred that she had expressed in the first interview and she may have wanted to repair damage done to the image of the object. Her mother seemed to require considerable emotional caregiving from Kreveshni as a child and pathological role reversing experiences between her and her mother were

particularly marked and apparent. Kreveshni described her sense of confusion in being caught between two parents whom she simultaneously needed but was afraid of and very angry with.

Ja, it felt for me though my mother was always a person who ran back to him and that made me very angry with him to say why do you stay back with him that ...that uh, you have this argument where you say these things and then we have this great, angry resentment but then like in a day or two come crawling back home, it's not even giving me time, separate...uh, crawling back home and deal with it, be quickly like come back together so ja.

It is possible that in flooding her child with her own emotions and defences, Kreveshni's mother was able to return to the marital relationship leaving her child holding onto unresolved affect and mental confusion, unable to organise her own experiences.

I...I...I think I took much longer to process things, if they had an argument I would remember it weeks afterwards, where days afterwards they had forgotten what it's about so it affected me much more significantly than them so if they had a argument (hand closed, palm up but almost a fist, gesticulating while talking) in the middle of the night I could hear it and it would stay with me and I couldn't sleep and so for them it might have even been a minor argument of no significance but it affected me very emotionally and I thought this is going to be terrible and it's going to escalate and it's going to get worse.

To maintain her good maternal object Kreveshni idealised her mother and denigrated her paternal grandmother to whom she attributed considerable blame for her father's violence.

So currently right now I don't have a relationship with that grandparent [paternal grandmother], I don't speak to her at all, I sort of cut off all ties because she sort of made it ok for him to do these things and yet there was specific incidences and I used to call her and she wouldn't come she would almost make it seem ok for him to do this, she would support him in his actions and then not let uh not sort of say-look what you doing is wrong and almost used to encourage this negative action because she never liked my mother, and so I think I feel more hatred towards her than my grandfather....

Yet again the good maternal object was spared and protected in Kreveshni's libidinal view and the evil, neglectful mother, represented by her grandmother, was hated by her antilibidinal self. Kreveshni had several times in her childhood, attempted to enlist her grandmother's assistance as a rescuer in stopping the domestic violence but she had refused. Since help was withheld, this may have further exacerbated Kreveshni's perception of her grandmother as fuelling the violence between her parents and supporting her father in his hostility. The internalised representation of the grandmother as a persecutory object who refused rescue and relished the pain and anguish of her mother was therefore possible, explaining why Kreveshni refused contact with this member of her family and had completely distanced herself from her. Through marked splitting, Kreveshni may then have cut off access to this bad object with a sense of diminished guilt for her own rejection of her grandmother.

Unprocessed Trauma in a dangerous world

Residual unprocessed trauma remained evident in the intense states of distress which Kreveshni still experienced when exposed to topics or images in the media pertaining to violence:

I can't...when I'm watching those things I can't ...I can't take it as much as other people so I can't watch horrors and violence, if it's too close to home I really can't watch it but now I'm able to maybe face it a little more and maybe if I say you know this movie made us think...made me think about us and we'll talk about it...before we wouldn't say this is us we wouldn't relate it back so it's a little more ..I'm having the same feelings but I'm more able to discuss it now.

The unpredictability of domestic violence had led Kreveshni to expect destructiveness out of marital arguments leading to anxiety, fear and apprehension being experienced as a child: "So then I don't know, are they going to be tense, the next day are they going to be fine, how should I react, that sort of thing which is much worse, a situation like that".

The potential for the world to become dangerous and persecutory was intensified as bad objects were internalised and threatened to surpass the good, more benevolent ones thus impacting her ability to socialise and fostering an internal fear of the world. Danger was then projected socially as internalised destructive objects were split off and projected onto others.

Yes because I could feel that paranoid fear of being in a place where there's so much people uh once we went to (shopping centre) and there wasn't room where...I could have made space but I felt so panicked about trying to push someone away that I came out and in the end it was all emotional and my mom said what are you doing and I actually had to...I just went outside and I started crying but it wasn't uh... it was the social situation it put me in such a anxious feeling like a child in a playground all alone and it as very frustrating, I am a adult I should be able to do such...like I can't phone people or answer unknown numbers it's so terrifying to me I still get a bit iffy so I...talking to people or asking things I find my main method of communication is e-mail because I'm fine with writing but talking is a whole other level, so still have that, but not as bad I can communicate with people and they don't see me as so subdued anymore, might still be quiet and shy but not as subdued with one person if we go to a social event I won't engage with other people.

In tandem with this persecutory world view was the sense of not being understood by others which evoked anger that was depicted in a defensive stance of "...they don't understand my emotional pain, 'cos I have people around me who do, so they can bugger off".

On the other hand there were times when Kreveshni understood that she was exacerbating her own pain and that her outlook was not always balanced in her slight distortion of reality:

And I just sort of take my own responsibility, can't just say you know blame mommy and daddy you know, so it's not my mother's fault I had to say you know what I've also reinforced these things where I've let my own fears and uh...things drive me where

some of them were not necessarily derived from the parents but I...I had a more pessimistic nature and I encouraged it in myself because I said this is more realistic to the way the world is and the sort of hopeful, happy cloud land and my mother's just completely wrong she's just in la la land, whereas what really is true is that everything is quite terrible and people just don't want to acknowledge out of fear and hopelessness, so darker.

Yes, I even found that sort of when I did that English Literature I found that I went back and I looked at things and I said oh my interpretations of things was so negative and dark everything was so bad there was no positive (laughter) so it reflected a lot of me in my work you know what it wasn't like the normal person's perspective where they take a little bit of this and that it was all bad in the most possibly worse interpretation that can be made I had made out of the work.

She was able to reflect that she coloured the world through her own expectations and how her internal reality may not have accurately reflected, but rather may have, distorted her view of external reality. In her paranoid schizoid position she was able to vent some of her most destructive parts:

I felt the most helpless where I, I...I...I even once sai...said you never had a happy moment and my father was most shocked by this and he said you were never happy and I said yes so it was almost like I was trying to prove to him you made it very unhappy for me not that there wasn't happy moments but you made it so unhappy for me that the happy moments were almost overshadowed so...uh...it was much, much darker even in that space I couldn't uh...uh...in retrospect even look back at things and look at it positively everything was...I looked back with terribleness and I couldn't see the positivity even if it was there so everything was just viewed as being terrible and even if I had to look back at my past I couldn't see anything positive, not even hey this part of my childhood was good, this support structure or I got to do that, you didn't see that it was just the worst for me, everything was terrible.

Despite this, there were also glimpses of movement towards a more depressive position although these were not prominent or maintained in the interviews, but never the less provided a sense of her own striving towards inner balance: "Yes....and that is what was also my part, I didn't want to acknowledge my happier moments, I said you know what things are not as bad as I perceived them to be and it can get better, I had a bad view of the past and I had a bad view of the future".

And

Yes, it's much more hopeful (intonation higher here) I feel there's still a lot of trepidation, I feel fear ...things but I'd say I have a much more hopeful future and I have ambition and uh...it's...I want to try for things and I want to see can I do it, you know I have dreams again and I never really had dreams where it was like uh...I never wanted to achieve anything 'cos I thought I never would so it was just this sort of monotony of doing what you have to do whereas it's now I say oh I have a dream of hopefully one day I can do this because I really love this or really like this.

Defensive organisation

Despite the presence of extreme behaviours (isolation, psychosomatic illnesses, a suicide attempt at age 16) suggesting that she was not coping with her family life, Kreveshni reported that her parents were surprised at their daughter's 'breakdown' in her first year of university. This suggests a lack of mentalisation with regards to their child's emotional and psychological state as well as denial of the situation at home and its consequences, perhaps due to the guilt elicited in their complicity of maintaining the domestic violence. This also elicited some incredulity in the researcher which perhaps mirrored Kreveshni's own disbelief at her caregivers' lack of attunement and sensitivity to her as a child:"...and it was also confusing to my parents, what is happening to me, so I...my whole perception of everything was much more darker and frightening so much more..."

By extension, Kreveshni sometimes also failed to contemplate the mental states of others when she demanded that her father confront his relationships of childhood, which included exposure to intense violence from his father upon his mother. This may have elicited terror which may be synonymous with a lack of robust internalised good objects given his own propensity for violence in his intimate relationship and consequently lack of emotional regulation:

I had a more self-awareness even in the most terrible state I had a more self-awareness about my situation and this sort of why I'm acting but he was more uh...repressive of his past and he still maintains like you know in the later years his relationship was good with his father but I still feel like well you didn't confront this issue between you so how good was it really? You're just trying to make yourself feel better and say the relationship was better and he was gone, you know so I said did you actually ever sit down and talk about this problem? He did not, never, and uh...still now he's...and I...I had this thing where I felt like I needed to push him to self-realise....

Although the need for confrontation of the past was her own, it appears to have been imposed upon her father perhaps as a plea for resolution and acknowledgement of the pain caused. This may be something that neither parent may be able to provide her with, despite her direct approach with her father and her appeals for caregiving from her mother through the somatising of pain. Previously, psycho-somatisation of illness provided a reprieve and a plea for comfort as an opportunity for caregiving from her mother was afforded. This seems to have been one of the few ways that Kreveshni could obtain the solace and reassurance from the maternal figure:

Yes , I almost felt like if I had physical pain it would make it more real whereas emotional pain is not real and I couldn't express that but if I was sick my mother would be there to comfort me but if I had a emotional pain not really, so I projected it into the physical to seek that comfort and to get that sort of recognition from people, you know if you have high blood or diabetes its more accepted by people, you tell them of depression they're going to start stigmatising you so it's more like you say you know I got the flu or an infection or pneumonia but if you were to have...they'd think you are a

nut you have some mental thing you know maybe they'll just stay away from you so, stigma.

However the use of illness in eliciting mothering, became insufficient in her first year of tertiary education as her defences were unable to maintain her anger and hatred under control while simultaneously maintaining her relationship with her parents. Whereas previously she could maintain her academic performance, in her first year of tertiary education she was no longer able to do so as intense mental states of rage, pain and hatred surfaced:

....it was that initially that sense of confusion but I've dealt with this for so long you know I had deaths, I was younger a teenager and more fragile identity cared more about what people thought and more self-conscious, why is this affecting me now? So it was that very uh great sense of confusion and I said oh before I could hold myself strong and deal with this and then still carry on with my life and a day or two after uhm get over myself whereas when if something happened I sort of all flopped out uhm and I was a person that didn't want to cry at home and I held myself from crying and I used to say okay you didn't cry and I'd feel better, then I was in that first year I was more quick to cry and cried longer and harder and more painfully and have more emotional breakdowns and if I had awkward social situations I didn't just feel anxiety I felt pain so it was (gulping) all those things that I felt them much more worse, things felt much more acutely.

Yes, I think I carried all those emotions from childhood I didn't remember specifics or details or specific memories but I carried that emotion so the emotion in me is very childlike, very primitive, so.

In the latter statement Kreveshni was perhaps describing her regression to an earlier, possibly infantile rage. Her rage appears to have been activated by the bad object that withheld, that could not meet the child's dependency and the fear of annihilation that acompanied that, of not being able to survive without the object or of neediness overwhelming the object. Possibly neither parent could really meet her neediness, seeming too busy with their own difficulties but she remained aware that she still felt those childlike states of mind in her first year of University. It was at this point that a form of developmental arrest became expressed in lack of continuity of being and in stuckness, and she seemed to make contact with her true self (Winnicott, 1960b), perhaps for the first time, through her anger and hatred.

A nascent sense of self

Although Kreveshni did present as anxious during the interviews, she was rather verbose and outgoing which was notably the opposite of her description of her social self as withdrawn and reserved. Trust in a world that is a relatively good place where everyone is not necessarily persecutory, was damaged and perhaps a false social self-developed for self-protection. This caused her to withdraw and her isolation was exacerbated and became pronounced in other social contexts. In her predominantly paranoid-schizoid view of the world, Kreveshni experienced difficulty feeling inner safety and trusting others, with whom

she could not express her true self: "...the sort of scepticism of the unknown and other people or you know what they are just going to disappoint you and be the worse that you can't really expect any good out of them".

Despite the beginnings of differentiation having been initiated, Kreveshni appeared to still be attempting to separate her identity from her parents and this was a process which she had begun but which was not fully achieved as yet. When speaking about this process she used the pronoun 'we' meaning her and her parents: "I understand what they're going through and say you know what, the same thing we're just one step ahead **we're** not like out of the race or we're not like, we can't judge you oh we know what's going on but **we've** done this and this has helped us maybe try you know."

This process of separation differentiation may have been further hindered by her enmeshment with her mother who was perhaps perceived as not being strong enough to withstand her child's needs for independence and differentiation. Kreveshni was therefore unable to fully separate from the object without feeling as though she could destroy it. She also appeared to be partially aware of anger towards the maternal object that this elicited but she seemed to fear overwhelming her mother with her own needs. She may therefore have experienced difficulty with mourning the emotional unavailability of the maternal object: "Stronger voice but not as strong as it is with my dad now (quieter tones) now I'm more...have a stronger voice with dad where I can tell him something **but with my mom it's still a little bit of a struggle** but not so much where I feel like I don't wanna make her upset but uh...".

What is perhaps poignant here is the sense that as a child in pain, she battled to separate and develop a stronger sense of self, perhaps alluding to a lack of mirroring by parental figures who reflected their own defences and terrifying affect back to their child instead of being able to think about and help her manage her emotions and states of mind. The child's sense of self requires in essence, that she finds herself in the caregiver's mind before she is able to feel real as an intentional being (Fonagy, 1999b). This appears to have been an area of development that was compromised.

The search for identity and security was also represented in her loss of her grandfather, an object equated with support and love. Kreveshni's grandfather provided a buffering role in that he was emotionally available to her in childhood and she related often having the opportunity to discuss her feelings about the domestic violence with him. His loss when she was just twelve years old left her feeling alone and unprotected:

Yes, I...I....I think the main thing as that I have more to relate to now as an adult and he's not here, where he tried to teach me about writing Tamil and I didn't want to learn and now I'm desperately trying to learn my own language 'cos it's good to know your own language and now there's no one there to teach me because my...uh...he had an interesting thing with his kid where they spoke in English and he spoke in Gugarati so I never learnt 'cos it was very confusing and uh, so now I have no one to teach me and

I'm looking for that and I said you know if he was here he would have taught me and the sort of things which I knew he would have understand and my mother wouldn't. And he was...he was the I would say sole artistic figure in the family....

Kreveshni seems to have used intellectualisation defend against her need and longing for her grandfather which distanced her from her feelings of loss, grief and mourning. These feelings may have been experienced as too painful to fully acknowledge as yet and as making her vulnerable, against which she defended throughout both interviews. When asked specifically about her feelings of loss she spoke about culture in a detached way and seemed unable to engage with her affect in this particular sphere.

Yes...I feel like I lost a opportunity and uh...and uh...he wrote poetry and ...and...uh...there's so many things that I'm now going through where like especially in terms of let me put it this way, artiness, and uh...and in terms of like Indian culture it's like become a lawyer, become an engineer, become a doctor, there's like nothing else, though my parents are open, they said you know what, do whatever you want to do and I was the one that was feeling that society put pressure like or Architecture and I got in you know should I do that? But that wasn't my love I enjoy reading and writing, so I said I mustn't think of myself as less intelligent or lesser for doing this sort of BA.

Adult Attachments

There was also evidence that capacity for development of current attachments had been impacted by her experiences as Kreveshni intellectualised fantasies about romantic connections but seemed to still feel too frightened by the possibility of engaging in real intimate relationships:

I couldn't imagine having conflict and getting past it so I couldn't imagine what if things are not right because then it will never get better so now it's more of a realistic ...you know I'll probably argue, get irritated we're gonna have fights and disagreements but it's going to help us grow and be closer together it's more of a good thing now whereas conflict was always bad for me, always bad it was never something that had good conditions now it's something...now conflict is something that good can come of conflict.

When asked about the possibility of a relationship with a man she stated:

No...no, I'm sort of in the intellectual radical sphere where I'm a very radical feminist so I much...uh, feminism is a particular favourite topic of mine, so I'm, I'm much more for equality, and before it was much more anti-men whereas now it's more about equality also with regards to men there is a sort of domestic violence perpetrated against men and is not taken as seriously as one against women and sort of homosexuality and that sort of thing and ideas of masculinity so it became a point of intrigue for me, it started out of anger but now is a point of general interest.

In intellectualising, Kreveshni was able to maintain emotional distance from the possibility of a relationship and also projected her own fears onto her friend: "On an emotional level I can see where my friend is...she also has father issues and that's where how we sort of

came...her father is not at home, and he left the family and doesn't really pay any more...she shows anger towards men sort of...".

Her ambivalence towards romantic attachments was also expressed in her fear of being dominated and made to feel powerless in a close relationship and intimacy may have posed a risk for her which she was not yet ready to take: "Also I need someone I can talk to, and we can chat and uhm he must be open to things because I'm very open to things where I can look at different things and even if it's not ideal I can see the value so I can't have someone that's staunch who is, so it's my way or the highway".

Rationalisation also featured as a purposeful avoidance of intimacy when Kreveshni commented on her 'readiness' for connections being thwarted by the inevitable lack of prospects. This portrayed some of her difficulties in contemplating the benevolence of male objects: "I'm not meeting guys, I want to date now and there are no men it's like (laughter from both) before I was shy to men there were opportunities that I missed and now, now I'm looking for them and they're so scarce and where are the good men gone you know maybe they never existed".

Transference and Counter transference

Due to over-elaboration and the amount of information given, the researcher often felt tired and as if she had lost sight of Kreveshni's original point. The barrage of information and repetitions were felt to be a defensive warding off of Kreveshni's own conflicts and a result of the mental confusion she must have felt and which she was evoking through projective identification, during the interviews. The details were perhaps a way of hiding her own feelings and of simultaneously giving the appearance of openness, when in reality this seemed to be too frightening and not viable due to the confused states of mind that she may still experience. The excessive detail offered may also have been in her interviews as a response to her fears of being judged by the researcher, and not being able to readily trust, she may have been trying to fill the space and 'convince' the researcher of her perspective.

It remains evident that Kreveshni's childhood experiences have negatively impacted her in several spheres of her internal world and adaptability to the external environment. Her anxiety was at times palpable during interviews eliciting therapeutic responses from the researcher in attempts to contain raw and unprocessed feeling states which were difficult for the participant to tolerate.

Despite this there are also traces of a deep search for integration and a lively personality who uses humour to connect with others and to make life more tolerable. Perhaps it would be relevant to conclude this participant's analysis with one of her quotes in which she manages to express her anxiety and fear of scrutiny in a rather amusing way: "I was afraid you were Freudian because maybe you had children questions and I thought oh no, you're Freudian and you're analysing me...(laughter), my childhood my entire life".

7.2 b) Jane (Participant 5)

Jane first contacted the researcher at the end of 2012 indicating a willingness to participate in the study. She mentioned that she had grown up in an environment of domestic violence and was quite ready to talk about her experiences. She was enrolled for a postgraduate degree, was married and was expecting her first child in the early months of 2013. There appeared to be mixed feelings regarding participation in the study and she seemed to alternate between curiosity and reluctance. Jane was pregnant at the time and it is possible that this stage in her life was eliciting inner conflicts about dealing with the past but also some resistance to doing so due to the possible revising of traumatic moments. The researcher therefore contacted Jane via e-mail a few months later, in the new year after she had given birth. An opportunity for her to abandon or re-engage with the study was provided via an e-mail and she persevered, eventually booking an appointment for the first interview.

Jane was felt to be warm and open from the beginning and rapport was easily established. The researcher was somewhat concerned about conducting the interviews with her, so soon after the birth of her daughter (12 weeks) and was very much aware of her own anxiety in this regard. Thought was given to the fact that she would probably be feeling quite vulnerable and mentally and emotionally preoccupied with her baby. She was none the less motivated to participate and was easy to relate to and accessible. Jane chose to bring her infant daughter with her for the second interview and the attentiveness and responsiveness between the two was at times quite absorbing and fascinating to observe. Jane's responses were natural and unrehearsed and her sensitivity to her daughter's vulnerability and the potential impact of childhood was quite marked. Since she was a professional in the health care field, this was felt to be expected and not out of the ordinary.

Adult Attachment Interview (AAI)

Jane's adult attachment classification is F_4b/F_2 or demonstration of a secure style of attachment expressed in the valuing of relationships but with a preoccupation with attachment figures and also with past traumatic events with parents. The sub-secondary classification of F_2 refers to repeated instances of dismissive attitudes towards attachment which were not dominant but were significantly present throughout the interview. Overall Jane's discourse was coherent with demonstrated ease with remembering past attachment experiences (Main, et al., in Betherton & Waters, 1985). Expressions of caring and of valuing of attachment were quite prominent throughout the script as evidenced in her need for others and missing them or being missed by them. Discussing her relationship with her deceased grandfather:

Ja, like I wish 'cos he [deceased grandfather] used to always try to read Afrikaans to us he always thought that bilingualism...so we're very English, very, very English, but he always thought that bilingualism was important so he used to take us to the library and make us read Afrikaans books which I used to hate you know I was like 8, c'mon come

let's read English and uh since...so I wish I had given him the time of day that kind of thing you know.

Discussing her relationship with her daughter:

Ja so I suppose that I don't believe in my heart of hearts that anybody can do as good a job as I can as a mom so when I leave then I am filled with this terrible maternal guilt 'cos, 'cos then I leave her and I've left her with a nanny and I know the nanny is very competent and she's had how many...she's looked after 10 children now she knows exactly what she is doing, far more than I but I still don't think she'll do as good...she'll probably won't do as good a job as I could do as a mom, uhm so I almost I'm worried that she misses me I suppose I miss her terribly as well.

Jane did demonstrate a particular preoccupation with her mother's attitude towards her as a child and she was particularly concerned with attempting to understand her mother's perceived emotional remoteness and 'social aloofness' during Jane's childhood. Jane's preference for her paternal grandmother remained unchallenged by her mother and was a factor that Jane still struggled to identify with, given her new status of motherhood and her strong commitment to this role.

She was quite....so I suppose I only remember...really realised she was consistent in hindsight but that would be my instinct that if my mother-in-law was so overpowering over my kids and my kids sort of gravitated towards her and what she wanted the whole time, I would try and pull them back, and I don't ever remember my mom trying to do that she was always just- this is who I am and this is the role I have, and this is how it is so I suppose she was quite consistent in that regard, she was always consistent uhm around rules and she...she was a good disciplinarian and in hindsight, you know she wasn't a psychologist, but she used to do it very well for us so when wewhen we'd done something wrong we had to go and think about what we'd done and then think of a good enough punishment...

Overall, Jane demonstrated a sense of balance when discussing difficult aspects of her early attachments including how these have impacted her and she demonstrated forgiveness for her parents, contextualising their experiences as a couple (Main et al., in Betherton & Waters, 1985):

I think it was a bit of a this is not how we wanted life to be, like they were young, they were fooling around, and they fell pregnant and they were almost prematurely accelerated into a state of life that they weren't ready for and then when ...so they...so you get over that and then about 5 years down the line you think to yourself flip, this is actually not what I want, like I don't...I wish that I finished varsity I wish that I was in a different career I wish that my life wasn't....and so they were just frustrated in their own circles, they probably weren't even compatible relationally if I could say that really, given other circumstances they would probably never have got married but because my mom was pregnant they had to.

Uhm...how, ja I wonder how.....well I know for sure that I won't hit her [infant daughter]...uhm...in...in other ways though I would really like to be like my dad is to her so ja maybe, good and bad, like I won't do what he did wrong, but I'll try very hard to get it right.

There were also times when she expressed collaboration in dialogue (Hesse, 1996, 2008), picking up cues from the researcher and pre-empting what kind of information was required. In this case, she was clarifying differences between her parents' styles of relating and assisting the researcher in understanding her parents as social individuals who differed from each other. From the researcher's attempts at following, Jane realised she needed to better explain the differences between her parents as she perceived them.

P: ...maybe because she's so routine and organised like, you know.

I: Ja, ja and very straightforward with her discipline.

P: Ja.

I: ok so...

P: which I suppose in some ways contradicts...'cos I've said to you she's quite socially aloof but she is quite socially aloof even though she's....

I: Organised?

P: In other ways ja. ... no, where my dad has got lots more friends, my mom has got mates from work and stuff which she has but dad has got long term friends and he'll...he'll take his shirt off his back for anybody, he's always mates with his cousin he's always got these bloody things we've got to go to, be with his cousins and stuff whereas my mom doesn't really have that, she's like well if you're not prepared to invest in a relationship you know what I'll move on, so.

She also expressed autonomy of mind when clarifying certain points. When describing her mother, Jane qualified exactly what she was struggling to understand about her and challenged the assumption made by the researcher that she was classifying her mother as 'dependent':

P: ...she manages her life quite well you'd never say she's like you know a shrinking violet that needs to be...so I don't know if it's like an unconscious dependence.

I: And so what would be an example of her being that way that you could remember or...

P: No, no that's the irony that I'm saying it's an underlying trait because she doesn't come across in personality as being dependent but in hind sight when I look at their relationship...why didn't you get out?.

Evidence of some meta-cognitive monitoring (Hesse, 2008) was also present in Jane's ability to reflect upon her own thinking processes and in her awareness of simultaneously holding differing points of view. "Which I suppose in some ways contradicts...'cos I've said" and "Ja, shame, it's hard to think about it".

In Jane's narrative, there were some moments of movement into the present where present relationships with her parents sometimes intruded queries regarding her early attachments and the presence of psychological jargon was also noted, although given Jane's occupation

as a healthcare professional and her search for understanding of her own past experiences, this could be considered appropriate under the circumstances.

So, I was thinking about this, this morning, I found her quite dependent, and it's horrible to think about it like this but my dad used to treat her so badly and she would never give up on the relationship, and I, now....she would say that they got through it because she wanted to stick it out for us kids but I wonder whether if it never got that bad that she wanted to move out, I suppose she did a few times but she never cut dry completely or whether she was just dependent on...couldn't let go of the relationship because what did she have if she wasn't married to him or the other part is that she was fiercely loyal and defensive of us and she didn't want us coming from a broken home so she stuck it out because of that and you know it did get better, now when you look at my parents you would never say that there was all that stuff going on then, they get along very well now, I suppose their kids moved out but...ja so I don't know if dependent is the right word or defensive but that's the characteristic of her that she...or loyal, ja.

So I remember just being too ashamed to cry almost...and you know in hindsight I think it was that I was the emotional container of other people's...I was like I will not cry I won't....

These indicators, however, were not maintained throughout the script. No derogation of parents was evidenced although role reversing examples were expressed in occasions when Jane would attempt to take care of and distract her sister from the ongoing sounds of the domestic violence.

Some slight idealisation of both parental figures was expressed where examples of loving behaviour of parents failed to support declarations or examples were composed of instrumental behaviours directed at others rather than at the interviewee (Hesse, 1996).

Ja, ja...so my dad is very, very nurturing to the point that he's like stupid about it so...so for instance this one guy came to our gate one day and knocked on, on the door you know the buzzer and he's like- I've just come out of rehab and I've got no one, my dad gave him my sleeping bag you know we saw this one guy and him and his girlfriend they were like young Afrikaans kids must have been like just out of school, and his battery wasn't working, it was near our house granted and my dad takes the battery out my mom's car and puts it in this guy's car.

...she was quite...she was quite nurturing, I think all the scholastic years she was....she used to sit with us and do projects and uh...involved in our birthday parties and she used to take my friends out on dates you know play dates those kinds of things that were maternal nurturing things to do.

Jane used splitting and idealisation to keep her internalised good objects safe but she was also able to internalise the unconditionally available maternal object in her attachment to her grandmother which is evidenced in her dialogue: "...so I started calling her [grandmother] mom from when I was quite young" and "I used to ask my gran, maybe she had more time available to her, she used to stop cooking supper and come and help us".

There were instances when Jane clearly related her realisation of the effects that her early experiences had upon her own present state of mind and demonstrated ease when discussing her imperfections (Borelli, et al., 2012; Hesse, 2008). "Ja, heavily ja, so I had severe separation anxiety when I was in grade two to the point where I saw a psychologist for six months, five months".

Uhm...my experiences with my parents, I suppose they have made me quite uhm...wary of certain things really wary of anything sort of physical... abuse or any sort of um...you know what I'm more wary of? Is poor communication and that's why I make such a point of doing it with my friends with people around me, I make sure I communicate properly maybe even verbosely it's because I've always understood that that was the root of what was going on, was that things weren't spoken about. It was kind of...it manifested physically and then only afterwards would we stop, think, act, you know...so uhmm maybe it's made me very keen on communication uh...it made me very anti abuse for my girl.

For these reasons, Jane warrants a classification of secure attachment with certain preoccupations with past experiences. There were also times when there was evidence of a positive wrap-up: "But I got over it [separation anxiety in childhood] quite quickly, overall 5 months", as well as condoning of her parents' behaviour, both of which are linked to a minimising of negative experiences and of Fairbairn's moral defence (Fairbairn, 1952) where the parents' behaviour is endorsed as correct and appropriate despite evidence to the contrary, in order to ward off helplessness and maintain the internalised good father object. There were times when Jane incurred beatings, on bare skin, from her father that left marks on her body, on one occasion she was beaten to the extent of having blood in her urine. "But it was sometimes...you see now that...I wouldn't call abusive because in some ways we were naughty we shouldn't have been fighting it wasn't like he was...he was uhm hitting us because we didn't do well at school, so, in my mind it was like justified as a kid, anyway, ja".

As a result of these additional factors she therefore also warrants a sub classification of F_2 or the presence of dismissive features towards attachment relationships at times, in the text (Hesse, 1996; 2008). Although this last sub classification was not prominent enough to designate it as primary, its indicators featured often enough throughout the text to warrant a sub-classification.

Sense of Coherence (SOC)

Jane obtained an overall SOC reading of 150 which is considerably high on a scale of between 29 to 203, with 203 being the highest possible reading for the SOC. It also falls within the average mean that characterises most samples (125-170). This was also the highest SOC rating obtained in this sample of participants for this study. A high SOC score is associated with a definite movement towards the healthy end of the spectrum (Antonovsky, 1987).

Her Comprehensibility score (60) was also the highest score obtained for this particular component in the sample. Jane's cognitive understanding of internal and external stimuli such as making cognitive sense of her parents' behaviours as being due to their youth and unpreparedness for marriage and child rearing, as well as her understanding of her affinity for her grandmother who was more available to meet her needs (examples given above), depict a clear mental world where information is ordered and consistent. She displayed an ability to reach reasonable explanations for events whether these were desirable or not and even when these events involved the death of a loved one. "And my maternal granny passed away, uhm...so my granddad passed away on (date) uhm...(date) sorry, uh...he died in a nursing home, it was terrible, I felt so sorry for my gran, kind of relieved I suppose as well because he was so old".

Jane also demonstrated a cognitive ability to evaluate reality. She perceived herself as able to cope with her experiences and as capable of meeting new challenges such as that of being a mother, for instance. "I suppose I suppose it's the capacity to ...I learned to relate to her when she was born actually, I suppose it's the capacity to know that like whatever she does I'll be here and it gives her the potential to then do whatever she wants so...ja".

And

I suppose it's that...I suppose an issue of grace really, because my parents have been through the most horrendous things together like there's been all sorts of infidelity and uh that's that things can get really bad but never that bad that it's kind of hopeless, like there's always the opportunity to repair, there's always which I suppose is a nice ending to things because you know now the relationships are really good despite what has gone on there's hope who knows what could happen but it's ja.

Events in life were therefore thought of as bearable as are their consequences.

Jane's score in Manageability (43) suggested that she perceived the resources that were at her disposal as being adequate to meet the demands of life. She had throughout her childhood and presently, been able to draw upon attachments, her church environment and upon her relationship with God to enable her to meet challenges that she encountered. "Ja, she [childhood friend] took me to church with her, and that's when I became Christian and I really didn't...I wasn't anti–God before then but I didn't realise like how much God loves us and what He did for us and so uhm, it's really become a central tenet of my life..." and "I've always had very strong friendships...".

It was evident that Jane did not perceive the world as necessarily predominantly chaotic or persecutory, but with a sense of hope and of being loved and cared for. This sense of being cared for existed despite the trauma she had experienced in her childhood.

With regards to meaningfulness, the most important of the three components of the SOC, Jane's score was quite high (47) suggesting that she felt a sense of agency in shaping her own life and daily experiences in her different roles. Emotionally, she appeared to have

made sense of her early experiences and these had not negatively impacted her approach to motherhood since she displayed a strong commitment to her daughter.

...like my dad would always tell me as a teenager you know what (Jane) it's not so bad here and I used to be like oh well, you don't know anything (comical tone of voice) you know but actually, but maybe what he was saying was right, like it's not so bad you know trying to tell me like I love you despite how you feel, I really do love you and I only really got it when I had my own I suppose.

....I always knew that I wanted to be a mom you know, I always said when I was a teenager I just want three things I want to be a maths teacher, I want to be married and I want to be a mom, I never got the maths teacher, thank God, (laughter) but I married one instead.

...some consolation uhm...but I did get married, I did become a mom, so maybe it gave me those desires on the other hand though it gives me quite a clear indication around what I want for her....

She had searched for meaning in her early experiences with her parents and had attempted to overcome her experienced trauma with dignity and compassion for others. This dimension of the SOC seems decidedly connected to Klein's depressive position which involves reparation and gratitude for the good in one's life (Klein, 1932).

Jane was able to comment coherently on her personal affect, her interpersonal relationships, her role as a mother and main activity at the time as well as on her faith. These are four spheres of life which Antonovsky (1987) identified as necessarily significant for the individual who is invested and engaged with life meaningfully. Furthermore, in the integration of the three dimensions of the SOC scale, a coherent sense of Jane's personality and sense of self emerged which encompassed the capacity for self-reflection, loyal friendships, intimacy, self-regulation (Sroufe, 2005) and faith. All of which could be thought of as internal resourcefulness as well as an ability to rely upon external supports and therefore a propensity towards resilience.

Psychoanalytic Research Interview

Jane: "An issue of grace"

Jane was the eldest of two sisters born to parents who had married quite young and were perceived as not being emotionally ready for family life with its full complexities and demands. From a very young age she had developed a close attachment to her paternal grandmother who looked after her during the day while her parents worked and also on some overnight stays.

The domestic violence was perpetrated by her father on her mother and took place approximately once a week or every two weeks being usually triggered by arguments relating to finances and her mother's autonomous competence in this regard. Jane and her sister sometimes witnessed the violence directly and at other times would hear the

altercations while they were in their own rooms. Jane would frequently see bruises on her mother's body as a result. There were also times when Jane's mother was locked in a part of the house by her father and objects were also thrown by him, at times. The violence was remembered as being more intense during the pre-school years. A few incidents of harsh physical discipline were also inflicted by the father on the two children, one of which caused some bruising to Jane's kidneys and bleeding as a consequence. The domestic violence stopped when Jane was between the ages of 15 and 16 years and coincided with her father's attendance at church. Jane described oscillating in her preference between her parents at different stages of development and this was something she was quite conscious of.

Early Object Relating

Violent family environments thrust children into paranoid-schizoid ways of perceiving the world as being persecutory and dangerous, disrupting the relationship between parent and child. "I remember feeling like my parents and I are on different wavelengths, I remember feeling a little bit isolated from them but to be honest not really from anybody else..."

When commenting on her perception of romantic attachments, Jane also indicated that her lack of trust in individuals often prevented her from becoming involved in relationships or from dating. "I'm not gonna marry this guy and the problem is I'm not serious about it and I don't want the rejection, the mess and the break up or if it was I never fully trusted anybody, you know I'm not gonna get close to you if I don't trust you".

Through engaging in violence and making the experience of the family context an unsafe one, Jane's parents diminished her trust in their capacity to be mindful and aware of the kind of childhood she experienced.

So I think, I suppose coming out of my adolescence in my late teens I always thought of my parents, I know it sounds terrible but I probably didn't respect them very much so I probably didn't think they did such a good job, that they had their own issues and that providing us with like a family life was not their top priority, I mean they tried their best.

Jane seemed quite engrossed with trying to understand her relationship with her own mother but having had a daughter herself, she was now able to extend a sense of compassion and forgiveness despite not fully grasping her mother's behaviour and choices. Nevertheless there were times when Jane experienced her mother as not really being available emotionally and internal conflict was experienced as she struggled to understand her mother's feelings towards her as a child. Somehow there was a lack of connection and she experienced her mother as remote, perhaps even rejecting on occasion.

...my mom I would find her socially aloof so I would always ask like mom why didn't you ask me how my day was, I remember being little and being like why didn't she? Whereas maybe that's just how she was 'cos it wasn't like she wasn't really interested in hind sight, I can see now she was, she knew exactly what was going on with me but I kind of felt like she didn't, I felt like my gran did, whereas my dad was more involved in

those kinds of things so he used to take off work to come and watch us play hockey and stuff after school whereas my mom I suppose could never do that....

Despite early difficulties, Jane in her own flexibility, found a way of identifying with her mother and an alliance was formed.

..between the ages of about 9 and as a teenager maybe 16 my mom was my figure but that maybe because my dad was very volatile during that period so then I would side with my mom the whole time I was very defensive of her it was also, when you look developmentally, you become..your identity aligns with the feminine I suppose so then I would do whatever she did like my mom is a very good baker so I learned to bake, she used to bake many cakes with flowers and stuff so I learned to do that, she was, she is a fashion buyer at the moment so I was well, now you wouldn't believe it, but I was quite interested in fashion but in those days I was, so ja I suppose I aligned with those kinds of things.

As a young child, Jane remembered experiencing strong separation anxiety that required intervention which raised questions regarding the security of her attachment to her primary caregivers in childhood. "So I had severe separation anxiety when I was in grade 2 to the point where I saw a psychologist for 6 months, 5 months, so I was worried that my gran wouldn't fetch me from school, so the separation was actually related to my gran not my mom which maybe an indication of the attachment, so."

Although Jane perceived the separation anxiety as only existing in relation to her attachment to her grandmother, her fear of loss and separation from the love object, symbolised by grandmother and mother, seemed rooted in a fear of damage to the object if she was not available and was perhaps linked to anxiety about being left helpless and abandoned. Perhaps in the same way she felt lost and abandoned in the presence of parents who could be out of control and frightening. Jane's relationship with her father was equally distressing as the domestic violence elicited intense hatred and rage in her as a child, leading to a direct confrontation with her father on a particularly trying occasion:

He smacked me yes, once I remember my dad was being horrible to my mom, I was very defensive of her so I tried to, I suppose now that I think about it I tried to distract him so I called him a pig which I knew would, would, he would come to me then and he whooped me with a belt but I remember being a cub swimmer at the time and I started bleeding and then I couldn't swim and I was so cross with him not that he hit me but that he hit me badly enough that then I had to go to the doctor to get a letter so I couldn't compete and I never told the doctor what was going on I think the doctor knew, but I had, so he obviously bruised my kidneys 'cos I was just, I just had blood in my urine so that was...that was the only time that it really impacted my life severely.

Defensive Organisation

Klein (1937) described primary splitting as a necessary sorting mechanism which assisted the child to process new and intense experiences from internal and external sources. Splitting between the parents became necessary at different stages as Jane oscillated between the abused mother and the perpetrator father and later between the toxic mother

and the available, reasonable father. Jane's grandmother seems to have been internalised as the unconditionally available and good maternal object contrasting with the image of the mother as distant, busy and unavailable leading to further splitting of the maternal object.

Splitting as a defensive strategy may not end at a particular developmental stage but be ongoing throughout the lifespan decreasing as levels of inner integration increase (Lopez et al., 1997). Internalised parental figures oscillated between good and bad, during childhood and adolescence and this was something that Jane herself was able to reflect upon.

Let's see, ja, and then I suppose when I became an older teenager my mom became quite sadistic actually and quite toxic, and my dad was more the rational head, so you could see how probably they alternated and maybe I chose whatever parent was more suited to my needs, what I wanted to get out of them which I suppose is quite expedient on my part, maybe you learned to survive, I don't know.

In a family characterised by intense moments of escalation of emotion and violence, the attachment between mother and teen became increasingly problematic. Because domestic violence intensifies feelings of anger, fear and insecurity in children (Lieberman, 2007; Stanley, 2011), defensive strategies such as splitting, idealisation and projective identification between parents and children may also become amplified as the need to defend against such an unsafe environment also intensifies.

She [mother] was quite toxic, I spoke to her about this on the weekend, mom do you remember when you used to insist that you used to dish out supper and I had to either or and being a teenage girl and you know when you're a teenage girl you don't want to eat a lot because you've got all this puppy fat and I remember trying to eat less at night and my mom used to pile the food on and she used to force me to finish it like I wasn't allowed to leave until I had you know like that type of thing she just used to and I used to find her so sadistic, I remember thinking to myself she's trying to poison me with food which supposed to be this nurturing thing but she was trying to give me so much that I interpreted it's poison, so ja, interesting.

The mother's projected material was received by Jane as a form of poison especially since this entailed intrapsychic anxieties around food, being made ill and the toxicity of 'nutrition' as opposed to its nurturance. Her response to these projections was synonymous with being injured or damaged by the sadistic maternal object. Her resistance to such projections and identification with the mother's anxiety about food may have met with further aggression and control as projective identification between mother and daughter increased. The presence of regimented rules within the home may have also contributed towards a negative family climate where regulations were emphasised and enforced through punishment thus affecting attachment security (Crittenden, 1999). "Cos I remember her being very busy, she was quite organised at home, very routine which I suppose is how I am now without even realising it, she used to come home, bath time, supper was made, supper, God help you if you hadn't finished your homework in the afternoon."

Slight idealisation of parents was maintained to preserve the good internalised objects and retain connection to her parents in relationship. A particular focus was kept on instrumental assistance which they were felt to provide abundantly for Jane but there are also times when this assistance was more demonstrated towards others rather than towards Jane herself. For instance, Jane described her mother as being very organised and 'routined', yet this was often a source of frustration for Jane rather than being helpful. Her father too, was described as being very generous and giving but particularly towards others. At the same time, Jane was also able to recognize features of her parents with whom she identified and which she admired.

... so my dad has got a very strong sense of justice and so do I, he has got some very dogmatic beliefs about things sometimes, don't know if it's dogmatic but like black is black, white is white, I'm more like that whereas my mom is a bit like my sister, well whatever goes she's happy with it you know, uhm...so in that way I suppose I've always found it easier to communicate with my dad uhm....

In her identification with her father, Jane also identified with his aggressive parts and this was at one stage expressed in her behaviour towards her sister making her aware of her own capacity for destructiveness.

I also just remember being so horrified, I got my licence on my 18th birthday and of course I used to take my sister and I to school and the one day [she] was late you see again like when we were at school the same thing, my sister is always late and she was late and I picked her up and I went I shook her but in the same way my dad used to shake us and I just rememberI remember like dropping her and being like I'm sorry, I'm so sorry, I'm so sorry, so I remember I would, I reacted like my dad did to my sister when I was frustrated with her but I suppose the good thing is that I've never done it to her since so you know, that's ..ja, I was a lot like her, him, sorry.

Identification with the aggressor is often an attempt to protect a vulnerable ego from external persecution by acquiring the aggressive characteristics of the perpetrator (Fairbairn, 1952; Lieberman et al, 2005). According to Sorensen (2005) perpetrating pain is also a defence against feeling. However, Jane showed genuine concern for the impact of her own actions on another suggesting the presence of reflective function of mentalisation. She also demonstrated an ability to identify unconsciously with the victim in her slip of the tongue at the end of the last sentence. Jane's identification with other aspects of her father may have also been related to the fact that she did not feel shut out by him although she did feel shut out by her mother on occasion and experienced feelings of sadness regarding the psychological loss of the mother and the lack of emotional contact between them. "In other ways though I would really like to be like my dad to her [daughter] so ja maybe good and bad, like I won't do what he did wrong but I'll try very hard to get it right". She also stated:

Ja and his conversational side 'cos I can always talk to my dad (tearfully) 'cos my mom she' not much of a talker you know, so ja. Ja and she's naturally introverted and my dad and I both love history books and we read, my dad is very politically minded so I think

he was very outspoken during the struggle around what was right and wrong and he joined these things andbut now he's equally critical of the government, I suppose so am I but you know so, yes so you know it's just nice to have someone to talk to....

When considering her father's aggression and violence towards her, which often left marks on her body and elicited considerable fear, Jane engaged in the moral defence in order to preserve the good paternal object, this was despite the fact that there is an equally antilibidinal image of him as the persecutor. The split however was not so severe as to cause excessive defensiveness. The sense is that Jane's father was a hated and feared object who was also very much loved. The moral defence enables the child to ward off feelings of helplessness and gives hope of something better through preservation of the good image of the father (Fairbairn, 1952). "But it was sometimes...you see no that...I wouldn't call abusive because in some ways we were naughty we [sister and herself] shouldn't have been fighting it wasn't like he was...he was hitting us because we didn't do well at school, so in my mind it was like justified as a kid, anyway, ja".

Jane used humour at times to describe her parents and their relationship suggesting the ability to engage in a different perspective and to lighten experiences of a family that was experienced as chaotic at times and frightening.

....my mom well my mom and dad were having this fight over whatsApp no, not over whatsup they were like fighting about a whatsup message because they're such techno peasants that they couldn't find the whatsup icon on the phone and then...so they have a fight about that because they can only find the text message icon it sounds ridiculous anyway they're having this big screaming match, I arrive with the granddaughter everything's happy....

There were also indications of rationalisation being used to make the possibility of pain more tolerable, especially in the context of motherhood but this was not a defence that was rigidly used in the context.

...your whole depth of experience uh...is created by its broadness so you don't know really what joy and sorrow and those kinds of things are uhm how they feel 'cos sometimes things make you feel really bad and sometimes really good as well and I don't know if you can really know what good is when you haven't felt really bad so I'm not saying she must never have an experience of anything bad but uhm...I just don't want it to be a toxic thing it impacts her where she doesn't want to get married....

Exposure to the trauma of domestic violence tends to give rise to high levels of anxiety especially since the violence is often perpetuated for years during the individual's childhood and the security and availability of caregivers is compromised (Levendosky et al., 2012; Lieberman, 2007). Anxiety may thus have become a way of relating to the world in general. "She [sister] does everything at the last minute whereas I'm like the planner, I've got my five year plan, I'm quite anxious by nature, she's quite socially aloof, I'm much more relationally driven, so".

Jane's anxiety and need to plan and know beforehand may have been overemphasised by the fear elicited during family violence which made the climate at home unpredictable. There was also, to some extent the possibility of identification with the maternal object's anxiety and need for control although Jane was aware of this. Connected to this was Jane's pre-empting of criticism in conversation as a reflective function which she would have developed in her adaptation to what Winnicott (1960a) terms environmental failure. "..l'd want her to know God in the same way that I did. I don't mean in a...you see I'm so worried about psychologists and how they interpret this because I know that psychologists think that when you say know God, it's like a narcissism a grandiosity that actually...that's not what I mean".

Adult Attachments

Jane demonstrated a strong commitment to motherhood which was evidenced in her attitude but also in the way she engaged in transition facilitating behaviours (Sorensen, 2005) such as providing linguistic bridging for her infant daughter as she was about to pick her up from her pram:

I just want her to have the same experience I want her to know how much He [Christ] loves her and that He...(baby crying, Jane responds to her) oohh **mommy's gonna pick you up**, I want her to...I want her to know that He saved her and that she (picking up daughter from pram gently), has got hope because of Him. Oho good girl.

Perhaps it is because of this commitment to motherhood that Jane's mother's reaction to her attachment to her grandmother seemed quite bewildering for Jane. It is possible that such an attachment may not have, in fact, been a challenge to the mother but perhaps a relief given the trauma and strain present in the marital dyad and family. Although Jane did seem somewhat defensive of her mother and preservation of the object as good and not rejecting was important on a conscious level, there were unconscious indications that on some level she felt disconnected from her mother. At first she defended against this when asked about possible feelings of rejection. "No, I just, no, no, there was only the supper thing that used to happen but it's more an availability, I don't know if it's a rejection 'cos my mom would help me afterwards".

Later she disclosed a dream that she had recently:

Ja, I feel quite proud of myself actually because I went on this baby CPR course and I'm a bit of a panicker at the moment and then I dreamt that my mom dropped her [infant daughter] in the bath and then just left her there and then I was like mom you can't do that! But I did baby CPR to her in my dream and she came alive but I was so proud that it was like my instinct to not panic like in my dream I didn't panic just like picked her up did the CPR, boom, boom, boom and okay it's fine, you know, so.

In this narrative of her dream Jane perhaps revealed an unconscious awareness of her own ambivalence and destructiveness which she split off and identified with her internalised image of her own mother. The dream also conveyed perhaps a deep sense of feeling

'dropped' by the internalised mother who was neglectful, irresponsible and abandoned the infant when she was at her most vulnerable and in danger of annihilation. Despite this felt deprivation and danger, in her new role as a mother herself, she had an internalised image of the idealised rescuer who was able to breathe new life and provided a sense of hope and survival through her intervention. Love conquered hate and Jane was able to resuscitate the infant and an opportunity to do over was afforded. Jane, in transferring a sense of rescue and reparation into her own situation, was perhaps able to derive efficacy from motherhood. This allowed for forgiveness of the mother despite her perceived propensity towards neglect.

In her marital relationship Jane was able to recreate the early family environment situation in a reparative way which is full of hope (Klein, 1937). It is possible that she has managed to identify with and internalise some of the good while relinquishing some bad parts of the object within the relationship. Both her father and husband were similarly dependable men however, emotionally, there are marked differences:

My dad is quite emotional whereas my husband is ...so when we first went on a date I used to call him the emotional dwarf because it didn't matter what happened like he was just always the same! He never really looked happy about anything he would never get really upset about anything If people ever got into a situation they'd call (name of husband) because he' he, he will be there he's calm and ...but remember my family calls my dad because when they're in hospital or...they call my dad and I didn't even notice this but he's got the same thing you know what was the question, how did I choose someone who's right for me? I don't know if I chose it just kind of happened, you know.

Faith in God played a large role in Jane's responses to the family violence and she spoke about this quite freely during the interviews. Despite not having been brought up in a religious family, she was introduced to Christianity by a close friend at the age of 11. This particular friend and her family became important significant figures and alternate attachments in Jane's childhood and continue to the present. Subsequently God became an alternate father and an object of attachment which allowed her to experience forgiveness for her own father in feeling that she has been forgiven herself:

I can remember I had written on a piece of paper that belonged to my notebook and had hidden it in an old shoe in the back of my cupboard all the things that my dad had done, like all the times he had hit my mom and like locked her in the laundry and I remember one scripture that spoke to me and it says 'love keeps no record of wrongs' and I thought to myself like I cannot say that I have been changed by God and that I believe in grace and in the grace that God has offered me if I 'm gonna keep this record of wrongs, I remember it was one of the hardest things that I ever did, but I tore it up and I threw it away and I'm like well that's it then, because then I realised like God didn't forgive me because I was uhm, because I came to Him and said I'm so sorry He forgave me years and years ago on the cross and so I can't hold my dad to the same kind of expectations in asking him to say sorry first before I forgive him. I realised forgiveness is about...is my decision that I do for me because actually it's just eating me up it's not ..he doesn't even know that I hold things against him. And I suppose that's

really the beauty of grace that God had done all this for me and I am doing it for him as well.

Jane's ability to attach securely may be an earned state of mind due to her experiences with new objects and attachment substitutes which perhaps enabled the development of the capacity for concern and reparation, to be made manifest in her life.

Transference-Counter transference

There were times during the interviews when Jane pre-empted possible criticism by qualifying her responses suggesting her adaptation to a perhaps harsh environment in childhood where considerable verbal aggression was experienced. This elicited depressive concerns in the researcher and attempts at rescue in efforts to reassure and protect. There was also evidence of the researcher identifying with Jane during certain sections of the interview:

P:I suppose I want, I just want her to...I'd want her to know God in the same way that I did. I don't mean in a..., you see I'm so worried about psychologists and how they interpret this because I know that psychologists think that when you say know God, it's like a narcissism a grandiosity that actually...that's not what I mean, uh.

I: They don't...the thing is that they don't often think about God as an objective other, you know and, and....

P: And that is not noble.

I: Yeah and your perspective is God is an objective other and you can know Him, you can't prove Him but you can certainly experience Him.

P: Yes...yes that's exactly what I mean, so I would...I just want her to have the same experience I want her to know how much He loves her....

7.2 c) Annie (Participant 7)

Annie volunteered for the study at the end of her academic year. She had completed all requirements towards her studies and was then contemplating pursuing a career in the Biological Sciences field, a vast departure from her current field of study. At the time she was in a serious romantic relationship and had moved out of the family home to reside with her boyfriend. There were times when Annie appeared to me to have a rather stiff appearance which was expressed in her posture and facial expression. This was perhaps due to her discomfort with the topic of conversation and with the vulnerability it may have induced in her. Her communications, although honest and helpful, lacked spontaneity or creativity. She was felt to be distant as if letting me know what it was like to be shut out, to be unable to reach or never quite make real contact. She demonstrated an acute sense of insight about her struggle for identity and inner stability which appeared to be predominantly cognitive and not yet rooted in affective experience.

Adult Attachment Interview (AAI)

Annie had witnessed and experienced persistent domestic violence perpetrated on her mother by her father on an almost daily basis. The greater part of her childhood had therefore been spent attempting to protect the maternal object from assaults by placing herself between her parents, thus incurring injuries inflicted on her person by her father. Therefore, she not only witnessed traumatic incidents but also experienced these directly which appeared to have intensified her trauma.

Annie obtained the adult attachment classification of u/d/ F4b or unresolved/ disorganised with secure/autonomous attachment style featuring a strong valuing of attachment and a mild preoccupation with traumatic parenting experiences. She reported extreme behavioural reactions to trauma such as severe depression and the development of an eating disorder (Bulimia).

I think the hardest one for me was when I was suffering with depression and an eating disorder and she would try and ...she didn't ..it made my dad very angry that I was experiencing any problems and he blamed her so she would try make everything better.

There were also reported incidents of post-traumatic stress symptoms such as nightmares (Herman, 1992) and night terrors experienced during school camps. At these times Annie would become so agitated that the camp counsellor would fetch her from her room and bring her into her own dorm. As a result Annie would wake up not knowing how she had arrived there and this would intensify her anxiety and her difficulty with processing and resolving these symptoms of trauma. "Ja, and taken me I mean I'd wake up just feeling just very like my personal space had been invaded again sleeping next to someone I didn't know how I'd got there I mean it was so weird I don't know why but I carried these feelings...".

There were some moves into the present whenever Annie was requested to recall childhood events that elicited anxiety and her present relationship with her parents sometimes intruded in the dialogue. For instance, when asked to describe her experience of her mother between the ages of 5 and 12 Annie replied: "Yea, uhm...Yeah I guess it's kind of similar to the caring, yeah she has a very big heart, she gets upset when other people are upset she cries whenever she sees someone else cry, yeah". This was suggestive of a continuing preoccupation with her parent and with their relationship which may have elicited anxiety and prevented her from focusing her description on her experiences in childhood.

Some idealisation of her mother and father was depicted although Annie was also able to acknowledge incidents of emotional neglect, physical and verbal abuse by both or either parent. Her mother was perceived as having benevolent motives towards her but as being 'extremely anxious', controlling, at times 'angry' and as exhibiting 'fakeness' which prevented them from connecting on a deeper level. Annie talked about home videos but these were mentioned as if they were distant, unconnected events as if they were something she watched but did not remember participating in. Annie also described her

mother as 'very caring' and 'loving' but most of the examples she provided for such behaviour were vague and revolved around her mother's anger rather than support. Other concerning aspects of the relationship were also evidenced with Annie suffering from intense separation anxiety in childhood and there were indications that her attachment to her mother may have exhibited prominent ambivalent characteristics from infancy (Main et al., in Bretherton & Waters, 1985): "My mom says as a baby I was very anxious, and I didn't like strangers, I used to cry a lot..." and "Yeah, school camps mostly I used to go away and I would just cry the whole time, and I'd get extremely homesick uhm, ja that was difficult".

Many examples of role reversing behaviour between mother and daughter were also given during the interview and there seem to have been frequent times in Annie's childhood when her mother would purposely involve her in the marital conflict.

...and then I remember my mom uhm...tried...we got in the car and we were going to go to a hotel and my sister was a baby in nappies at the time and she had left my sister there with my dad because...I guess because all the nappy gathering, all that stuff she just wanted to leave quickly and my dad was standing in the door of the kitchen while we were driving, reversing and my sist....he was holding my sister and she was crying, she wanted to come with us and he didn't want to be left alone he was trying to make her you know feel all right he didn't want her to go, I think he...the guilt was setting in uh, uhm but I couldn't watch my sis..I couldn't leave my sister so I made my mom get out and go fetch her....

Yeah and also one time I was just sitting with my mom and I think I was about 4 and I asked if they were going to get a divorce and she kind of used me I felt in a way because she was like go tell your dad....

Oscillations in Annie's description of her relationship with her mother were therefore quite common as one moment she would disclose being close to her mother and the next they were not perceived as connecting at all.

I think mainly just from when I was younger uh..a lot of home videos I've seen she put in a lot of effort just to being with me, we were together 24/7 uhm from the age...until I was two uhm and I know I started speaking very early because she talked to me so much uhm yeah it just...just looking at her and she's very good with kids.

...and so we never really connected with her, everything was about trying to make sure that my dad was ok, and keeping the peace.

It was also clear that Annie felt rejected by her father whom she feared and simultaneously loved, and although there clearly were underlying angry feelings, these were controlled. "Ja, it was difficult because a lot of the violence was also directed at me not just my mom, and it was difficult that...it was neve ...I mean not that I wanted it to be but my sister was never you know involved in it, my dad never felt he wanted to be violent with my sister...".

Despite her difficulties in relation to her parents, Annie demonstrated compassion for them and the ability to contextualise their behaviour although she seemed to perceive them as victims of circumstance rather than as agents capable of choice and change. "I think my

mom I guess had a lot on her plate uhm the family dynamics just didn't allow for healthy connections I don't think".

I think, even when my mom tells me my dad didn't even propose to her they just decided together it was just a decision like okay let's just get married, I don't know I think my mom settled, for her own reasons uhm you know she didn't date many people because her dad was very strict, uhm so I think my dad was her second boyfriend so she didn't know much she never thought she would be around a boy or have a boyfriend because of her dad, uhm and my dad has very bad social skills so I guess when he found my mom he didn't think he would get anyone else.

Annie also demonstrated that she was well aware of the effects of her upbringing upon herself and her relationships: I think...I can't remember specific things 'cos it was so long ago but round about 3 uh all the memories I have there is this underlying feeling like I loved people more than they loved me uh including my parents".

And

uhm, I mean I even experience it with my dogs, I get separation anxiety, uhm, so I'd assume I'd experience it with my baby too. Uhm, but I'd just be very aware of how damaging it was for me with my mom and her anxiety uhm, but she, she was very aware of how damaging her mom was to her with her anxiety and still she wasn't able to you know prevent that with her relationship with me so I do worry that it's something I'm just not even going to be aware of that I'm acting like my mom with my child.

The overall coherence of the script was sustained as Annie spoke in an orderly fashion providing clarity for questions asked (Grice, 1975; Hesse, 2008). No violations of Grice's maxims of quantity or relevance were found and quality was generally maintained with adequate evidence given for most assertions made by Annie. Despite Annie's experiences of early trauma, she was classified as secure on the AAI, and was able to maintain a reasonably coherent description of her experiences. It is important to note however, that this possibly earned security of attachment state of mind may have been facilitated by her ten years of therapy, her high intellect as well as by her relationship with her boyfriend who appeared to be a supportive, containing figure in her life.

Sense of Coherence (SOC)

Annie's global score on the OLQ yielded a reading of 92 which fell considerably below the average for this sample and far below the range of means that characterise most samples (125-170) (Baker, 1998). Her Comprehensibility score of 24 was also considerably low suggesting that she may have perceived life as chaotic and unpredictable. Annie indicated that she often didn't know what to do in an unfamiliar situation (Question 12, SOC-29) which possibly engendered great anxiety in her and pressure to find a solution when she was faced with a difficult problem (Question 15, SOC-29). She reported having 'mixed-up' feelings (Question 19, SOC-29) and this was mirrored in her ambivalent feelings towards her parents and oscillatory evaluations during the AAI. Annie openly acknowledged that she did

not feel comfortable thinking about her feelings (Question 21, SOC-29) and it was evident that although she had intellectual insight into her past trauma, this insight had perhaps not been fully rooted in emotional experience as yet. Annie may not have trusted herself to provide a balanced perspective on life events and perceived herself as underestimating or overestimating events (Question 26, SOC-29).

Her manageability and meaningfulness scores, however, were higher suggesting that although Annie may have struggled to apply some structure to her past experiences and her processing of these, she still felt motivated to draw on internal and external resources to manage challenges. Her manageability score of 36 suggested that Annie did believe that she had some internal resources to draw upon in times of difficulty (Question 27, SOC-29). This was not always the case in the past and there appeared to have a been a shift in time as she indicated the propensity in the past to let unpleasant events linger in her mind and cause great anxiety and worry (Question 18, SOC-29). Annie did feel that she was treated unfairly in the present by those around her (Question 9, SOC-29) and this may have been connected to the intense caregiving role which she adopted in relationships and her discomfort with accepting caregiving from others. "Yeah. I mean it's something that I attract and want but at the same time I can't help feeling a little bit of resentment like I feel where are the people looking after me, but I attract people that need looking after rather than ...so I don't know".

She indicated that she sometimes had difficulty managing her own feelings and this was corroborated by statements she made regarding her struggle with depression and an eating disorder.

uhm, yeah I guess I just need...I can't verbally ask for help but I do get sick whether it's depression and an eating disorder or pneumonia and glandular fever, I think they're just points where I need to check out, and I need to say look, I can't do this anymore, can you give me some help or some support? Uhm I guess I just haven't learned...I need that non-verbal communication.

Significantly, Annie was the only participant to have retained her struggle with illness in her adult years to some extent. A lower SOC score has been found to be associated with a reduced resistance to illness, in particular the comprehensibility score has been found to be better at predicting resistance to sickness (Fiorentino & Pomazal, 1998).

Annie's meaningfulness score of 32 indicated that Annie did have some motivation to connect with her environment and relationships but was still trying to overcome some barriers in doing so. She indicated that there have been times when life felt as if it had few clear goals or purpose at all (Question 8,SOC-29) however, this had changed in the sense that Annie indicated a shift in perception as she maintained hope for the future and was willing to engage with new attachments and in her continuation with therapy.

Psychoanalytic Research Interview

Annie: 'I loved people more than they loved me...including my parents'

Annie reported daily exposure to her parents' domestic violence in childhood. This invariably involved the physical beating of her mother by her father, her father throwing objects as well as repeated verbal abuse by him. This violence took place throughout her childhood, decreased to once a week as she got older but only ceased once her parents divorced when Annie was 18 years of age. Since both parents worked together from home there was little time and space for respite. Episodes of domestic violence were therefore frequent and of varying intensity.

Being the older of two sisters, Annie recalled times during the altercations at home when she would try to protect her sister by taking her into another room and attempting to distract her by playing music. There were also times when she attempted to intervene directly in the violence and placed herself between her parents which led to incurred injuries as a result of objects thrown by her father. Hence the beginnings of her identification with the maternal object were expressed. At the age of 4 she recalls the family doctor photographing the bruises on her body although no direct explanation was given by her mother for this event.

Annie reported experiencing difficulty with thinking about and processing these childhood events in a meaningful way and conveyed a perpetual struggle with separation from significant others and her familiar environment even when these separations were temporary and necessary. In fact, any kind of separation proved to be an ordeal even in latency years where school camps were dreaded rather than enjoyed. An attempt at pursuing tertiary studies overseas was soon abandoned due to a serious bout of pneumonia which left Annie relieved that she could return home as a consequence. A preoccupation with finding mother substitutes was consciously acknowledged and remains considerably prominent in the present.

Examples of maternal instrumental love were very apparent and continued even into adulthood. Her father was experienced as unpredictable, dangerous and as being unable to express his love despite Annie affirming that he definitely felt it. Attempts were made to connect with him through role reversal, with Annie thinking of him as an abused child who was exposed to a monstrous father and a frightened, absent mother resulting in his violence as an adult. This reflected perhaps, Annie's own projected and displaced ordeal in childhood at the hands of a father who could behave monstrously and a mother who was preoccupied with evading violence and thereby emotionally absent to her daughter.

Evidence of traumatic symptoms emerged throughout Annie's narrative, some which were clearly related to her exposure to domestic violence and others related to an attempted hijacking of her mother and sister in front of her which undoubtedly exacerbated fears of

loss and abandonment expressed in frequent nightmares and hypervigilance. She was taken to therapy while in the 10th grade and has continued to the present. Annie reported that the therapeutic relationship was valuable to her and that she intended to continue attending.

Early Object Relating

Annie's earliest memories depicted a family environment characterised by stress, violence and the need to 'walk on eggshells' because of her father's anger and unpredictable temper. She recalled her mother always seeking to "...make sure that my dad was okay and keeping the peace".

It is possible that maternal preoccupation in this case was predominantly invested in the avoidance of violence and may have impaired her mother's capacity for primary maternal preoccupation with her child. Winnicott (1960a) maintained that it was the primary preoccupation with the infant or child or the mother's special orientation to the child which carried beyond the birth process and created a later space for the child's states of mind to be understood and held or contained. Instead a disrupted attunement may have been produced leading Annie to perceive herself as never really being able to connect with her mother on an emotional level. The impact of domestic violence on mothering can be considerable given the propensity for the mother's capacity for caregiving to be seriously derailed by persistent trauma. Annie recounted how she would hear signs of violence in the next room and: "...then she would come in and just have this huge smile on her face like you know trying to say everything is okay, you know it was false, so even though she had good intentions it prevented us from connecting".

In being exposed to this incongruency, Annie was being told implicitly that internal feelings should be hidden and distorted, creating confusion between what is real and what is an illusion and this illusion of denial was perceived in her mother's face. The lack of attunement and mirroring from the maternal object and preoccupation with the father's moods communicated clearly that adults' feelings and adult well-being superceded the needs of the child and thereby consumed daily life. Inevitably this elicited great frustration, feelings of rejection and resentment in Annie who was left feeling abandoned and unseen.

It made my dad very angry that I was experiencing any problems and he blamed her so she would try make everything better, she would never empathise with me she would make it seem like the problems would just be fixed and that I must just be better, just because my dad was getting angry, everything was about him.

Annie's mother, possibly due to her own traumatic experience of her past and current relationship, may have not accurately been able to perceive Annie's mental states and was unable to reflect this internal state back to her as her own, as would be evident in marked mirroring (Weinberg, 2006). Winnicott (in Fonagy, 1999b) proposes an alternate scenario where what the child sees mirrored in the mother's face are her own moods and her own defences, in Annie's case possibly her mother's fears, her extreme anxiety, an exaggerated

need for control and maternal overprotection. In fact she did describe her experience of her mother as such.

From... she said as a child she had OCD but also she's, she's quite religious, she turned to religion when she was struggling with my dad and she was always very nervous that we would...if we ever like...in matric one of our exams was...it had an excerpt from Harry Potter and she went she found out somehow and she made it so that I got a separate exam just so I wouldn't read that. So anything to do with wizards and witches and in that way she was very controlling and anxious and just all over the place. Yeah and I'm also very scared of...If I'm put in a situation where there is something like you know like a hypnotist or something I don't want to feel like the world is so dangerous that I can't even be there and something bad is going to happen.

Through projection the environment was portrayed as persecutory and dangerous for the child. This paranoid-schizoid experience of the world may have been transferred to Annie who acquired fears of danger and expectations of persecution related to exploration and autonomy.

There is a part of me that just feels like I can't connect with my friends, I don't feel comfortable going away with them whereas she [sister] is just so relaxed, will quite easily go away with the group...quite a big group of friends, I can't do that there's something...I don't feel safe with a lot of people.

Sadly, it is in the environment at home that parents became the equivalent of the 'monsters' that threatened her with annihilation (Lieberman, 2007). The search for understanding and comfort became futile and she became instead what the parent needed her to be. This state of compliance possibly made her acutely sensitive to her mother's needs, a situation that was more tolerable than the potential loss of the love object which equated with the potential loss of self or annihilation (Fairbairn, 1952). "I think I tried to overcompensate by just being around her all the time, she used to tell me stories of how at...I used to go to my friends and she would be sitting with the moms, I used to sit on her lap and just hold her face and kiss her all over her face".

Maternal anger

Some mothers do manage to be emotionally available for their children despite domestic violence, however, in this particular case the violence was taking place on daily basis and would possibly have made it extremely difficult for Annie's mother to manage daily life and mothering. A part of Annie's distress was possibly the introjected anger in the caregiver who projected her own emotions and defences. The maternal figure may have displaced her own anger onto her daughter since the situation at home possibly made her unable to cope with her own feelings and negatively impacted her parenting. "Also I mean if it was....if something happens any kind of discipline I don't think you should be displaying that anger, I think it should [be] more that a child could learn but she was always hitting me out of anger".

When support was needed and requested, Annie perceived her mother as reacting out of anger rather than reacting in helpful ways: "It would come out as anger which didn't help me much. Like if I was having problems at school she wouldn't mean to but she would make the situation a little bit worse by meeting with the teacher and just getting very angry".

Annie recognised that her mother's physical punitiveness and aggression towards her was disproportionate and inappropriate to her age. There were times when she was hit on bare skin and the beatings continued until Annie turned 18 years of age. There is a certain element of sadism and humiliation present in making a child strip and spanking them which perhaps alludes to the adult's state of mind at the time of the disciplining. This is very problematic for an already physically abused child since it reinforces the loss of control over what happens to her own body and breaks the body boundary barrier, a situation which may have negatively impacted her ability to receive and feel comfortable with physical affection from her parents and others as an adult.

Annie's narrative painted a picture of an, at times, emotionally distant mother who could not really be connected with and who remained inaccessible to her. As a child she could not feel held or seen by her anxious, frightened mother. Where food and feeding was supposedly a bonding experience between mother and child and should be remembered and internalised as such, in Annie's case it became linked to maternal anger, punitiveness, intrusion and physical aggression.

I remember it carried on until age 18 but it wasn't on the bum like spanking it was just hitting me and the one time it was because I was very ...I had an eating disorder I was eating too slowly according to her and she was just frustrated and she hit me ..I felt like...I mean I know people who spanked their kids I just felt like it carried on for too long.

The development of an eating disorder as an illness in response to an environment that could no longer be tolerated was perhaps evidenced with Annie attempting to punish herself for being needy in her experience of bulimia. Annie remained aware that she was extremely needy towards her mother which was evident in the experienced separation anxiety and dread over the possible loss of her mother, culminating in an attachment that was affected by the trauma of domestic violence. She commented on her dependency in a particular occasion when her mother visited her playschool: "I refused to sit down with the rest of the class...I wanted to sit next to her so everyone knew it was my mom. And while she was reading the story and ja...we just held hands, I was quite anxiously attached to her".

I was just very...I was just a very anxious child and just wanted a lot of my mom like needed to be with her constantly I don't know if there's that if you feel more secure in your attachment to your mom, I don't think I would have felt the way I did, there was something preventing me from connecting with her....

Defensive organisation

In Annie's family it appeared that her father expelled and projected destructive parts of himself into his wife and daughter and in identifying with these hated, intolerable parts, proceeded to attack them in an effort to control and destroy them. 'It was difficult because a lot of the violence was also directed at me not just at my mom and it was difficult that it was never...I mean not that I wanted it to be but my sister was never you know involved in it, my dad never felt he wanted to be violent with my sister".

This projective identification was perpetuated by the father with the daughter who identified herself with the maternal object and had also taken on a caregiving role. Annie demonstrated some awareness of this complex dynamic:

I sometimes get worried that he might see some of my mom in me because I really felt like he hated my mom and also on the flip side I'm worried that he can see himself in me which people have told me before...just we're both...he was very introverted and I am, he was very sensitive I mean I'm not aggressive at all but I think mainly just being introverted and sensitive, I don't know if that's why he's so critical of me.

Annie reported feeling drawn to her father throughout her childhood, wanting his approval and trying to understand him. At the same stage powerful feelings of disgust emerged between father and daughter possibly through projection of disgust from the father which Annie identified with. This may have elicited considerable guilt and discomfort in her and was frequently dwelt on during the interview. "I'll never forget he always looked at me sometimes with this complete disgust and to get that from a parent is really traumatising." And "I think the biggest thing from my dad because I wasn't around him you know on his lap or anything but he would look at me with complete disgust sometimes".

Unable to access her hatred and anger at the abusive object, and the ensuing guilt that this evoked, Annie may have processed these feelings through further projection and projective identification. "I think he feels extremely guilty so ja I mean I go and see him every Sunday just because he needs time with us so he doesn't feel guilty".

However, since she found her father unpredictable, was afraid of his anger and uncomfortable with physical contact with her father, Annie made use of projective identification to maintain a relationship with a loved and longed for object that was simultaneously critical and frightening.

...but something makes me empathise with my dad yeah there's something again that's like I feel I want to be his mom and I want to protect him and I hate that he went through what he did go through, I feel like his mom didn't adequately protect him so I kind of resent my mom for putting me in the parental role with her but with my dad I want to be in that role, I want to look after him....

I feel like he wants to, that he wants to connect with me but I also have to assist it I have to help create the situation here he can help me but I don't resent that for some

reason I...I kind of feel like...like almost he's this little child trying to like do...I don't know I just feel like it's always very sweet when he does try, yeah.

By projecting the abused child parts of herself into her father and identifying with these Annie enabled a relationship with an unpredictable, angry object and avoided feelings of hatred or need for revenge. Instead she compensated by empathising with her father as the child and the dangerous object was now under her control as the good mother and caretaker. At the same time the good object was encapsulated and preserved within a veneer of empathy and child-like projections that could be loved and were not characterised by dangerous aggression and in doing this she minimised the capacity of the object to hurt and destroy. Fairbairn (1952) maintained that libidinal self was matched in intensity by the anti-libidinal self. Libidinal parts were contrasted against what must be stored in the anti-libidinal state, containing bad, persecutory parts of the object that could not be accessed.

Simultaneously, insecure attachment prevented exploratory behaviour and impeded the development of autonomy in her as a child. This may have fostered further mistrust and insecurity which was then projected onto others who never loved her quite enough or who were incapable of understanding her. The dependency on the love object however, intensified and other methods of eliciting caregiving or at least instrumental love were facilitated:

I know in grade 10 I got so extremely ill...I don't...that's when I first developed depression, a part of me felt like I was asked...I don't even know if you can make yourself ill, I mean I had pneumonia, I had glandular fever, and tonsillitis but I remember just wanting my mom to look after me and there was a lot of..I would give in to sicknesses or I would overplay being injured because I wanted to be looked after so that...and even today I am very sensitive if I get sick and I don't have people treating me like a baby I get very upset . Even when I go into therapy if I'm feeling sick she can't push me at all 'cos I'm just feeling like a child.

Illness possibly became a request for rescue and offered Annie a regressive space and opportunity within the family and in therapy to receive care. To a certain extent the illnesses served a very important function for her by communicating her neediness, allowing some regression and placing others in a caregiving role which was almost a pseudocaregiving of the body and not of her emotional self. The injury therefore remained. Annie made the symptoms of illness worse in order to obtain the caring and nurturance for which she so desperately longed, but this only afforded her a semblance of what was really needed and wanted and was not a true transitional space capable of enabling growth. Several expressions of regressive speech such as child-like intonations and acknowledged child-like needs were made throughout both interviews. At one stage Annie stated in reference to her mother: "I guess there's a part of me that wants her also to be my mommy" and "So, yeah...I...whenever I'm sick there is...it's very emotional for me because I don't feel like I get the support I need [last word whispered] and I think people don't realise that I want to be treated like a child even though I'm twenty four".

In her preoccupation with attachment needs, Annie made frequent use of regression and searched intensely for substitutes as good available objects and yet, simultaneously she could not relinquish or mourn the loss of the love object, she could not separate and became instead preoccupied with finding a replacement.

While I was growing up I think I just attached to all my teachers, anyone that was around my mom's age I just very..tried to be extremely close to them and I also felt like they probably viewed me as a nuisance but I was just seeking those relationships and I still struggle with that seeking closeness from females kind of my mom's age, yeah.

Mother substitutes were constantly sought to replace the psychic structure that she did not receive as a child (Zvělc, 2010) and displacement of neediness to teachers and possibly to her therapist of ten years, which was a relationship which Annie greatly valued. Annie also sought to merge with representatives of the good mother but appeared to revert to her initial role as caregiver in attempts to maintain the relationships and the central message was 'don't leave me'. Unfortunately substitutes did not offer a replacement for the lost mother nor a representation in the external reality of an early image of the mother (Boston & Szur, 1990) but only an opportunity for a relationship through which Annie could explore and experience her own feelings about her internal representations of herself and others. Paradoxically in attempting to merge and connect with the good mother substitute she also faced the threat of annihilation and loss of a sense of self which could be terrifying and made connections dangerous, not only could her neediness serve to push others away and result in abandonment, she could be faced with the terrifying loss of independence and differentiation through merging.

Adult Attachments

In an attempt to circumvent potential annihilation and to decrease her anxiety Annie reverted to what she had learned to do as a little girl, to the taking care of others in repetitive attempts at 'fixing' and making things right. Annie may very well not have trusted herself to handle her own problems as she may have felt quite child-like and helpless and consequently split off her needy, dependent parts, projected these onto others and then attempted to fix their problems.

I guess I get a bit over involved, they [friends] ask me for advice I feel like I need to...I can't just give advice I have to go to them and then I have to fix it so ...I...I...I feel like I can't trust people to handle their own problems which I mean I need to start being able to trust but it's difficult I feel like I have to fix situations with people so if someone, if a friend calls me and is having problems with her boyfriend and is crying I'll give advice but then I have to go to her and get in the middle and say you know what's going on and I need to feel like everyone's okay and then I can move on.

As a highly dependent person, Annie may also have been terrified of her own dependent feelings and may have come to associate these feelings with rejection from her parents. She appeared therefore to refuse help and attempts at understanding from others. "I feel more

comfortable helping people and giving them advice, I don't talk to anyone about my problems and I mean I've never asked for advice or support".

This same pattern of relating was manifest in her romantic relationship where Annie confessed to mothering her boyfriend even though she was clearly aware that this did prevent real connection from taking place. In not being willing to take risks and open up emotionally, Annie avoided conflicts, since she gave but did not take from others. This may have prevented the development of true object relations and the establishment of an understanding of the other as a separate person with his/her own intentions and wishes. In attempting to look after and care for she may have defended against being too afraid to truly care for and love others. In looking after others she may also have been compensating for the lack of parenting she received and for not being looked after in an emotional sense. Separateness was a chronic problem since the self could only be experienced through finding a physical other onto whom the other within the self could be projected (Klein, 1937). Thus the experienced difficulty in leaving home and in dealing with physical separations could only be managed by finding an alternative figure for projection.

If he's [her boyfriend] sick I mean I completely become like his mom and he does turn into a baby so, I think he definitely feels looked after which also comes with a negative that you know he wants to feel like I trust that he can be independent too but ja there's this constant worry that when I'm not with him that something bad is going to happen.

In acting towards her partner as a good parent she was also re-creating the wished for love and goodness of the mother and may also be dealing with, in retrospect, guilt over possible feelings of hate and revenge for the maternal failure she experienced. In doing so, she may have been attempting to address the frustration of her past (Klein, 1937). He also became less threatening as a 'baby' who was essentially dependent and could not abandon her, precluding her fear of abandonment and loss. She may have clung by over-mothering him and giving in servitude and tried to make others happy hoping that they would stay. The message was possibly one of: 'I have done everything for you, so don't leave me' (Klein, 1937). Annie appeared not to have successfully navigated the process of separation-individuation as yet, as she had not yet internalised self-regulating functions from the maternal object to enable self-soothing. In Annie's case, her separation anxiety appeared to be quite intense so the lack of tolerance for being alone means that she could not use transitional objects to reduce separation anxiety. The love object was perhaps experienced as something safe and protective but essentially outside of the self.

Transitional space and the capacity to be alone

I feel the sense of panic especially if I'm physically isolated I feel like panic and anxiety that something bad is going to happen and that I need to get company or somehow distract myself it just feels like this monster that is going to come in and I need to fight it off quickly so ja I think it's just panic.

Intolerable persecutory objects may have been internalised and possibly threatened the self with annihilation when Annie was alone. She may have not been able to internalise enough good objects that would have made her feel safe and was possibly stuck with rigid internal ones which contained parts of herself but also of the malevolence she had experienced in her exposure to domestic violence. Lacking transitional objects that facilitated the capacity to be alone, the internalised persecutor may have threatened to destroy from within. The internal experience of being abandoned was perhaps merged with external reality of being alone and internal reality was felt to be terrifyingly real (Fonagy, 1999b; Weinberg, 2006). "I mean there were instances where my mom and sister would go away and I would be home by myself for a weekend and it would just be awful, I'd feel very suicidal, it would just be a struggle getting through it".

Inconsistent experiences with parental figures who could be both benevolent and rejecting may also have led to an internalised negative model of self, associated with anxiety over acceptance and rejection as well as a preoccupation with attachment needs (Larson & Zakalik, 2005). These adults are believed to perceive themselves as lacking in worth, as doubting their own value as relationship partners, fear abandonment and experience great attachment anxiety which may have been the case with Annie. In identifying with her mother's projected needs for caregiving, Annie became what others needed her to be rather than fully developing her authentic self, thus she turned to others for validation of her tenuous sense of self-worth. Compliance therefore became crucial to attaining acceptance and approval from others. Annie herself was able to reflect upon this up to a point: "I guess from a young age I busied myself with other people and making sure they were all okay, making sure my sister can't hear what's going on, so I think I'm just not familiar with sitting by myself and not having chaos around me, the quiet is uncomfortable, yeah" She followed this by stating that: "All the memories I have there is this underlying feeling like I loved people more than they loved me...including my parents" and again "It's almost as if I wouldn't exist if it weren't for other people...".

This seems to have had a profound effect on Annie's sense of self leading to impressions of experiences where she felt unimportant and uncared for, where insecure attachment states of mind were bred. When asked about what she would do when feeling rejected, Annie stated: "I'd just get very quiet and internalise it, just feel like I wasn't worth a reaction that I just had to be...".

A false self may have emerged as a defence and response to environmental demands where compliance hid and protected the true self against exploitation by others (Winncott, 1960). This false self was built on identifications (Winnicott, 1960b) and on introjecting parts of external objects.

I feel I missed that kind of stage where everyone was exploring who they were and trying on different hats and what fitted and what didn't...so...the...I...I don't feel secure with who I am, there's certain things that I don't like, and things that I do but not

to the extent where I feel like secure with who I am. If someone were to ask me you now how do you define yourself as a student, as a girlfriend, I don't know, like I just don't feel secure with that or who I am.

Available stimuli were possibly introjected as a basis of a sense of self that was sometimes felt to be alien and not quite real (Fonagy & Bateman, 2008; Weinberg, 2006). "...I feel I pick up on other people's mannerisms and their interests...so it's very fleeting, depends who I'm interacting with and yeah, it's just not stable at all, I sometimes worry that people think that I keep changing and how they perceive me".

Although everyone develops a false self which is adaptable, can compromise and protects the true self from exposure, when issues become crucial the compromise ceases being allowable. The true self then overrides the false self (Winnicott, 1960). In Annie's case there were times when the compromise continued even when doing so made life intolerable. This was the case when at 18 years of age pressure from her parents drove her to pursue tertiary studies overseas: "Well, my mom and dad wanted me to go and I got a scholarship and I felt like I couldn't say no. It wasn't for me and I was miserable".

Here the true self did not override the compliant self and the time spent away, although short, evoked misery because she could not maintain the security of parental love. Separation thus came to symbolise the loss of a part of self. When asked about creativity and spontaneity Annie also reported: "My mom and dad wanted me to go straight into the kind of academic work and a lot of the time I just feel like I'm not in the right mind to just explore or be creative" and "I feel a lot of pressure just to please my parents".

In adopting a caretaking self towards others as evidenced in statements like "I need to feel that everyone is ok", Annie attempts to maintain relationships without taking the risk of developing intimacy. This makes it difficult for significant others to reciprocate caregiving, something she desperately wants but cannot accept.

Despite Annie's anxiety and search for self-definition, she was able to attain a secure attachment classification on the AAI. This is possibly a state of earned security as a result of her long-term therapy, her search for maternal attachment substitutes and her current relationship with her boyfriend which may have provided her with the ability to have great insight into her experiences and struggles and to engage coherently about these. However this appears to be a largely cognitive achievement which allows for some soothing. However, emotionally she may not have internalised a strong enough soothing object which leaves her at times, still feeling and behaving according to older patterns of relating.

Transference-Counter transference

In her identification with the maternal object, Annie too portrayed a remote and distant stance which was difficult to connect with and made the establishing of rapport initially difficult. There was a prevailing sense of never quite being able to get in touch with Annie's hidden and protected true self. There were also moments of regression on Annie's part

coupled with pressure on the researcher to understand and perhaps make Annie feel understood. This elicited a counter transferential response in the researcher to provide therapeutic clarification and emotional containment during the discussions. There were also times when the caregiving self in the participant emerged and maintained a need to provide assistance and in some way rescue the researcher from her plight of finding participants. Presumably this communicated a token of provision of assistance or instrumental care in the hope of circumventing rejection and psychic abandonment while avoiding real connection. For instance at first Annie was quite direct about her intention to be helpful: "Uhm, it was a little bit difficult I'm...I 'm not usually, not usually open I don't really talk about anything uhm, it is a unique situation where I feel like uhm, you know I want to help you with your research". But a few moments later she became a little defended about really engaging with the topic of the interview: "I think I said everything last week yeah, there's nothing new".

7.3 Summary

In this chapter three participants' personal experiences of their exposure to domestic violence were analysed and discussed. Although they all depicted features of preoccupation with aspects of their relationships with their parents, this was more prominent with Kreveshni who was classified as preoccupied with regards to attachment states of mind on the AAI. The other two participants demonstrated secure attachment states of mind which could have been earned due to experiences with attachment substitutes and through long term therapy. Their spontaneous reactions to their experiences of domestic violence seem to have been resilient in that they chose to seek assistance and connection with others that could help them cope. Kreveshni too had attended therapy but this had been undertaken in her adult years and she had remained quite isolated in childhood. It is possible that as she carries on with therapy and in reaching out to supportive others, she too may reach an earned security status of attachment.

All these participants demonstrated experiences of considerable separation anxiety in childhood depicted in their unwillingness to separate from their maternal figures and attend school or camps. Their SOC scores differed greatly with two participants (Kreveshni and Annie) obtaining the lowest SOC scores for the group. The third obtained the highest SOC score for the group but she had access to a supportive and alternate maternal attachment in childhood, which neither of the other two had. For Kreveshni and Annie, their Comprehensibility score was the most compromised revealing concerns in their capacity to find the world to be a predictable and ordered space, thus depicting anxiety and mistrust in others. Their experiences of the domestic violence were also fraught with more intensity and the violence was also more frequent than for other participants. All three participants also demonstrated a marked concern with protecting the mother and/or siblings during the domestic violence, with two (Kreveshni and Annie) intervening directly by placing themselves between their parents during altercations.

CHAPTER 8

FINDINGS III

8.1 Introduction

Although each individual participant appears to have developed their own way of managing their traumatic experiences of childhood, there also appear to have been areas of shared experience and response to trauma among them. These main areas of common and shared themes recognized in the texts, have been identified as exposure to cumulative trauma, affect regulation, fear of intimacy and lastly the various areas of demonstrated resilience which are directly connected to Antonovsky's (1979; 1987) three main components of the SOC, namely; Comprehensibility, Manageability and Meaningfulness.

8.2 Common themes

a) Exposure to Cumulative Trauma

Some aspects of experienced trauma and symptoms are unique to individuals (Trappler, 2009) although in this study common areas of experiences to trauma were also found. All participants were exposed to repeated episodes of domestic violence between their parents through witnessing, overhearing and experiencing the physical violence in the marital relationship directly. Five of the participants (Kreveshni, Ilsa, Jane, Lerato and Annie) experienced physical violence and /or harsh disciplinary methods as children and into their late teens. In Kreveshni and Annie's case they sometimes incurred injuries such as scratches and bruising from their direct attempts at intervening during the parental conflict in order to protect the primary caregiver. Ilsa, Jane, Lerato and Annie were sometimes beaten by one or both of the parents in inappropriate and excessive expressions of anger by parental figures which continued into adolescence. Sometimes this was done on bare skin and sometimes objects were used.

One participant (Leigh-Ann) experienced the traumatic loss of her mother as a result of the violence. In most cases the domestic violence only ended when the participants entered their late teens, in Hannah's case the domestic violence continues between her parents. In the case of Ilsa, Lerato and Annie only a divorce between the parents ended the violence. This suggests that in this particular sample the violence was considerably persistent and parents clearly did not alter their behaviour despite the traumatic effects on their children, raising questions as to the conscious awareness by parents or their capacity for reflective function, in recognising the distress their children were experiencing.

In only two cases, that of Jane and Kreveshni, were parents motivated to modify their relating although this came late in the development of both children, one reaching late adolescence (Jane) before the cessation of the violence and the other reaching adulthood (Kreveshni). The participants in this study often made use of splitting, projection and

projective identification as defences to maintain relationships with both parents and remain connected in some way.

Most of the participants may have met the criteria for Developmental Trauma Disorder in childhood. This is a relatively new set of diagnostic criteria which was proposed by Bessel van der Kolk (2005) due to gaps in diagnostic systems which often misdiagnose or 'overlook' the impact of developmental trauma (Stolbach, Minshew, Rompala, Dominguez, Gazibara & Finke, 2013). All participants were exposed to prolonged and repeated episodes of marital violence, they also experienced disruptions of protective caregiving and extreme affective states of fear, anger and loss in childhood. Most demonstrated difficulties at times, with self-soothing in childhood (Hannah, Kreveshni, Ilsa, Jane, Lerato and Annie). This was sometimes expressed in somatisation of symptoms of anxiety and fear such as in Hannah and Kreveshni's case. For Ilsa, Jane, Lerato and Annie this was evident in the panic experienced during separations from their parents. Kreveshni and Annie also experienced prolonged states of illness where physical symptoms were undoubtedly real as were their attempts to attain caregiving from primary objects of attachment through the sickness. It may be significant that these two participants attained the lowest SOC scores of the sample given the SOC's positive correlational link to states of health and negative correlation with states of illness in individuals (Antonovsky, 1979, 1986).

In relation to Developmental Trauma Disorder, some participants (Hannah, Leigh-Ann, Lerato and Annie) made use of dissociation to varying degrees in order to avoid dealing with troubling affective states. They related feelings of numbness and at times during the interviews, an outright lack of current feeling related to trauma and loss was evident, suggesting the use of these defences into adulthood. This dissociation appears not to be pathological in nature and seems to have been necessary in order to attain some distance from past experiences and for adaptive functioning and development in other areas to continue. Isolation was also prominent in most cases, either accompanying overprotection by the mother figure as with Hannah, or relating to self-imposed isolation as with Kreveshni, Ilsa, Lerato and Annie. This was often the case in relation to socialisation and the establishment of friendships expressed in paranoid-schizoid fears of others. In some cases it was for fear of being away from home and unable to 'protect' the mother. Some of the participants retain this isolation into adulthood with regards to romantic attachments.

b) Affect regulation

Exposure to cumulative trauma also disrupts internal states of self-regulation (Trappler, 2009) making it difficult for individuals to internalise self-soothing functions. All of the participants demonstrated a preoccupation with the safety of the primary caregiver which was often expressed in intense separation anxiety as well as in annihilation anxiety in the context of extreme fear of the loss of the object. Annihilation anxiety arises out of the fear of the loss of the object which is translated to the loss of self or threat to self regarding physical and psychic survival (Hurvich, 2003; Kira, Templin, Lewandowski, Ramaswamy,

Ozkan, Mohanesh & Hussam, 2012; Winnicott, 1971). Due to the lack of differentiation from the primary caregiver the child therefore experiences the threat to the maternal figure as a threat to the self.

Hannah, Leigh-Ann and Lerato reported consciously fearing the death of their mothers from the violence inflicted upon them by their fathers. Hannah attempted to console herself with the availability of alternate attachment figures in the eventuality of her mother's death. Leigh-Ann intervened directly by threatening to take out a restraining order against her father when she was just in Grade 4. Lerato incurred states of helplessness which continued into the present making emotional regulation difficult whenever she recalled the violence. Kreveshni, Ilsa, Jane and Annie experienced considerable separation anxiety from the maternal figure implying a lack of trust in the mother's ability to protect herself and consequently to protect her child from violence and the abandonment of loss. Threats to dependency were often experienced into adulthood and accompanied by fears of being alone and general anxiety in relation to interpersonal loss (Hannah, Leigh-Ann, Lerato and Annie), sometimes in relation to everyday functioning and predictability of environments (Kreveshni, Ilsa and Jane). Some participants received the classification of unresolved/ disorganised states of mind on the AAI, pertaining specifically to incidents of trauma and loss. Two of these three participants had experienced direct violence from their parents and one had physically lost her mother to domestic violence.

The presence of annihilation anxiety has been found to be predictive of poor physical and mental health and to be connected to dissociation, anxiety and depression (Kira, et al., 2012). In these specific participants three had expressed states of suicidality with one attempt at suicide by Kreveshni, as a teenager. Lerato and Annie both expressed suicidal ideation, one in relation to rage of dependency needs not being met and the other in relation to states of annihilation anxiety when left alone. Anxiety and depression however, were reported by three participants (Ilsa, Lerato and Annie) as mental states which were still prevalent in adulthood but were not felt to be debilitating at the time.

Role reversing experiences with parents may have exacerbated the separation and annihilation anxiety felt by the participants as children. Role reversal is typically associated with the neglect of children's attachment needs in the family of origin (Mayseless, Bartholomew, Henderson & Trinke, 2004). Thus persistent role reversing experiences become exceptionally pathological when the child's distress is not met by emotional support from the parent. The level of emotional support then essentially flows one way, from child to parent and it is the lack of reciprocity that intensifies anxiety in the child.

In taking on parental roles the participants were thrust into states of pseudo-maturity which they were not ready to assume. All of these young women reported instrumental and emotional assistance behaviour, in childhood and adolescence, towards parents and siblings, but particularly towards mothers who were perceived as not coping and as incapable of providing these caregiving functions at the time. Ilsa, Leigh-Ann, Jane and Annie

reportedly looked after younger siblings and attempted to protect them from the sounds and sights of the domestic violence. Kreveshni, Lerato, Ilsa, Annie and Hannah were often used as confidantes by their mothers who often divulged inappropriate information about the marital dyad and overwhelmed their daughters with their own strong dysregulated affect. Repeated role reversing is also associated with depression, anxiety, lower identity exploration and a tendency to be a caregiver in adult relationships (Mayseless, et al., 2004). The participants in this study were all, for the most part, compliant, 'good' children who made attempts to rescue their parents, sometimes incurring the consequences of parental aggression upon themselves.

What may happen when a child is encouraged to adopt a caregiving role in relation to their parents is that the child may become overwhelmed with the adult's anxieties, fears and rage. This may tend to exacerbate fears of loss of control, of merging and of self-destruction connected to annihilation anxiety (Hurvich, 2003). The caregiving role that is adopted by the child may then become a way of functioning and avoiding potential emotional abandonment by the parent and later by partners and even friends.

Most of the participants did not remain enmeshed with their parents and were able to attain some physical and emotional distance despite the parents continuing with attempts at role reversing. Periods of separation and attempting to disengage were also present in adolescence as well as in adulthood. For Kreveshni and Annie, however, this proved to be a rather difficult process which they have initiated but are still attempting to maintain.

c) Fear of intimacy

Many of the participants reported an experienced fear of anger, conflict and abandonment which often impacted the stability of their interpersonal relationships. Coupled with strong mistrust in others who are seen as potentially malevolent and untrustworthy, this led to some participants isolating themselves and even avoiding romantic attachments as potentially dangerous to the self. Despite desiring intimacy, Hannah and Kreveshni deliberately found ways of avoiding developing these types of relationships, one confessed to not being ready for this citing fears of infidelity as a reason, the other rationalised her choice by commenting on the apparent 'lack of available good men'. Jane and Lerato however demonstrated the capacity to reach beyond their distrust and fear of intimacy to make real connections with partners that reciprocated love and support.

Ilsa, Leigh-Ann and Annie became demonstrated caregivers in relationships which was something that often led to their exaggerated compliance with partner's wishes to their own detriment and resentment at the lack of reciprocal caregiving. Compliance also manifested as a type of avoidance of real connection and intimacy by provision of instrumental care and a giving in without vulnerability or giving of self on the part of the young women.

Infidelity, usually on the father's side also featured throughout interviews with four participants declaring their painful experiences of this in their parents' marriage. Infidelity of one or both parents seemed to directly affect their propensity to trust others and may have negatively affected their perception of intimacy in romantic attachments.

d) Resilience

Resilience is often connected to protective factors and the generation of meaning from adverse childhood conditions (Antonovsky, 1987; Makola & Van den Berg, 2008; Martinez-Torteya et al., 2009). Participants sought to generate meaning and understanding of their childhood experiences in a variety of ways. They sought to understand their parents and the reasons behind their behaviour but they also clung to benevolent memories demonstrating balance and valuing of attachments. These factors coupled with positive self-protective reactions to trauma also ensured that they could survive their traumatic environments while remaining connected to caregivers in childhood. In adulthood these factors often assisted them in maintaining some emotional distance from the marital relationship while remaining in relationship with parents who were loved but whose behaviour participants, at times, found to be frightening and frustrating.

d (i) Forgiveness and memories of benevolence

All the participants demonstrated the valuing of their attachments to their biological parents and for some, also for their stepfathers (Ilsa and Annie). All these young women communicated the ability to understand, to some extent, the origin of their parents' difficulties with trauma and their consequent engagement in domestic violence. They attributed this to their parents' childhood experiences of violence and abuse which gave meaning to their own experiences (meaningfuless) with their parents. This could also be perceived as positive attempts to impose structure and order into environments characterised by the chaos of domestic violence and as therefore connected to demonstrated comprehensibility. As a consequence of these attempts they all expressed differing degrees of forgiveness towards their parents for the domestic violence and the trauma it had caused in their own lives.

Memories of parents being caring and benevolent were also shared with specific times when parents were protective, affectionate and available:

Ilsa: ..my mom...like if...like I had measles the one time and she went and got me a singing box because I wasn't allowed to watch TV.

Kreveshni: ...and I was very sick and didn't go in a lot but she was always there to support me, and whenever I thought no I can't do this she would be there to help me ja.

Jane: ...so we always had absolutely everything that we'd need and my mom used to have these tickle fights with us which was ...we used to ask her mom please tickle me please tickle me and then she used to tickle me to the point I used to lose my voice, I used to laugh so much.

Fathers were equated with times of shared humour and conversations on shared topics of interest. They were also perceived as providing recognition for the academic success of their daughters. Holding onto this goodness evidenced in parents may have served to encourage movement towards the depressive position in participants as they negotiated their experiences in the present.

d (ii) Earned security of attachment

Researchers maintain that there is evidence for the continuity of attachment organisations across the lifespan (Waters et al., 1995) while others concede that these may change according to new experiences (van Ijzendoorn, 1995; Slade, et al., 2005). In these participants' cases it remains difficult to establish with certainty their attachment styles in childhood although there is evidence of separation anxiety and insecurity related to primary love objects whose markers remain evident in ongoing symptoms of anxiety, depression and preoccupation with the maternal object. However, most of the participants (6/7) did classify as secure on the AAI which may be a state of earned security of attachment given their early experiences within their family. Allen and Miga (2010) further suggest that insecure attachment in adolescence is associated with ongoing difficulties in relationships with parents making it difficult for teens to move beyond this and forge ahead with relationships with peers that are supportive. This was not the case in this study, in fact all of the participants managed to foster a few supportive friendships in adolescence and adulthood which remained to the present and this will be further discussed in the following chapter.

Through therapy, some of the participants (Kreveshni, Ilsa, Lerato, Annie) managed to engage more with the world and eventually to either foster new romantic relationships and/or friendships of differing emotional closeness which became resources for them (manageability). All experienced a shift from isolation to reciprocity in friendships, even those participants that had not attended therapy sessions. This allowed for the construction of new objects in some cases and of a more beneficial environment where they can continue to grow. Therapy, for those who engaged in the process, may have provided a transitional space for further differentiation and greater relief so that a sense of self may further emerge, be experienced as different and as painfully but necessarily separate. This process suggests an ability to draw on resources in the environment which is linked to manageability and meaningfulness as components of the SOC. Therapy may also provide an environment where the experiences of childhood may be better understood and ordered impacting the development of comprehensibility in the individual.

It is possible that their ability to process affect and memories around attachment in alternate secure environments such as school and the therapy room may also have been a mediator to the development of secure attachments in relationships external to the family of origin and also to their ongoing development of emotional regulation (Allen & Miga, 2010).

d (iii) Coherence

Most of the participants demonstrated the ability to discuss their experiences in a coherent way on the AAI. They had evidence for most of what they reported and they were cooperative and clear during the interviews. There was confirmation that they all had taken the time to reflect deeply upon their childhoods and their early attachments. They were also able to comment truthfully upon the ways that their experiences had affected them in the present and they were open about their own weaknesses such as their inability to tolerate conflict or to learn to establish healthy boundaries with significant others, for example. This could be a form of resilience developed in response to their need to process traumatic experiences and to understand and change patterns of interaction which they all wished for in their own lives.

d (iv) Alternative objects of attachment

All of the participants in this study were able to forge an attachment to an alternative supportive older figure in childhood which provided them with some solace and a sense of being valued and cared for, despite the lack of availability of the primary caregiver. Usually a grandparent availed themselves as an 'angel in the nursery' (Lieberman, 2007) who was internalised as a good object capable of demonstrating love and acceptance to them as children. Lerato relied on her older brother who provided some rescuing from the rejection of peers in her schooling years. Ilsa made a connection with a friend's parents and eventually moved out of her parents' house for 3 months and in with this alternate family. Annie made attempts to attach to teachers but she also recalled her maternal grandfather as a positive figure in her life. Leigh-Ann had a close connection to her aunts, two of whom became her guardians after the death of her mother. Hannah, Kreveshni and Jane relied on grandparents for security and protection. These alternate attachment figures may have, to differing degrees, buffered the negative impact of the experienced trauma on participants, simultaneously fostering hope and a capacity for concern (Winnicott, 1963a). It should also be kept in mind that most parents demonstrated periods of reprieve where there was demonstrated care and love for their children. In only two cases (Leigh-Ann and Lerato) did participants indicate a barren and extremely distant type of relating with father figures who remained exclusively detached, uninvolved and unapproachable.

d (v)Defence mechanisms

Compliance and caregiving were defences engendered by participants in contexts of domestic violence where hostility from parents was to be avoided and proximity maintained (Crittenden, 1999). These ways of reacting ensured that the connection to parents was maintained and that abandonment and rejection were avoided. Participants also made use of a variety of other defences such as splitting, intellectualisation, thought suppression, and humour, for instance, as spontaneous ways of reducing anxiety and maintaining inner equilibrium. These defences were internal resources (manageability) which were often

protective of them especially in an emotional sense suggesting adaptation in their ability to pre-empt parental requirements and respond accordingly to avoid further trauma and loss in childhood.

d (vi) Faith in God as an alternate parent

Faith was a strong component in Jane and Hannah's stories where God was portrayed as an alternate, loving and benevolent parental attachment capable of providing rescuing when parents were not. This discovery of intense faith and spiritual connection seems to be closely linked to meaningfulness and the desire to engage with life and to having a sense of purpose. For these two participants the church environment also provided an alternative family in which they could experience safety, support and sometimes the frustrations that they could not express with their family of origin.

8.3 Summary

Despite the difficulties with separation, intimacy and affect regulation that exposure to cumulative trauma brought, participants demonstrated useful ways of adapting to environments in childhood while protecting themselves from parental rejection, anger and abandonment. Their capacity to seek alternative attachments, to remember positive experiences with parents and to attempt to understand parental behaviour may have afforded them the opportunity to have experiences which served to buffer, to some extent, the effects of exposure to domestic violence in childhood and the subsequent disruption in caregiving that they experienced. In adulthood they all demonstrated attempts to forgive their parents and to seek new relationships which were more containing and helpful for them while maintaining safer connections to parents whom they loved despite their violence.

CHAPTER 9

DISCUSSION

9.1 Introduction

This research study conveys the personal narratives of seven young women participants in terms of their childhood experiences of exposure to domestic violence between parental figures. The exploration of the experience of each individual is perceived to enrich scientific knowledge and as being complementary to other types of inquiries on domestic violence. It does so by filling in potential gaps left open by the plentiful examples of quantitative work on the topic and the generalisations that this often produces. Case studies, by virtue of their very nature of inquiry, provide far more detail and richer data about the experiences of participants than research which focuses on large numbers of respondents. As such they allow for more vivid insight into the personal living experience of those who have been exposed to domestic violence in childhood and the ways in which they may have coped and understood their experiences. This is crucial to understanding participants' internal processes associated with the risk of maladaptation and with protection and positive adaptation, since they were exposed to adversity in childhood (Hauser, Golden & Allen, 2006). There are many responses within these individuals that may only be understood by exploring their development (Rapaport in Buchheim & Kächele, 2003).

This discussion begins and ends with a focus on loving states of mind which were potentially sabotaged in many instances but yet have survived within the participants and even been renewed in different ways for them. The conquering of love over hate and the integration of polarised emotions was a concept introduced by Melanie Klein (1932) during her work with children within a psychoanalytic framework. This concept perhaps epitomises the ultimate struggle for every human being living in a less than perfect world and in less than optimal circumstances where the desire to love and be loved is juxtaposed by hate and aggression, both from within and without. This is the human condition.

It might be fair to state that for children growing up within violent personal environments, the bringing together of love and hate are subject to greater disturbance than for those not directly exposed to violence. Interwoven within this fabric lies the development of self for each participant, the search for meaning as well the longing for and capacity for intimate relationship building. Therefore, the intra-psychic and interpersonal spheres inevitably remain linked since the internalisation of experience formulates internal representations of self, others and therefore of ways of relating (Borden, 2009; Cartwright, 2002). In environments of family violence such as those experienced by the participants, the compounded inner tension between dichotomous emotions such as love and hate, for instance, are likely to affect the quality of internal representations that develop and

consequently interpersonal behaviour also. What may develop is a cyclical loop of links between intra-psychic and interpersonal domains which remain inextricably connected and intersect throughout human development but which may remain more complex for those who have been exposed to domestic violence in childhood than for those who have not. Studies that incorporate the personal and unique experiences of individuals are therefore, very important because these speak to the varied complexity of the participants' internal worlds and the relational environments in which they have been raised.

Initially an attempt is made to discuss exposure to domestic violence within a broader framework of development. This is particularly relevant with regards to attachment transmission, the effects of the violence upon the quality of caregiving and consequently upon a child exposed to domestic violence. After which, this chapter has several, intricate, focus areas of exploration that pertain to recurrent themes, which emerged during interviews, and epitomise the framework of this study. These themes are also pivotal in answering several research questions.

The first focus area is that of the effects of exposure to domestic violence upon participants' mental representations and attachment states of mind (I). This section explores what the representations of self and others exhibited by these participants were and what the quality of their early object relations appeared to be. These representations are discussed within the context of the created struggle between love and hate in intimate violent environments, the level of caregiving available as a result, as well as the effect on emotional regulation in the child where states of intense, dysregulated anxiety were evoked. Issues pertaining to separation and dependency as well as depression and its role in separation-individuation, are examined for participants since these were found to have been prominent themes identified as influencing attachment representational models. Role reversing between children and parents, which was prominently reported by this sample, seems to have contextualised their internal representations and is therefore also examined. Finally, participants' struggles with intimacy, their frameworks of motherhood and of romantic attachments are explored. These last factors inform on whether participants were able to construct new objects, avoid repetitive relationships and secure new beneficial environments, enabling them to continue to develop in healthier ways.

The second area of focus discusses participants' spontaneous reactions to domestic violence in childhood (II) such as; defensive organisations that were cultivated in their specific context of violence, their adaption to such an environment as caregivers and as compliant children as well as attachment states of mind as adaptive manoeuvres. These spontaneous reactions in childhood highlight the demonstrated resilience of children who were forced to adapt to adverse circumstances out of necessity for survival and safety. Adaptation is therefore, identified as a crucial dimension and pertains to defensive manoeuvres being used by each participant in childhood and adulthood, in order to avoid intolerable anxiety and remain connected to significant others. Although these adaptations could be perceived

as pathological responses in adulthood if perpetuated, these factors may in themselves have engendered a sense of control in the participants as children and enabled coping.

The ability of the individuals to coherently discuss their childhood environment and recognise its impact will also be discussed using the attachment literature, and will be related to Antonovsky's (1987) SOC and its dimension of comprehensibility which was an area of greater difficulty for a few of the participants. This area of focus explores the quality of participants' current psychological world as mostly ordered and structured or as chaotic and disorganised (III).

The last area of discussion investigates how participants generated meaning out of their childhood experiences (IV) in the ways that they understood their parents and how they, in turn, chose to relate to others differently. It is pertinent at this point, to hold in mind that all the participants in this study were university students who had demonstrated an ability to manage the pressures of higher education. This sample was specifically chosen in order to access a sample of participants demonstrating resilience. The present secure attachment style of most participants became a crucial element of investigating possible revision of attachment states of mind in adulthood as well as the quality of their attachments in the present. As such this is discussed as a form of meaning making in relationships. Concluding remarks on love, reparation and remembered benevolence are made because these are generative of meaning as attempts at resolution and as such merit reflection. Overall the participants' ability to resume maturational growth and develop the capacity for concern will also form part of the final discussion.

Although these focus areas are positioned as separate to provide the discussion with more structure, these boundaries are not regimented since traces of resilient adaptation to traumatic environments are clearly present in the resulting effects of domestic violence. Equally, effects that are perpetuated into adulthood and which may, in certain contexts, not be adaptive, are also detected in the discussion of resilience. Focus areas inevitably overlap with each other to some degree giving rise to some repetition which has been kept to a minimum but which never the less, reflects the complexity of individual lives in their contexts.

9.2 Contextualising exposure to domestic violence within broader developmental frameworks

There is no doubt that violence between parents has negatively impacted many facets of these young women's lives but not all complications can be solely attributed to this sad state of family relations, although the trauma certainly seems to have exacerbated them. Domestic violence perhaps serves as an indication of the parents' capacity or lack thereof at times to provide adequate or 'good enough' (Winnicott, 1960a) caregiving for their children. However, not all the parents in this study were persistently rejecting, directly abusive to their children or mindless with regards to their child's suffering, although all, certainly and

to differing extents, participated in creating painful family environments for their children at different stages. There were oscillating times in participants' childhoods when parents were available and there were also times when they were not. The difficulty is that these times of emotional absence were frequent and were also often characterised by trauma, great distress and hyper arousal in their children.

While generally accepted theories on the intergenerational transmission of domestic violence, suggest that violence is socially learned and reinforced as a way of conflict resolution in relationships (Alexander, et al., 1991; Black, Sussman & Unger 2010; Franklin, 2010), a recent study by Lohman, et al., (2013) extends the concept of intergenerational transmission further. The researchers argue that it is the relationship between the parent and the child that may impact the emergence of later abusive patterns in relationships rather than just the exposure to violence itself. Somehow the violence becomes internalised within the context of the attachment relationship.

It therefore becomes relevant to also consider the detrimental impact of the domestic violence on the parents themselves and consequently on their abilities to parent. This was indeed found to be an important dimension to consider in this study. Participants' narratives clearly indicated the presence of many instances, during violent episodes and during times of calm, where parents were perceived as being overwhelmed, distant or not felt to provide protection or support and instead relied on the child for caregiving. Adam, Gunnar & Tanaka (2004) report that parental emotional well-being affects the quality of caregiving provided for children. Since trauma negatively impacts the parents' emotional regulation and their own internal representations it would be expected that the quality of caregiving provided for the child would be negatively affected by the parents' response to their own ongoing trauma.

Without negating the detrimental effects of direct exposure to trauma in childhood, what may in fact be more strongly transmitted to the child living with domestic violence, are the malevolent internal representations evoked by such parents, as well as the abandonment experienced by the participants in this study in childhood due to their experienced lack of emotional availability, protection and safety. Participants in this study were exposed to psychological distress on two main levels: That of direct exposure to cumulative trauma, and the complications with attachment that arose from the parents' backgrounds and current violent relationships.

These complications often meant that, as children, their exposure to trauma was not buffered because parents were unavailable. The further complication that arose was that the caregiving system was also the source of disturbance for the child when parents were aggressive towards them and/ or required and demanded caregiving from them instead.

Parents, who were experiencing difficulty modulating their own emotions and protecting their child from abuse, were inevitably found to be unavailable to their children and sometimes even demonstrated persistent negativity towards each other and their children. It follows that they would therefore also find difficulty in regulating the child's distress. This is a double edged sword because it means that not only was the attachment relationship unable to buffer the child's experiences of trauma, the attachment bond itself became the source of disturbance in some cases. Theory posits that internal representations are created within the inter-subjectivity of the child-parent relationship (Fonagy, 2008; Slade, 1999). In this study, some of the parents seem to have been emotionally absent due to their own past and ongoing trauma, and therefore they may have been unable to hold their child in mind. At times, they were also dysregulated and required containment and comfort from their children instead, which became problematic. As a result the internal representations that developed were possibly coloured by the parents' own internal struggles around danger and intimacy.

It is also within this close attachment between parent and child where reflective functioning develops (Fonagy, 1999b, 2008). The child develops the capacity to represent mental states in the self and to recognise and represent mental states of others (Slade, 1999). This enables the ability of the individual to make sense of one's own feelings and behaviour as well as that of others and it is how affect comes to be regulated and understood.

For these participants these opportunities with parents were often and persistently lacking, meaning that the emergence of strong anxiety, fear, loss and hatred in them as children, could not be buffered by security and comfort but were actually elicited by their relationships with their parents. The scaffolding required by the participants as children to enable them in processing and making sense of difficult and complex situations (Crittenden & Dallos, 2009) such as the domestic violence, was also consistently absent. Furthermore, comfort from parents who were distressed, was found to be lacking when most needed by the participants as children and this seems to have disrupted affect regulation in them at these times. This was especially the case during violent altercations and instances of varied types of abuse between parents, where children made attempts to intervene and feared the destruction and potential annihilation of a parent by the other.

At these times, internal representations of endangered, abandoning and malevolent objects became so intense that these invariably had to be defended against through defensive structures that enabled avoidance of the parents' states of mind while enabling connection and proximity to be maintained. This came at a cost to the participants as children with times of dysregulated emotion, disconnection from feelings and the use of particular defences that could have become maladaptive had they been rigidly perpetuated into adulthood. In most cases, what resulted instead appears to have been periods of developmental failure or of developmental gaps. In other words, at times participants experienced difficulties with processing specific traumatic experiences and in talking about these in a coherent way. This supports claims made by Busch and Lieberman (2007) that the

experience of extreme fear in childhood interrupts development and may lead to developmental delays.

However, with some participants the order and structure in narratives of emotionally resolved trauma was usually linked to the attainment of developmentally appropriate separation from a parent and in a few cases, with the formation of a coherent and stable sense of self.

Researchers have documented the transmission of trauma, between parent and child and the transmission of attachment mental states across generations (Bradfield, 2011; Lieberman et al., 2005; Slade, et al., 2005) as unspoken and unprocessed experiences which are internalised without symbolic representation and therefore without clear understanding and conscious recognition. The participants in this study were found to be consciously aware of their experiences but not always aware of all the ways in which their childhood experiences had affected them, especially within interpersonal relationships. What this study revealed was that the experience of exposure to violence coupled with the attachment trauma that ensued, at times, seemed to seriously influence the internal representations of self and other in the participants and their subsequent interpersonal behaviour.

Although none of the participants demonstrated persistent patterns of violence or embraced victimisation in their adult relationships, they did express milder forms of reenactments of earlier experiences with parents. This would perhaps attest to the possibility that what is actually transferred across in intergenerational patterns of violence are the internal representations of relationships between the child and the parents as well as components of the traumatic experience. These internalisations and relationship representations are unique for each child and are possibly mediated by a multitude of factors such as alternative attachment substitutes, cognitive capacity of the child, periods of closeness and security when parents are not engaged in violence, and so on. Consequently it makes sense that some children who are exposed to domestic violence internalise more malevolent objects in the absence of benevolent ones, experience greater internal disturbance and may go on to repeat interpersonal patterns of violence, while others do not.

In this study, although participants were found to have internalised some components of attachment trauma, such as a fear of loss and a fear of intimacy, in most cases these internalised transmissions were not debilitating enough as to prevent the development of secure attachment states of mind in most of them or to disrupt their overall capacity to function adaptively within their world.

Nevertheless there certainly appears to have been a complexity of childhood experiences to be overcome by the participants who were found to be at different levels in their development and at different stages of resolution, but who all also demonstrated redeeming areas of growth and hope for something better. All were able to represent their hurt and anger while communicating a strong desire for better connections with others. They also demonstrated the capacity for volitional action in choosing alternative pathways to resolution such as new relationships and seeking therapeutic interventions. Consequently, embedded in the troubling aspects of these participants' narratives, were threads of resilience, reparation and a need for change.

The exploration of resilience within contexts of domestic violence is perhaps rare within research circles given the propensity to focus on pathology. What is essentially novel and enriching about an exploration of resilience, in this context, is the fact that greater insight is fostered into discovering how young adults who have experienced domestic violence in childhood have internalised their experiences but also, borrowing from Hauser, Golden and Allen (2006), how they have been able to use protective factors to mediate the internal consequences of domestic violence and how their various styles of adaptation have influenced their current attachments. This exploration begins with the effects of domestic violence upon the participants' internal worlds.

9.3 Effects of exposure to domestic violence upon participants' quality of mental representations and attachment states of mind (Research Question I)

In many aspects, participants' internal representations of self, others and particularly of relationships were negatively affected by the adverse environments in their homes and by the quality of caregiving that they received. Affect regulation was often compromised by dysregulation in parents, role reversal and difficulties with separation and dependency. Inevitably there was some form of identification with parents however, the majority also managed to construct new objects of benevolence, to seek new connections with others and in some cases to establish supportive intimate relationships in adulthood. This is rare in contexts of exposure to cumulative trauma, particularly to domestic violence, given the tendency in individuals to repeat patterns of unhealthy relating or re-enactments of such in later attachments in adulthood (Bradfield, 2011; Crabtree, 2009; Celani, 1999; Dutton, 1995, 1999; Herman, 1992; Zosky, 1999).

Participants attempted to avoid stunting relationships in different ways. Some participants were able to establish supportive couple relationships by predominantly holding onto good parts of internal objects but relinquishing some malevolent ones. Others simply acknowledged that they were not ready for such relationships and one participant dissolved a relationship which she found to be non supportive of her. Their conceptualisations of intimacy in romantic relationships also appear to have been subject to disturbance in some cases due to representations of mistrust. Overall, physical separation from parents seems to have afforded them the necessary emotional space to begin to process their trauma and to begin establishing more beneficial environments for their growth. All participants were found to be in a process of transition in terms of evaluation of their internal world and relationships.

However, participants' experiences of domestic violence and its effects cannot be divorced from their unique experiences with their caregivers or from their specific context. Their construction of internalised objects and ways of relating in childhood and adulthood are thus perceived as having been developed within contexts of relational trauma and an understanding of their childhood environments therefore needs to be established.

9.3.1 Early object relating and attachment

The young women in this study were all raised by at least one parent or parental figure who at one time or another demonstrated persistent violent behaviour towards their partner and their children. In their research on attachment, Shaver, Milkulincer and Feeney (2009) found that anxiously attached individuals demonstrated a greater proneness to violence in relationships and that such status applied equally to victims of abuse. Partners who engage in domestic violence were found to be more anxiously attached than those who do not. It would therefore be logical to conclude that the attachment states of mind in the participants' parents would be less than secure or at least that their internalised object relational worlds were subject to serious disturbance. Given findings around the intergenerational transmission of attachment and trauma (Bradfield, 2011; van Ijzendoorn & Bakermans-Kranenburg, 1993), the expectation is that these participants would be likely to internalise these intense and traumatic experiences and thus demonstrate very similar patterns of attachment and internalised object relations as their caregivers.

This trajectory however, is not a linear one and does not lend itself to tidy conclusions, as research by van Ijzendoorn (1995) and Slade, et al.,(2005) shows. Researchers have clearly linked parental reflective capacity and caregiving behaviour with the intergenerational transmission of attachment (Slade, et al., 2005). In others words, it is the parental self reflective capacity, the ability to think about and understand the child or not and the sensitivity in caregiving that may or may not follow, which plays a significant role in the transmission of attachment representations, rather than the mere presence or absence of trauma or insecure attachment states of mind in the caregivers.

Yet there are a number of issues which are tangled within this position and which the results of this study have brought to the fore. One of these is the issue of the traumatised mother, who may at times be unable to provide sensitive caregiving but who at other times demonstrates considerable maternal competence and protection. Indeed, the relationships between participants and their mothers were found to be rather complex and multifaceted with periods of demonstrated aggression, even emotional neglect and absence, interspersed with moments of care, understanding and responsiveness. For the participants of this study, periods of exposure to violence and the disruption to attachments that this caused were not the only memories that survived. There were instances when some parents were remembered as being available, loving and connected. This adds to the complicated overall picture of the transmission of attachment since a parent who perhaps demonstrates insecure attachment states of mind by virtue of being involved in a violent relationship, may

also have instances of redeeming and sensitive caregiving which, in turn, affects the attachment representations formed by their children. This would perhaps explain to some extent why, despite the possibility of insecure attachment states of mind being present in some participants' parents, not all participants carried that same attachment style into adulthood.

Another issue which complicates the intergenerational transmission of attachment is the suggestion by Liotti (2004) that a child may demonstrate differing attachment behaviours and styles with different caregivers. For instance a child may be organised avoidantly²⁹ towards a dismissing mother and yet be securely organised towards a grandmother or alternative attachment figure. This implies that childhood attachment is dependent on a variety of interpersonal dimensions rather than on fixed, characteristics of a particular relationship. There were reasons to suppose that this may have been the case for many of the participants in this study who had access to other, alternative attachment figures in childhood such as extended family members, siblings and friends' families. These figures seemed to have provided intersubjective spaces where security and comfort was a possibility and a reprieve from the domestic violence at home.

While it is clear that all the participants presented with emotional and psychological residues of exposure to persistent violence in the home, they all also found alternative ways of engaging with their strong affective states and of relating within their relationships and these ways differed from their early experiences with their parents.

Bowlby (1988) described the perpetuation of patterns of relating in family attachments as follows:

...a mother's feeling for and behaviour towards her baby are deeply influenced also by her previous personal experiences, especially those she has had and may still be having with her own parents; and though the evidence of this in regard to a father's attitudes is less plentiful, what there is points clearly to the same conclusion (Bowlby, 1988, p. 17).

It is exactly this perpetuation that these young women challenged either through their use of alternative attachment figures during childhood, through their own therapy later in their lives, and/or through the creation of new attachment relationships, all of which appeared to provide opportunities for the internalisation of different ways of relating. Levendosky, et al., (2012) maintain that children growing up with domestic volence have a higher risk of engaging in perpetration or of being victims in intimate relationships. The findings in this study however, suggest that due to a multitude of mediating factors this high risk may be diminished and the likelihood of direct transmission may in fact be reduced significantly.

2

²⁹ Avoidant: a pattern of insecure childhood attachment whereby the child shows no preference for a caregiver over a stranger and tends to over-regulate emotion expecting rejection from a parent (Ainsworth in Bowlby, 1988; Diamond, 2004).

Dismissing: a pattern of adult attachment characterised by the minimising of the importance of attachment, where painful memories are denied and extreme independence from others is prominent (Buccheim & Kächele, 2003).

Researchers such as van Ijzenhoorn and Bakermans-Kranenburg (1993) acknowledge the possibility that early attachment experiences and their impact on later representations of attachment and behaviour can be broken as a function of later attachment experiences with parents, close friends, spouses and therapists. This is due to the provision of a secure base by these relationships, which allows for the individual's exploration and resolution of their early experiences. This is supported by the reported experiences of the participants in this study, but the suggestion that is also made here is that this process could have begun to happen much earlier in their relationships to available alternative attachment figures in childhood, a factor which will be discussed in greater length later. Therefore for some participants, their demonstrated security of attachment in adulthood could be related to different experiences with alternate caregivers in childhood and for others this could be a result of later attachment relationships and experiences.

For many of the participants, the domestic violence occurred during early childhood, thus in order to understand them as young adults it became important to understand the quality of their early relationships. These relationships in childhood are also the relational backdrop to the trauma of the domestic violence and may have contributed to their relative capacities to process their experiences.

(i) Domestic violence as love's saboteur: the struggle for love over hate

Fairbairn (1952) described one of children's most fundamental needs within object relating as follows:

The greatest need of a child is to obtain conclusive assurance a) that he is genuinely loved by his parents and b) that his parents genuinely accept his love (p39)

Klein too, perceived the child's experience of being loved by internal and external objects and their ability to love in return, as necessary for later psychic integration (Lemma & Levy, 2004). When loving states of mind are sabotaged by domestic violence that is persistent and of long duration, the journey towards rescuing love and attenuating hate may be more arduous and fraught with more obstacles than otherwise expected.

Domestic violence in the home can create environments where children may not only question the authenticity of their parents' love and benevolence towards each other but eventually towards the child herself. Some participants vocalised this in their doubts as to the existence of love between their parents. Leigh-Ann stated plainly that she failed to understand how there could be love between her parents when there was persistent domestic violence and she also longed for the opportunity to inquire about this from her father, in particular: "I would have asked him if he loved her and how he knew that he loved her because how do you love somebody and know that you love somebody but you inflict bodily harm, verbal abuse......I would have asked him how could he do that to his children?"

Experiences of parents being abandoning and even directing hostility at them as children were also reported by most participants. Such environments may have therefore created the impression of an excessively dangerous and punitive world for them as children where benevolence was persistently distrusted.

Antonovsky (1987) described the contrast between different kinds of family environments and their impact on the child in the following way:

Coldness, hostility and disregard, even when obvious physiological needs are met, convey a clear message of disvaluation. Play, touch, concern and voice, expressed in infinite cultural variety, state: You matter to us (p. 97).

For Antonovsky (1979, 1987) what was of significance was whether the child was convinced that their environment, physical and social, could be counted on and was not constantly changing or fraught with inconsistency, since this would disrupt the very first perception of the world as comprehensible, disturbing inner coherence. We know that trauma does this (Cartwright, 2002; Hesse & Main, 1999; Lieberman et al., 2007; Mukilincer & Shaver, 2008) and that therefore the process of establishing inner consistency and coherence is obviously unhinged by experiences of domestic violence between parents. The inner process of being able to think about and pay attention to differing thoughts and feelings and categorise them, is therefore, likely to be disrupted.

Klein (1932) posited that the inner world of the individual is composed of paired emotions such as love and hate and envy and reparation. Much of the person's experience contains mixtures of love and hate from the beginning of life which are fundamental to human nature (Young, 1994). Ideally extreme splits are overcome and intense affect is regulated, eventually leading to the ambivalence experienced in the depressive position (Segal, 1973; Young, 1994). If this process were to be conceptualised as existing along a continuum of development of less integration to greater integration, then the participants in this study would perhaps be found to be positioned on differing points on the scale. This is due to the notion that all seemed to indicate varying degrees of resolution and ambivalence with oscillations between the paranoid-schizoid and depressive positions. For instance, states of anger, fear and distrust for parents and others were attenuated by feelings of sadness, loss and the desire for reparation. What is suggested by this study is that for these children who were exposed to domestic violence the resolution and integration that Klein (1932, 1937) talked about is possible but may also remain a far more complex and lengthy process than otherwise expected for those not exposed to violence.

According to Fairbairn, parents are a child's first love objects but equally the first source of frustration, being simultaneously both loved and hated (Fairbairn 1952; Rubens, 1994). In his view, it is in intolerable experiences with parents that the child's aggression, anger and hatred are activated, increasing inner splits between desired but feared and hated internalised objects. Excessive, pathological splits can then be considered to be rooted in interpersonal trauma and as not predominantly originating in the child's psyche.

Therefore, in exposure to domestic violence, not only is the experience of love and hate disturbed, potentially intensifying inner splits, the relationship between the child and her parents is disrupted as intense mental states of terror, helplessness and rage are evoked (Lieberman, 2007; Stanley, 2011). This was evident, for instance, in Jane's narrative about her experience of domestic violence as a child. In an open and verbal display of her rage towards her father, she herself incurred some of his projected aggression.

"He smacked me yes, once I remember my dad was being horrible to my mom I was very defensive of her so I tried to... I suppose now that I think about it, I tried to distract him so I called him a pig which I knew would...would...he would come to me then and he whooped me with a belt...". In her writing, Lieberman (2007) discusses the presence of affect dysregulation being observed as early as the first weeks and months of life in children referred for treatment after witnessing domestic violence. It is then likely that these uncontained and intense states of anxiety and fear may be experienced by children exposed to violence for prolonged periods of time, sometimes for their entire childhood, adolescence and into early adulthood, as was the case with most of the participants in this study. These emotions may be felt in relation to personal safety as well as in direct relation to the safety of the parents themselves. Hannah, for instance, verbalised her intense fear after having been forced to move in with her parents at the age of 12, a state that prevailed into adulthood as she later related reservations about her parents inflicting harm upon each other while she was away at university: "I would always be scared, I think by then the abuse or the violence had subsided a bit but I was always scared, I used to live in constant fear ..." and "Ja I still have fears of them harming each other especially since it's just the two of them and my brother has also moved out...".

In childhood, Leigh-Ann too was plagued by constant fears of losing her mother to the violence that she witnessed on an almost daily basis.

What would worry me was that ...I wouldn't...I was really... I was young but I was thinking about my 21st, I would always think about what I think it would feel like to be 16, 17, 18 and 21, those were my four years that I always...that I'd always think about and when I was young I would think about would I get a chance to see my 21st with my mother, would she be there to throw me a huge party? Wouldn't she be there? So, yes.

These were her thoughts as a young child prior to the age of ten years and these fears became a reality when her mother was murdered during a domestic violence episode. Leigh-Ann was just ten years old at the time. In domestic violence the monsters of childhood fantasy are created and enacted in real life by parents, where these monsters become real internalised images and are not just symbolic representations (Lieberman, 2007). The inner psychic struggle between love and hate, life and death (Klein, 1932; Segal, 1973) is evidenced in the reality of family life where the father becomes the source of danger (Lieberman, 2007) and where both parents fail in their duty to protect. For instance, in the narratives of participants the domestic violence was frequent but there were clear times when family life was also characterised by moments of love and affection between parents

and child. By virtue of the fact that parents are the child's primary caregivers, dependency on them as a secure base (Bowlby, 1988) is a necessary developmental stage experienced by the child and is characterised by the need for love, affection and protection from parents.

During the domestic violence however, the father was often perceived as a perpetrator where outright aggression and hostility were often demonstrated not only towards the mother but also towards the child. This hostility and violence often elicited much fear and hatred in participants, as children, due to the anxiety evoked at the potential for harm being experienced by the self but also by harm being inflicted on the mother. In addition, the failure of the mother to protect the child from such assaults compounded these powerful emotions. Although hatred was intensified at these times it was also evident that participants loved their parents, were concerned for them and being dependent on their mother and father intensified their need for them. The inner struggle between love and hate in them as children was therefore deepened by the violence and lack of protection, resulting in parents being perceived as dangerous and capable of causing physical and emotional damage but also as their source of security. When the violence was of high frequency, long duration or high intensity as to leave signs of physical damage, and this was often the case, their belief in their parents as capable of being benevolent and loving was particularly disturbed, intensifying inner struggles between polarised emotions and fantasies of annihilation and destruction. Participants often related fears around the loss of the mother as a result of the violence.

Lieberman (2007) equated this inner struggle with the convergence of internal and external reality leaving no opportunity for the fears of the child to lessen and become manageable. As stated by Klein (1932), if a child was not exposed to more benevolence than malignancy in childhood, her capacity for developing a hopeful attitude and trust in people would be disturbed. This does seem to have been the case with these participants and their perpetual difficulties with trusting. Although their capacities for trust were deeply injured, they were not necessarily obliterated by such consistent and disastrous experiences. The capacity for love and trust survived, as did hope, which may also have been affected and mediated by multiple other variables in their lives including the internal impetus for healthier states of mind and relationships.

What remains evident is that, as children, the participants' emotional worlds were certainly tainted by their parents' own dysregulated and intense emotional struggles. Regardless of the type of exposure, the children's internal anxieties regarding abandonment, loss of love, physical damage and destruction were amplified, leading to children questioning their own lovability and goodness (Lieberman, 2007). As a consequence the quality of attachment between the child and caregivers was inevitably impacted. For some of the participants, feelings of emotional disconnection to parents were expressed including a sense of not really being 'on the same wavelength'. This disconnection may be the result of the experiences when parents could not be attuned to the child' mental states and the failure of

the main purpose of the attachment relationship, which is to facilitate emotional regulation, particularly distressing affect (Mikulincer & Shaver, 2008; Thompson, 2008) and mentalisation.

Levendosky et al. (2012) describe environments of intimate partner violence as a violation of security in close relationships and as imposing detrimental effects upon mothers and their children through disruptions in relating to others and the developed self representations that result. Domestic violence essentially creates environments where fear and distrust prevail and as such disrupt and may significantly damage the development of supportive relationships between both parents and their children. This was evidenced in this study by participants' preoccupation with their parents and by expressed feelings of disconnection and anxiety which were not soothed. In this context, the children's loneliness, fear and disappointment disturbed their love for their parents leaving them dissatisfied and unable to relate to them (Klein, 1937).

Thompson (2008), and Crittenden and Dallos (2009) report on the need for parents to accept the child's feelings and to be willing to communicate openly about these, fostering self- awareness and the ability to regulate emotion. This is something that appeared to be largely absent in the families of participants where extreme states of emotional arousal rose and fell without safe opportunities for exploration of feelings and experiences, and this was something which was best epitomised in Annie's observation: "...there's been no like family meetings and real resolution around it uhm, so I don't know if ...even as a 24 year old if I really look at it as an adult and can understand it".

Various researchers make mention of the fact that anger and hatred are particularly disturbing affective states for children who are exposed to trauma, and fears of not being able to express anger safely without hurting others may develop, as does identification with the aggressor as a defence against feeling and against victimisation (Lieberman, 2007; Fonagy, 1999a; Rubens, 1994). This was supported in this study as participants struggled with their own feelings of anger and aggression. Lemma and Levy (2004) report on the identification with the aggressor being a direct consequence of trauma. Essentially this identification with the aggressor diminishes helplessness allowing the individual to avoid victimisation (Lemma & Levy, 2004; Lieberman, 2007). Lemma and Levy (2004) go on to describe this dimension as existing on a continuum with more or less concrete forms in terms of identification and its relation to behavioural expression. In other words with greater demonstrated identification with the aggressor, one would expect more demonstrated aggression and with lesser identification, milder demonstrated aggressive states would be expected. This notion is supported by the findings of this study, as all of the participants reported experiencing varying ongoing fears of conflict and discomfort with mental states of anger. They feared their own capacity for destructiveness as well as that of others, as depressive states of fear of causing damage and paranoid-schizoid fears of losing relationships (Klein, 1932; Segal, 1973) intersected. Annie, for instance remained unable to

tolerate dissent for long periods even when it was necessary, because loss of the other was just too intolerable. "...eventually even if I wasn't in the wrong I end up apologising and just wanting to fix it. I don't feel comfortable being angry with other people, uhm".

Alternatively, some participants avoided conflict at all costs, being willing to lose relationships in order to circumvent angry affect towards others and from others. Two participants were disturbed by their own potential for destructiveness and physical aggression and how this had been enacted against a sibling, on occasion. Leigh-Ann and Jane reported feeling horrified at their one episode of physical aggression demonstrated towards their siblings and made concerted efforts to curb such behaviour. Kreveshni, on the other hand, seemed to have displaced some of her anger onto an alternative authority figure thus protecting her love objects from her capacity for destruction. She demonstrated this through rejecting her paternal grandmother and expressing anger and disappointment towards her for reinforcing the violence in the relationship and for not intervening in the family violence even when asked to do so by her granddaughter. She had thus refused contact with her grandmother.

Difficulty with the regulation of disturbing affect such as anger, fear, anxiety and hatred was found to be a recurring theme for some participants in this sample, suggesting that the maternal care experienced in childhood and consequently the internalised ability to regulate emotion may have been compromised in some way. The implication of this is that the quality of early object relating, at least, with regards to their primary attachment relationship, may have been somewhat impoverished in the sense of not internalising an effective emotional container and being therefore consistently able to monitor and regulate strong affect.

Most of the participants demonstrated tendencies to over-regulate emotion, likely out of fear of dysregulation, and to remain compliant in relationships which could sometimes prove to be problematic in terms of having needs met and in asking for support and help when necessary. This may have been a pattern of regulation developed in childhood towards perceived rejection from parents who could not provide containment. This also concurs with the presence of a few features of dismissive attachment, such as slight idealisation of parents and lack of memory for the past, which four of the participants expressed.

One participant, Kreveshni, experienced the converse. She found it difficult to regulate her own distress and anger which was often detected during interviews. This elicited a countertransferential response from the researcher which was evident in attempts to provide emotional regulation through interpretations which were intended to reduce distress. In this case it is possible that by amplifying anxiety this participant maintained proximity to her mother in childhood. This prevented the terror of separation which seems to have been prevalent due to her mother's own trauma and dysregulation. Two participants who were securely attached but demonstrated slight preoccupied features also

seemed to have prominent concerns regarding their relationships with their parents and with past trauma. Discussion of this often elicited considerable emotion but never to the point of dysregulation.

(ii) The caregiving system and affect regulation

The maternal figure

The presence of a consistently available emotional container in childhood enables the individual to develop a coherent representational model (Slade, et al. 2005) of self and of the other and fosters the internal organisation of thoughts, memories and feelings (Buchheim & Kächele, 2003). This function has been predominantly assigned to the mother as primary caregiver and the results from this study suggest that this process may be subjected to severe pressure in environments of violence due to the trauma experienced by the parent. Such a finding supports Levendosky, et al., (2012) when they typify domestic violence as an assault not only on the mother but on the caregiving system as well, and therefore on her capacity to parent. At times, the participants in this study tended to subjectively experience their mothers as either perpetrators or victims, which seems to have compromised the internalisation of the mother as a consistently containing object. These mothers seem to have had moments where they were emotionally available for their children but the persistent domestic violence and perhaps their own attachment trauma, appear to have interfered significantly with the overall quality of caregiving provided.

Domestic violence may not only have seriously undermined mothers' capacities to provide a consistent holding, inter-subjective function for their children, but it may also have fostered an environment where the mothers themselves experienced difficulty in regulating strong affective states of anxiety and anger, and expressed these towards their children. Levendosky et al. (2012) maintain that an abused mother may be more likely to project her damaged internalised objects onto her child thus perceiving the child as being aggressive and hostile like the abuser or helpless like herself. What they suggest is that, as a result, directed aggression and overprotection from the mother towards her child takes place as an attempt to defend the self from perceived further attacks. The traumatised mother may at times be unable to respond reasonably to her child's needs for emotional containment and exploration because their interaction is unavoidably tainted by the marital violence and its effects on the parent's state of mind. This may have been the case in the experiences of some participants of their mothers as, at times, being aggressive and punitive towards them as children. However, It is important to note that in all cases mothers were perceived as being more approachable and supportive than fathers. Given participants' ability to cope with life in general, it is hypothesised that bonding between mother and child in infancy may have been better than later in childhood. This may have been due to the infant's complete dependency upon the caregiver and due to fewer challenges to parenting and to a reduced need for separation. As participants became older, parenting demands would have increased. These perhaps exceeded the traumatised mother's tolerance for stress due to

the challenges of traumatic symptoms in their children and the need for separation that their children's development would have brought.

Some of the participants seemed to experience their mothers as perpetrators on occasions, especially when maternal anger was discharged against them. For a variety of reasons mothers in violent relationships may find difficulty in modulating their own emotions and dealing appropriately with fear, frustration and anger. Research suggests that mothers who have experienced domestic violence may be more harshly punitive with their children (Lieberman, 2007; Stanley, 2011) and this was indeed the case with some of the participants where mothers seemed to directly vent and perhaps displace their feelings of anger and hostility upon their children. Often the destructiveness of not just the father, but also of the mother, became barriers to their ability to process and regulate their own distress. Annie in particular, was physically hit by her mother well into her late adolescence.

I remember it carried on until age 18 uhm but it wasn't on the bum like a spanking it was just hitting me uhm and the one time it was because uhm, I was very...I had an eating disorder uhm, I was eating too slowly according to her and she was just frustrated and she hit me uhm I felt like...I mean I know people who spanked their kids I just felt like it carried on for too long.

Jane also experienced her mother as dangerous during adolescence, and food and meal time became a source of hostility instead of nurturance and connection. Jane perceived her mother as rigidly forcing her to consume entire meals and developed fantasies that her mother was trying to poison her. "let's see ja and then I suppose when I became a older teenager my mom became quite sadistic actually and quite toxic...". She was able to reflect on these fears, with hindsight, as irrational, but the presence of the fears allows a glimpse into her subjective experience of her mother at that time.

Hannah reported on her fear of her mother's anger which was often unleashed on her brother and which sent a direct message to her daughter that she would be better off complying with maternal restrictions or else. "I think I went out of my way to not really upset, especially my mom because I saw her more beating up my brother than anything else, so I would go out of my way not to upset her and I think that is what caused me not to like her much, ja".

Lerato too recalled the beatings incurred by her brothers at the hands of a mother who was upset and very angry. In this case there was an instance where the children were beaten with a pipe. When both parents are violent the child struggles to identify with a protector, the world ceases to be predictable and it becomes confusing to differentiate between safe and dangerous environments (Lieberman, 2007). For some children such as Hannah, Lerato and Annie, the primary caregiver may have served as both a source of fear and of reassurance and activation of the attachment behavioural system led to conflicting motivations as pointed out by Fonagy (2008) and Hesse and Main (1999). In other words, as

children they desperately needed their mother but were simultaneously afraid of her aggression.

Environments that are unsafe therefore place the quality of maternal care in jeopardy negatively affecting mirroring, holding (Winnicott, 1960a) or attunement (Bowlby, 1980) between mother and child. This in itself really is the cornerstone to the development of affect regulation in the child (Borelli, et al., 2010). Holding denotes not just the physical holding of the child but also the management of the environment where impingements that could derail healthy development are managed by the mother (Winnicott, 1960a). The third space is occupied by the father who holds the mother and manages the environment for the mother (Winnicott, 1960a) maintaining a role of protector over her, their relationship and her role as mother. For these participants, in the presence of violence, the father was experienced as persecutor and as making the environment intolerable for the mother, who in turn may have been focused on avoidance of aggression from her partner and on self-preservation. The presence of a holding space or of attunement to the child became difficult and was unlikely to develop to its full necessary capacity.

Klein (1937) claimed that the maternal object is the child's first connection with the environment and as such the primary object of love, when needs are fulfilled, and of hate, when needs are frustrated. The mother provides the holding space within which the child's affect, impulses, wishes and needs are managed, tolerated and mirrored back to the child in a way that makes sense to her/him (Winnicott, 1945, 1971). It is this utmost dependence on the mother that enables later development of autonomous functioning and separation-individuation or interdependence (Kernberg, 1985; Fairbairn, 1952; Fonagy, 2001; Mahler, 1968; Winnicott, 1963b).

A lack of such mirroring and holding combined with domestic violence may have evoked confusion in the participants as children which made comprehensibility difficult where events were not ordered or mentally categorised and where emotions were frightening. This was most pronounced in three of the participants where, noticeably, the aggression between the parents seemed to be more intense or complex than in the other cases. In Ilsa's case, for instance, the sexual abuse of the mother was clearly traumatising for her, leading to direct attempts to 'kill that stuff' or to avoid memories and annihilate from consciousness any reminder of disturbing experiences. With some of the participants the physical violence was very frequent, almost happening on a daily basis and as children they would attempt to come between the parents in attempts to stop the conflict thereby incurring some physical damage themselves. These types of interference in the primary relationships with parents were most predominant with participants who displayed more preoccupied features in their attachment states of mind.

It is possible that in these particular families, where mothers had to be constantly vigilant regarding their physical safety, that their emotional availability was more seriously compromised leading to a greater disconnect between mother and child. As a result of the

violence the children experienced intense emotional arousal and a state of calm or tolerability of this affect was not re-established by the caregiver possibly due to their own incapacity and due to environmental strain (Fonagy, 1999b). In itself this exposure could have been the source of emotional dysregulation which was inevitably linked to the lack of protection and to the unsettling of their trust in their parents (Lieberman, 2007) as a safe and secure base (Bowlby, 1988).

The Regulation of intense emotions

Antonovsky (1987) distinguished between emotions which provide a motivational basis for action and those which were likely to paralyse. He argued that sadness, fear, pain, anger, guilt and grief mobilise the person to use resources while anxiety, rage, shame, abandonment and despair were more diffuse and tended to elicit unconscious defence mechanisms. Paralysing emotions may tend to be amplified and elicited more forcefully in environments where violence is practiced between family members and where destructiveness is not controlled, but rather unleashed upon others. In themselves these amplifications of affect make the organisation of thoughts and experiences very difficult and affect the development of comprehensibility and coherence in the child. The world is experienced as chaotic, disorganised and unpredictable. The fact that there may not be an opportunity to talk about experience nor to be consoled by a parent suggests that resources to manage the hyper arousal may be minimal, leading to a greater propensity to use more rigid, unconscious defences to ameliorate the pain and distress felt. Since the child will also struggle to derive meaning from the experience of violence, the development of a strong SOC may be further negatively affected or rather, less enhancing life experiences may thus be available to the child to facilitate strong SOC development (Lundberg, 1997).

Mobilising emotions³⁰ on the other hand tend to be experienced in normal stages of development as suggested by theorists like Klein (1937) and Winnicott (1958a) and are not necessarily subject to undue magnification in environments that allow for containment, thereby being more connected to a strong SOC and therefore more manageable and tolerable. People with a strong SOC are therefore more likely to have been less exposed to exacerbated paralysing emotions and due to a strongly developed SOC, experience the regulation of emotion as easier. They are also more likely to be better able to describe their emotions and to feel less threatened by them. Tension is thus less likely to be transformed into stress.

In the participants in this study the presence of diffuse emotions may have been more prevalent and intense, since violent environments were coupled with reduced maternal care, making the development of a strong SOC, in the child, problematic. This appeared to be the case with many of the participants who not only attained lower SOC scores than

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³⁰ The exception here lies with anxiety as a feeling and object relations theorists, unlike Antonovsky, would tend to classify it as a commonly felt emotion which could be both amplified in domestic violence or perhaps attenuated in more positive caregiving environments.

expected in the general population but who also reported feeling rage, emotional abandonment and great anxiety during domestic violence. In addition some of them were also required to provide solace for uncontained parents. Kreveshni, for instance, would be approached by her mother after each incident and the parent would then discharge angry affect about the father in front of her daughter who was very young at the time. This continued for years and was perhaps an indication of the mother's difficulty in regulating her own distress, let alone that of her daughter. The participant reported feeling overwhelmed not only by her own emotions but also by those of her mother and was quite consciously aware of the confusion that this evoked.

Another of the participants, Ilsa, experienced considerable shame and rage when her mother disclosed details of the sexual abuse present in the marital dyad. The relationship between mother and daughter only began to recover years later. Due to the mother's own unmet needs she may also not have been able to hear or see her child's own needs (Lieberman, 2005). A dangerous scenario possibly developed since the capacity for the regulation of intense emotions such as shame, for instance, is developed within the security of the attachment between child and primary caregiver, as is the capacity for self-reliance and later, for independence (Sroufe, 2005). Therefore, for these particular participants, separation issues seemed to have been more magnified than for others.

Radke-Yarrow (1991) poignantly relates how sad and anxious mothers expose their children to emotions of sadness, helpless anxiety and to constant tension on a regular basis. Due to their difficulty in managing their own emotions, they have difficulty assisting the child to regulate emotional states. Affection therefore becomes merged with anxiety states and fused with chronic maternal distress. This may have been the case with one particular parent who was perceived by her daughter, Annie, as being anxiously controlling although she meant to be helpful. " ... she's like can I come over can I help you, you can't help me you can't do it you know, uhm and there's this constant need to just take over situations and just control my life which is difficult...".

As a child, Annie, seemed to take into herself the anxiety of the caregiver and a secure base was likely to have been compromised. Radke-Yarrow (1991) also reported on anger tending to be expressed cyclically with sadness and anxiety filling the time in between outbursts (Radke-Yarrow, 1991). This was the case with some parents and several participants spoke about mothers being depressed and demonstrating anger towards them or their siblings. The other mothers tended to be perceived as being perpetually distant.

Fonagy (1999b) maintains that the adult's overwhelming anxiety and fear is projected onto the child and a potentially persecutory and abandoning object is internalised that is ultimately experienced as 'alien' and not a true part of the self. The parents become internalised as abandoning and rejecting figures that terrify from within. Since there is little experience of safety, attempts at keeping safe cannot be experienced from within, except within a narrow strip of the familiar world with people that keep the threat of disintegration

at bay. This seems to explain some participants' struggles with internalising safe objects that could provide comfort. Ilsa and Annie, for instance, declared experiencing difficulty with being alone, fearing the 'quietness' and loneliness. This was also most evident in Annie's narrative of despair and intolerance for being left alone where the good, comforting object was experienced as external to the self. Dependency upon the mother therefore became over pronounced in childhood in this case. "I think I tried to overcompensate by just being around her all the time, she used to tell me stories of how at...I used to go to my friends parties and she'd be sitting with the moms, I used to sit on her lap and just hold her face and kiss her all over her face".

Needing and looking for a reflection of herself in her mother's face she may have instead found her mother's own fear and anxiety which she held and managed for her mother. This may have been expressed in anxiety at separation from the love object and in a tendency to cling. The mother, if she was incapable of accessing her own feelings of nurturance and warmth, could not provide caregiving and may have projected this role onto the daughter (Levendosky et al., 2012). As a child and adult she continued to long for the mother and extreme dependency had developed which suggested a lack in separation-individuation (Mahler, 1968) throughout childhood development. When the separation became unbearable this may have led to the development of a more rigid false caretaking self (Crittenden, 1999; Davar, 2010). However, all the participants in this study demonstrated this, albeit in different ways. As children they seem to have recognised that by being 'good' children, complying and looking after the mother or their siblings, they could avoid rejection and direct hostility from parents while at the same time providing the caregiving to others that they would have liked to have received themselves (Klein, 1937).

The child fulfilled the protective function

Various of these young women reported rarely needing to be disciplined by their parents and quite readily took on the protective role over their younger siblings. Although this may be viewed through a potentially pathological lens, this reaction in children may actually be adaptive in environments that are dangerous and neglectful. Kreveshni for instance, was unable to recall ever being spanked by either parent for any misbehaviour. "I was very reserved so I don't think even by mistake if I did something wrong…so they would say this, why you shouldn't do this, because so because I was so withdrawn and never did anything which could be…. where there could be a reproach…".

Jane recalled protecting her younger sister whenever altercations between her parents ensued.

...I always used to take the older child responsibility and try to entertain her or something like play...I remember trying to play very noisily so she was into cars and stuff as a kid, uhm as well so we used to play with cars or the kind of thing that would make a lot of noise, that would try and distract her, maybe unconsciously distracting myself as well but I used to always make it the...you know, ja.

Ilsa at one stage had to take on the role of mothering her much younger sister due to her mother's emotional unavailability. "...a lot of that time my mom was very depressed 'cos I would look after my sister and...uhm...my brother had also gone off to boarding school so he would just be there in the holidays and he would never believe what was going on even if I said to him...".

Leigh-Ann too consistently protected her two younger siblings by taking them to her room and attempting to alleviate their distress despite her own fears and anxiety being very palpable. "[I would] Try to console them [siblings], because obviously they're small they don't understand and are crying."

Levendosky et al. (2012) suggest that abused mothers may often withdraw and use isolation to distance themselves from painful experiences that would force them to assess the reality and quality of their own attachments. In this self-isolation, they may also disengage psychologically from their children. The reported experience of participants supports this experience of disengagement as there were times when they remained quite aware of their mothers' emotional distance. This may have been especially exacerbated in a parent who was perhaps already experienced as inaccessible such as indicted by Jane.

I would always need help during supper when she was cooking supper for me, I would need help with my homework and I used to come and please mom will you help me and she would always say I'm busy just wait and I used to be...that happened often, often and it was an indication that she wasn't available to me....

Most of these young women described their mothers as frequently being either emotionally remote, socially aloof, depressed or angry. The longing for the unavailable mother did not diminish, on the contrary as Fairbairn (1952) warned, this consequence of persistent deprivation meant that the child became fixated with the object that rejected her. This was indeed the case with most of the participants whose preoccupation with the maternal figure was experienced quite intensely and remained in adulthood. For some their relationships with their mothers improved and progressed into better resolved friendships while for others these relationships remained characterised by strong ambivalence and combined fears of both separation and dependency.

Ultimately, when the mother cannot be the protector, the child's capacity to manage traumatic experiences is negatively impacted (Lemma & Levy, 2004) perhaps making normal developmental milestones such as achieving inner coherence and separation and individuation, more difficult to achieve. The focus here is not meant as a derogation of mothers, many of them provided the best care that they could under severe strain, as did some fathers despite their own psychological distortions. What needs to be highlighted however, is that under conditions of domestic violence, parents often bring with them their own damaged internalised objects and relationships, and in their enactments of these, they often fail their children in their incapacity to parent appropriately and with sensitivity.

The attachment relationship between participants and their fathers was also suggestive of inner conflict and at times of lack of resolution but the predominant preoccupation for the participants appears to have been their relationship with their mother. This was perhaps due to their primary attachment dependency being upon the mother but perhaps also due to domestic violence tending to elicit great splits in the child's internal representation of parental objects, where the mother was often perceived as more approachable, as the one requiring care and protection and the father as the one who aggressed and was frightening. As children, the participants may therefore have been more motivated to seek proximity to the mother than to the father.

The paternal figure

A literature search revealed a dearth of information relating to the relationships between fathers engaged in domestic violence and their children. In the rare occasions when this aspect was investigated, it did not occupy prominent status in the studies or researchers seemed to focus predominantly on the father's personality deficits rather than on the children's experiences of their fathers (Bancroft, 2002; Salisbury et al., 2009; Stanley, 2011;). Levendosky et al. (2012) also report on the lack of research focus on the quality of attachment between children and their fathers in environments of domestic violence. In this study, although the primary preoccupation was with the mother, fathers were also important figures in the lives of these young women and an emergent attempt to address this gap in research is made, while bearing in mind that this mitigates for a need for specific further research to be developed in relation to this particular issue.

Fathers were thought about in complex ways by participants. They were sometimes perceived as being capable of care and as helpful and at other times they were perceived as dangerous and unapproachable. It appears that it was more difficult for participants to integrate the split images of their fathers since there was such a stark contrast between these, especially when the relationship with the father was characterised by both moments of benevolence and contrasting unpredictable aggression, which possibly led to extremely mixed emotional experiences. Violence is an extreme behaviour which possibly made the integration of the father image very difficult for the participants as children. Most of the fathers were reported to be instrumentally supportive but as very seldom capable of providing emotional care.

The image of biological fathers was more mixed than that of the step-father, in that biological fathers were more often simultaneously intensely loved but also feared and hated. Three participants commented on their relationships with their stepfathers. One stepfather was experienced as very distant, as particularly aggressive towards the mother but as remote and hardly emotionally present for the participant as a child. The other two were slightly idealised as parental figures. These two stepfathers had only become a part of the family when participants were already young adults and relationships with them were still developing.

However, the most prominent emotions expressed with regards to fathers were fear, betrayal and longing especially with regards to the domestic violence and its after-effects. Fear in relation to the violence, betrayal due to harm inflicted on the mother and sometimes the child, making trust in the relationship unlikely to develop, and longing in terms of a desire for a safer attachment to develop with a father who, at times, could be fun and available.

Some participants made attempts in adulthood to develop and maintain better relationships with their fathers and this was often reciprocated by the parent with varying degrees of success. All young women, however also made attempts to accept the limitations in these relationships with their fathers who were reported to be emotionally defended and unable to communicate about affect whether this was their own or that of their children.

Attachment substitutes for fathers were sought but not with as much intensity as for mothers. For two participants, God as an alternate father figure was sought after, while the rest of the participants related never having experienced emotional caregiving from a male figure and expressed concerns in being able to receive and accept this from future partners.

The fathers in this sample also seemed to be less involved in their children's upbringing except for occasions of discipline being required or instrumental action such as financial support for the education of their children, transportation to and from school and so on. Only one biological father in this sample was reported as being neglectful in this respect and as not providing instrumental care for the family, with the mother taking full financial responsibility. In Hannah's case the father was perceived as being less emotionally dysregulated than the mother, but this was perhaps due to him not directing aggression towards his daughter and being more approachable with regards to disciplinary issues and exploration such as visiting friends for instance. The mother in this case was often reported to be verbally aggressive and overprotective towards her daughter. There was also bidirectional violence between the parents in this case and these factors may explain why this participant perceived her father as more emotionally regulated than the mother. Despite this, when asked who she would go to for emotional support the participant stated that she would always go to her mother. In other cases the father was predominantly perceived as more emotionally volatile and therefore as feared and less approachable.

When the participants required emotional support in childhood or adulthood they all reported seeking this from their mothers or from alternate mother figures such as a grandmother or aunt but never from their fathers. It is possible that by engaging in interpersonal violence, these fathers clearly communicated to their children that emotional closeness was extremely dangerous and therefore not an option in the relationship. Understandably and as a result, most participants avoided showing any sense of vulnerability or need for emotional assistance from their fathers. Some participants, however, related sharing moments with their fathers when they could speak about shared interests such as Politics and History or even moments of humour between them.

Overall, participants' experiences of their parents were deeply influenced by the domestic violence and the disruption to the caregiving system that ensued. The alternating roles of the mother as a victim of violence and sometimes as a perpetrator of violence against her child, seems to have affected participants' internalisation of an emotionally regulatory function. Their experience of their fathers too seems to have been affected by the violence. The father became a longed for figure who was needed but who was also too dangerous to get close to due to unpredictable behaviour. Therefore none of the participants fully trusted their fathers.

9.3.2 Anxiety

Separatedness in the presence of the mother is a transitional space that affords the child the capacity to be alone (Davar, 2011, Winnicott, 1971). This was clearly absent in several of the relationships that participants had with their caregivers and was conspicuously marked by the high levels of childhood separation anxiety that was experienced by five of the participants interviewed for this study.

Allen & Miga (2010) maintained that internalised anxiety behaviour states may result from attachment insecurity. They suggested that insecure attachment organisations exhibited in separation anxiety states, may give rise to beliefs that attachment needs will not be met by others and that such negative expectations may arise out of negative evaluations of a primary caregiver's lack of availability. The implication of the results of this study is that domestic violence, as a basis for trauma, does damage to the quality of attachment between children and their parents as suggested by Lemma and Levy (2004) and by Levendosky et al. (2012). As such, the expectation to have needs met and for caregivers to be available when domestic violence is present becomes compromised. As a result not only does separation anxiety become an expected consequence, the possibility of injury to the mother and self also increases, giving rise to fears of annihilation that also prevailed for participants in childhood.

When body boundaries were crossed and needs not met, as in the experience of domestic violence, this engendered a lack of safety and threat to body integrity, which appeared to exacerbate annihilation anxiety in many of the participants. This appeared to have been especially intensified in participants who attempted to directly intervene in the physical violence between their parents. This may have been compounded by the fact that clear differentiation from the mother has not been established yet in childhood (Mahler, 1968, 1970), and therefore the threat of loss of the object may have been synonymous with damage and potential loss of self. This internal terror was symbolically made real by exposure to episodes of domestic violence. In environments fraught with harshness, volatility and physical aggression the feelings of dependency in the child become very strongly connected with the unconscious fear that the love object will die or become damaged beyond repair (Klein, 1937; Lieberman et al, 2005). Hannah for instance expressed this in the following way:

...and I always had thought of one of them, one of my parents is gonna die, either my dad or my mom, so I somewhat tried to prepare myself that one of them is going to die or one is gonna kill the other sometime, so I think after that incident I was very frightened but I'd always say even if they died it's alright I'll always have my aunt and my gran...

These two forms of anxiety, separation and annihilation anxiety were found to be markedly present in the childhoods of these young women and were intricately linked to concerns about self preservation and fear of abandonment. These fears were also prominent in their early and middle childhood with some experiencing school refusal and fears of not being fetched from school or of being abandoned in shopping centres. One participant, who was in middle childhood at the time, was on one occasion left alone for the first time at her grandmother's home, yet had to be fetched promptly due to inconsolable anxiety and crying.

Because of the domestic violence, this separation anxiety may also have been linked to the participants' perception of the mother as being unable to protect herself and the child from the violence and possible fantasies of catastrophe and loss. As children, they may thus have come to believe that the mother required protection and caregiving leading to fears of what would happen to her in the child's absence. The need to be near the parent to avoid loss and damage to the mother was strongly communicated by some participants and this was then possibly enacted in anxiety states which disturbed normal developmental life such as school attendance and socialising. This possibly gave rise to fantasies of omnipotent control which protected them from helpless states of mind which were overwhelming. The maternal overprotection experienced by four of the participants in this study also seems to have conveyed to them as children that the world was a dangerous, persecutory place. What may have been implicitly communicated to them was also that the mother herself would need the child to remain near and forgo natural exploration due to fears of possible damage incurred by an unpredictable, unsafe world. This resulted in the participants as children feeling either isolated from peers or seeking this isolation in detrimental ways that made the possibility of external support difficult and which facilitated excessive dependency states between mother and child dyads.

Winnicott (1958a) commented on painful states of loneliness experienced by such children who when plagued by separation anxiety, had difficulty holding onto the love and goodness, and experienced internalised states of abandonment when others were not near. This was the case for a few of the participants where separation from the mother and significant others elicited fears of annihilation. In these cases the good object was experienced as being external to the self and bad internalised objects threatened the self from within when the participants were alone.

Hurvich's (2003) work in this area is of particular significance. He described the experience of annihilation anxiety as both the anticipation of potential threat as well as an experience of real and present danger. Danger to psychic and body integrity is very real as is the

resulting fear of loss of the love object who is depended upon, and the abandonment that may follow. Hurvich (2003) portrays this process as culminating in threats of loss of body and ego control and therefore in fears of the loss of self (Hurvich, 2003). Klein (1932) and Fairbairn (1952) wrote about this state, as did Winnicott (1958b), who termed it unthinkable anxiety and for these theorists fear of annihilation was an inevitable experience for the infant, but one that needed to be managed by the parent. However, for the participants in this study, this was a phase that seems to have been magnified by trauma and parental unavailability. Annihilation anxiety ultimately entails fears of being overwhelmed, of potential disintegration, of loss of self boundaries or object representation, leading to attempts at self-preservation and regained capacity to function (Hurvich, 2003) such as extreme avoidance of separation from the mother or significant other, for instance.

States of annihilation anxiety in relation to potential loss of the mother were quite significantly present for participants. When discussing particular traumatic events, some remained almost frozen in temporary states of helplessness and fear which remained largely cognitively unprocessed in their mind. This was not predominant in their narratives but was noticeable for some. Lerato, for instance recalled memories of the domestic violence in the following way: "I think, no actually I still think we came really close to losing her 'cos it really did get really bad so I still think ja we could have lost her it's fortunate that we didn't ...I think...I think I still feel that very helpless in that situation". Kreveshni too still experienced her memories of such moments in very vivid, raw and regressed states of emotion. "...you see these things happening to your mommy and you want it to stop, so about 5, 6, 7 small so I used to cut in between and there was like this little person there and it was just, it was sort of uhm...I tried to do that..." In both these quotes, it is clear that the affect linked to the memories is still felt intensely in the present, as evidenced by shifts into the present tense and noticeable regression to earlier forms of language usage. In domestic violence such threats take on the unconscious meaning through fantasy of the basic dangers of loss of object and loss of love (Hurvich, 2003) which become realised in the actual physical damage incurred by the mother from assaults by the father and the inability to secure assistance from others.

These fears were also communicated in the profound isolation experienced together with helplessness, anxiety, and aloneness spoken of by six of the seven participants. Eventually these forms of anxiety seemed to be better resolved for the majority of them who were capable of being alone in adulthood and of feeling safe and intact in that space. They still experienced general states of strong anxiety but these were usually managed through preemptive planning of daily life and by securing assistance from peers and partners. This was less so for others. In the latter there were progressions towards separation but great anxiety was still felt. In adulthood, Kreveshni retained fears of separating from a maternal object who was perceived as being too fragile to survive the separation and Annie battled suicidal thoughts that being alone, evoked in her. The individual sense of self was felt not to be capable of surviving such a separation due to fear of the complete loss of connection that it

engendered, alluding to a lack of a coherent self, that was almost paradoxically a comforter and protector to the mother, but that felt great anxiety and dependency in being alone.

Due to the fear that potential loss evoked, some of the participants seemed to almost preempt the mind and needs of the caregiver which elicited parental receptiveness and maintained proximity (Fonagy, 1999b, 2008). As children some would forego exploration, attendance at camps, and the development of friendships with other children, to be close to their mother and provide care. It is possible that this state of mind occupied them as children and was so paramount to psychological survival that it became entrenched in the psyche. The implication is that normal milestones of childhood may have been interrupted by the parentification or the adoption of a parent-like role in childhood before the child was ready to do so.

Kinninburgh and Blaustein (2005) suggest that in such cases the child becomes so intent on surviving the environment that they fail to develop competencies in other areas such as academic functioning, social skills and self confidence to address new challenges. The results of this study suggest that participants were in fact able to develop competencies in some areas, particularly those of academic success and securing close friendships with others. They appeared to experience greater difficulty with separation from their mothers and some doubted their own abilities to succeed despite evidence to the contrary. Therefore the main area of disturbance in this particular study seems to have been localised in attachments to the maternal figure and in their internal representation of the self as dependent. Encouragingly, the majority of participants appeared to be engaged with negotiating these factors and functioning relatively well.

The resulting complication, however, was that dependency and independency needs seemed to have become blurred and were thrown off balance as a result and many of the participants appeared to have struggled with the pull towards autonomy and the terror of loss of self through fusion (Fonagy, 1999b) which they were engaged with and attempting to negotiate in their adult lives. Zvělc (2010) called this a 'fear of engulfment' and described it as a fear of personal loss of freedom and of being trapped in a symbiotic relationship that makes the individual dependent and which smothers. In late adolescence and early adulthood this enmeshment with their mothers seemed to have become problematic for many of the participants, experiencing the simultaneous need for separation and the fear of it.

Most of the participants had managed to achieve a certain degree of separation both in the physical and psychological sense, by moving away from home and living either alone in their own home or at residence on campus. Physical space away from violent home environments may afford the young adult with the possibility to resume the psychological work which enables the working through of trauma. In itself, this opportunity may set in motion developmental processes which may have remained stagnant or frozen due to environmental danger. The seeking of opportunities for connection with others and for

therapy, for instance, may therefore be facilitated by physical distancing which may be necessarily symbolic of emotional separation. Only one participant remained living with her parents, the rest had been able to carve out a living space away from the parental dyad.

The suggestion here is that exposure to domestic violence in childhood and the complications in early attachment that may develop, somehow tend to distort and delay natural developmental processes such as separation-individuation. The development of separation-individuation (Mahler, 1968, 1970) is extended by Kavaler-Adler (2007) to include the flexibility in oscillating between cycles of paranoid-schizoid and depressive positions. Ogden (1986) suggests that individuals will, throughout developmental stages, transition between both positions even as depressive position symbolisation matures. Kavaler-Adler (2007) describes the process as developmental mourning which is lifelong, enabling gradual integration but also simultaneously exposing the person to possible retraumatisation as painful experiences are uncovered. Old objects are then surrendered and new objects are made contact with so that healthier internalisations may be formed and healthier states of separation are engaged with.

Self reflection, processed memories and insight suggest a working through process of hope despite loss, pain and injury (Kavaler-Adler, 2007), providing the continuity of being (Winnicott, 1971), as the development of self-agency is promoted. New forms of connecting with others coincide with new ways of experiencing the self as a separate individual (Zvělc, 2010) and this was indeed how all participants seemed to be making attempts at integration of experiences in childhood. Despite aspects of their development being possibly interrupted and delayed due to experienced adversity in violent family environments, most of the participants seemed to oscillate between unprocessed experiences with loss and trauma and, at the same time, experiencing mourning and new ways of relating in relationships. This process supports what Kavaler-Adler (2007) has suggested in her documented observations of work with traumatised individuals indicating that mourning, resolution and integration happen on a cyclical basis with oscillations between paranoid-schizoid and depressive positions rather than this being a conclusive event.

Although some degree of psychological anxiety remained, what was also evidenced is that the natural thrust towards development resumed in strivings for individuation and intimacy, control of aggression and capacity to love. In other words, the participants did not stop longing for something better even if they may have struggled initially to achieve more integrated states and consequently more supportive relationships. It may be that sometimes the environment was so psychically impoverished that repetition compulsion (Garland, 2004) was engaged in later in life but this was not overly prominent with these participants in that they were able to avoid abusive relationships in adulthood. The effects of their exposure however, were still evident in their avoidance of intimacy, perceptions of others as untrustworthy, their compliance in couple relationships and conflict avoidance.

However, Internal states were not so distorted as to evoke the rigid denial of pain, traumatic loss and trauma or as to facilitate the compulsive evoking of these states in others, as perhaps their parents did through domestic violence.

Bowlby (1980) maintained that grief and mourning appeared whenever attachment behaviours were activated but the mother was continuously unavailable. It is therefore possible that for individuals who have been exposed to domestic violence from infancy such as Kreveshni, Annie, Jane and Ilsa, the mourning process may be a vital one in assisting the resolution of such anxieties. Annihilation anxiety states that remained unprocessed and were perpetuated by trauma in the home may in fact have interfered with some participants' capacities to discriminate between events and categorise these coherently, impacting comprehensibility and manageability. If the world is not coherent and ordered how can one realise what the challenge is? And if the challenge cannot be identified how can resources be mobilised to address it?

As self regulation was interrupted these individuals may have experienced increasing states of anxiety and disruption to what Winnicott (1960a) termed as ongoing experience of being. Mourning the unavailable mother became difficult since fears of the annihilation of the object and loss remained rooted in traumatic emotional states which could be thought about. This was most pronounced with Kreveshni and Annie whose body boundaries had been crossed while attempting to directly intervene in the domestic violence. It seemed difficult for these two participants, in particular, to engage with the sadness of loss of the ideal object because they still appeared to be battling with issues of separation from their mothers brought about by the intensity of fear of loss and annihilation experienced in childhood.

According to Hurvich (2003) loss of the object and of love are linked to the interruption of the continuation of being and centre around being harmed by a vengeful external or internal other. This sense of persecution may establish a rootedness in paranoid/schizoid states that are externally confirmed by continuing domestic violence, may become inflexible and that may explain why some participants regarded new relationships with extreme suspicion, expecting betrayal or avoiding intimacy.

Experiences of potential traumatic loss also facilitate altered states of consciousness associated with detachment (Hurvich, 2003) such as dissociation and numbing which were experienced and communicated as such by four participants. Despite this, none of them demonstrated excessive use of states of dissociation or decreased adaptiveness of ego functions, although the effects of such trauma were well detected in unprocessed experiences of trauma and loss as identified in the AAI.

Participants' ability to acknowledge their losses, associated with their experiences with their parents in childhood, may have facilitated their moves into more depressive states of functioning. In doing so, they could allow for parental failures and experience love together

with loss, sadness and longing (Kavaler-Adler, 2007) instead of remaining stuck in unresolved states of anger and fear. This was despite their occasional shifts into paranoid schizoid states that were usually evoked by memories of their traumatic experiences. These cyclical shifts are suggestive of the ability to relinquish old pathological elements of parental objects and engage with grief and separation (Kavaler-Adler, 2007; Klein, 1937) in the process of mourning.

(i) Dependency, separation and trust

Although most participants were classified as securely attached and capable of being reflective of their early experiences and current relationships, they also seemed to have ongoing preoccupations with issues of dependency and separation. This may have been affected by differing levels of identification with their parents as well as by the difficulty that children experience in conceiving of their parents' states of mind while they are being violent and unprotective, as pointed out by Fonagy and Bateman (2008). It then became possibly easier to internalise the parents' emotions in identification with the object because this prevented separation and abandonment.

Some children adopted their mother's affective organisations becoming somewhat like their mother while others tried to protect themselves from their parent's negative affect through seeking psychological and physical distance in later development (Radke-Yarrow, 1991). Actually both stances were simultaneously observed in some of the participants in this study where there was a strong identification with the mother in many cases, but also concerted efforts were made to separate and maintain detachment, often leading to increased states of inner tension.

Ilsa's identification with her mother as the internalised injured object was detected in her states of depression and high anxiety but so were her attempts to create distance by living on her own in a different city and by distancing herself from her mother's attempts at role reversal.

Yeah, I think that's the main thing and also sometimes I feel that she still tells me things that I don't need to know or like dramatises things so I try to pull away a little bit from certain things in our relationship too.

Annie too attempted to separate from her mother physically but her need to control her environment in order to decrease her own anxiety depicted identification with a mother who was experienced as being considerably anxious and sometimes controlling.

Although all the participants demonstrated different degrees of separation, all of them also manifested the presence of compliant and sometimes compulsive caregiving selves. This may have circumvented the loss of the relationship with their mother and therefore the separation that they feared and strongly defended against. By complying with the parents they also avoided rejection and through caregiving they ensured continuing contact with the parent, possibly fostering dependency in the relationship.

Hannah complied to avoid her mother's hostility and aggression in order to remain connected to her mother. Leigh-Ann focused on protecting her siblings during the violence and also focused on her academic performance to fulfil the expectations of her caregiver. Kreveshni became the maternal figure's caregiver and confidente as did Ilsa and Lerato.

Needing to take care of others when no one is taking care of the self may typically lead to the internalisation of a persecutory object which is projected onto others who can never be trusted, who never fully understand and who never really love or care enough. Equally signals that would activate attachment behaviour and enable the experience of being loved and being able to love are repressed in a process that Bowlby (1988) called defensive exclusion. This is done to exclude information that is threatening to the parent-child relationship from awareness and over time defensive exclusion of such information may lead to the deactivation of the corresponding behavioural system. For instance, if a parent repeatedly fails to provide assistance, the child may develop an internal representation of ultimate self-reliance which defends against her vulnerability and the parents' abandonment. Initially this manifests as a way of protecting the self from being let down, from abandonment and disappointment. Later this may persist, negatively impacting relationships in adulthood by the denial of vulnerability and the inability to make requests for help when this is needed. Defensive exclusion was not overly pronounced in participants but elements of this were observed in most of their narratives, although it did not seem to be perpetuated to such a large degree that it endangered ongoing relationships in most cases. Most of the participants were aware of their relational needs to a greater or lesser degree. Jane, for instance was able to accept her husband's assistance in caring for her daughter and Lerato accepted emotional comfort from her partner but sometimes at a distance and through reading material which he provided for her. Leigh-Ann however, had walked away from a relationship where the perceived demands upon her were beginning to overwhelm and where she did not feel that the support provided was always reciprocated in certain areas of her life.

Yet, most of the participants presented as extremely self-reliant, even as children where they often sought to intervene between their parents, attempted to protect their siblings from exposure to domestic violence and sought emotional solace from others outside of the immediate family or from activities such as reading and writing. They also, all experienced difficulties with trust, Jane for instance was quite vocal about this. "I never fully trusted anybody, you know I'm not gonna get close to you if I don't trust you." Annie declared similar sentiments: "...that's what prevents me from confiding in others 'cos I don't feel that they will help or trust that they will help me."

Ilsa felt that not only would others be unhelpful, but that they also failed to really understand her position:

I think because I've felt no-one's ever really understood what..what's happening so even if I told someone you know about one event because they don't understand the

whole thing they don't really understand and go just get over it you know or like I'll tell someone oh my dad's not paying varsity fees and he cannot afford it and he's so full of rubbish and this is why he's not doing it and they're like well just ask him I'm like you don't understand I can't just ask him 'cos he's not gonna do it you know, so I don't have anyone so I feel very alone with my emotions and what's going on uhm, from that point of view ...and then ...like I think because I don' really make friends easily so...

Consequently trust in a world that is felt to be persecutory and hostile was difficult to establish. Klein (1937) maintained that it is in the context of family life that love and trust are first experienced and internalised and then are extended to others. In the same way hatred is experienced and may lead to frightening objects being internalised in the mind and projected onto others leading to the expectation of persecution or abandonment as expressed by the participants, especially with regards to attaining support from others. Expectations of abandonment and betrayal were also created and reinforced in participants' lives by awareness of infidelity in the marital relationships which were already plagued by verbal and physical violence. Four of the participants reported on their early awareness of infidelity being present between the parents and on this being one of the subjects of conflict between them. Despite this none of the participants displayed such severe splits in their personalities or between their false and true self (Winnicott, 1960b) as to suggest severely pathological organisations. The attachment status of many of the participants in early and middle childhood, however, seemed to have been marked by augmented states of separation and annihilation anxiety, suggesting likely insecure attachments to their parents in childhood, but also various pathways to more or less earned secure attachments in adulthood. These will be explored further, later in this discussion.

(ii) Depressive states

Four of the participants in this study reported suffering from intense feelings of depression and considering the number of research participants in studies on early trauma that do (Browne & Winkelman, 2007; McCutchon et al., 2008; Milne & Lancaster, 2001), this is not a surprising discovery. What is surprising is that the rest did not.

There are many formulations of depression, but one most useful to this study is that depression may be considered a form of protest against the perceived relinquishing of an injured object or being abandoned by it. Depression has been associated with persistent patterns of insecure attachment which are present in childhood and continue into adulthood (Herbert, Callahan & McCormack, 2010). This was not the case for two of the participants who despite suffering from depression had been classified as securely attached on the AAI. The reason for this could be their access to and engagement with therapy and seemingly healthier attachment substitutes in adulthood. But central to understanding depression in individuals is the issue of separation-individuation (Mahler, 1968, 1970) which is often complicated in environments of trauma and which may essentially be connected to fears of loss of the love object or loss of love (Herbert et al., 2010) as a result of real experiences with parents as well as internal representations (Fairbairn, 1952). This was

evident in participants' narratives and supports Herbert et al.'s (2010) study which indicates that the relationship between attachment styles across the lifespan and depression is a complex one.

Researchers often associate depression in adulthood with particular experiences with a maternal object that were devoid of care and warmth (Herbert, et al., 2010). This was often the case in some participants' experiences with their mothers where maternal anger, anxiety and frustration was communicated strongly to the participants as children and prevented a strong, secure base from being established. In these cases there was also an absence of consistent alternative attachment figures in childhood that could mediate the disrupted relationship between mother and daughter.

While Kreveshni had suffered from depression and attempted suicide in adolescence, Lerato and Annie had struggled with depressive and suicidal thoughts in early adulthood. All had either attended therapy or were still in the process of doing so. Ilsa had also attended therapy but she reported that she had experienced depression for most of her life which was being alleviated, in her view, due to maintained greater distance from her father. Milne & Lancaster (2001) report on the connection between depression and the failure to individuate, insecure attachment states and negative parental representations in female adolescents. As an individual seeks to negotiate changes involved in decreased reliance on the family and the forming on relationships with others, the capacity to negotiate these changes depends on the quality of attachment to the primary caregiver. This could explain why adolescence was particularly difficult for these young women, since their struggle with depression may have been compounded by separation-individuation difficulties.

Internal representations of self and others inform the way that the individual interprets the world and consequently her early attachment experiences, such that strong introjections and identification with a depressed caregiver may later influence the experience of depression (Herbert, et al., 2010). In fact a link between resistant and avoidant attachment in childhood has been made with experienced depression in adulthood (Sroufe, 2005) suggesting that this may have been the reality of attachment experiences for these specific participants in childhood. Only one of these participants, Kreveshni, had carried this insecure attachment style into adulthood. She was the youngest participant and was still living with her parents at the time and this may suggest that the process of discussing her past experiences of domestic violence and her relationships to her parents in a coherent manner may have been impossible for her while she remained with them. Participants who were able to attain emotional and physical distance from the marital relationship, at least for a period of time, seemed to have been able to begin to process their traumatic experiences and begin to reflect on their parents behaviour. Kreveshni appeared not to have begun this process as yet.

Rubens (1994) maintains that states of depression may lead to immobilisation in which living and continuing action become intolerable. This was not observed to be the case with

the participants, in fact they seemed to have experienced considerable improvements and to be able to remain active agents in their lives despite experiences of depression.

Interestingly what had changed the situation for Lerato, for instance, was her willingness to seek contact and understanding, in the presence of available others such as friends and a therapist. A transitional space was therefore created which allowed her to contemplate and tolerate the possibility of change. Kreveshni obtained relief through expressing her anger and in attending therapy where a safe space was afforded for her to continue to work through her trauma. Annie and Ilsa had limited tolerance for being left alone and it was within this context that depressive feelings became more prominent, although both had attended therapy and were making serious attempts to work through their attachment trauma.

Fairbairn, (1952) spoke about the conflict between love and hate underlying the depressive state of mind and the inner struggle of the individual to love without destroying through hate. For Lerato this was evident in the activation of her rage for the maternal object in her troubled relationship with her stepmother which had eventually, evoked intense depression and suicidal thoughts. "I actually reached some point where I wanted to commit suicide and I spoke to two of my friends who I was really close to at that time....and they kind of helped me through it and suggested that I go to therapy and so I mean, I went to therapy then".

Dissociated memories of parental abuse and neglect are stored away in the unconscious and this protects the individual from recognising the parents' frightening state of mind while remaining connected (Celani, 2010). The two paired ego states, libidinal and anti-libidinal (Fairbairn, 1952), can therefore emerge when someone is perceived as an exciting or rejecting object thus lending themselves to a source of transferences and re-enactments (Celani, 2010). In depression, it is the disposal of this rage and hatred that constitute the difficulty since the individual's internal world is dominated by an anti-libidinal ego state filled with dangerous and persecutory objects (Fairbairn, 1952; Fonagy, 1999b). Antonovsky (1987) drew a clear distinction between states of anger which dissipate over time as opposed to seething rage, which in his view, tended to linger and was more difficult to manage. It is this rage that was mostly connected to states of depression in two of the participants. This could be related to depression being conceived as a reaction where hate and aggression are directed internally against the self when circumstances disturb the individual's object relations (Rubens, 1994). This was what Fairbairn (1952) termed as a closed system involving the perpetuation of relationships between the endopsychic structures and preserving the barrier to separation and an individual sense of self. Rubens, (1994) classified depression as a state of powerlessness and helplessness that reinforced the resistance to change in differentiation between self and the lost object. Yet two of the participants who had experienced depression were able to engage with emotional separation from their mothers without being debilitated by feelings of helplessness or powerlessness. Some participants therefore, were better able to engage with appropriate separation of self from others while two were not.

Klein seems to have believed that fears of annihilation (due to loss of the idealised object) and separation from the object were strengthened by fears of persecution thereby magnifying hate and aggression (Young, 1994) which may be linked to depressive states in adulthood. Deprivation was essentially experienced as an attack and retaliation ensued through rage (Young, 1994). It seems logical to reason that domestic violence exacerbated this cycle directly and indirectly by making caregivers frequently unavailable through their own angry, aggressive and depressed states of mind and through their direct expression of rejection and hatred towards the child. This was something that Annie battled to understand and forgive her parents for.

Yeah, I guess uhm, my dad for his temper and his violence against us, specifically because it was very much uh, directed towards me and then I think there is ...I struggle more with my mom because she wasn't completely overwhelmed by the sense of anger that my dad was (gritted teeth) uhm I felt...I felt like my dad like lost control a lot of times, but my mom she sometimes put me in situations where I feel like she should have rather protected me....

The unavailability of the maternal object, lack of protectiveness and parental anger expressed in domestic violence and sometimes harsh disciplinary methods may therefore have elicited hatred and rage in the participants as children. This hatred and rage was sometimes displaced upon an alternative other or internalised against the self. Klein (1937) explained that sometimes it became safer to express disdain and rejection for a remote system of authority who imposed rules and regulations but that was distant and removed from personal family life. The suggestion here is that in some cases it may have been reintrojected and directed at the self instead, as depression.

Winnicott (1945) had a different perspective on depression and conceived it as a way of the child relieving the mother's suffering by internalising her depression. In this case what would take place would not be reintrojection of rageful states but of another's pain, as an effort to relive the caregiver's psychological distress by taking it into the self in the process of identification. This conceptualisation may better explain the experience of depression in two of the participants who occupied a prominent caregiving role to their mothers in childhood. It is this later form that proved to be most unresolved despite attempts to do so in therapeutic interventions sought by participants.

Depression has also been linked to traumatic experiences in early childhood (McCutcheon, Heath, Nelson, Bucholz, Madden & Martin, 2008) as pain may become encapsulated in traumatised individuals and not worked through. Exposure to domestic violence and attachment injuries do give rise to traumatic mental states which impair thinking about and derail working through processes delaying appropriate emotional and social development in the individual (Fonagy, 1999a). This was a complex process in this study and was more

pronounced in some participants than in others for instance, Lerato was able to move past her encapsulated states of pain and anguish: "I learned that pain isn't forever and I also realised that we tend to give our pain a lot of power over us".

In times of great distress, though, internal reality may have become synonymous with external reality where persecutory and rejecting objects were projected onto relationships. At these times Lerato still tended to look for evidence of not being truly loved or cared for as a way of fulfilling her internalised beliefs of damaging relationships and thereby bringing about the much needed safety of distance. This process, although initiated in her relationship with a biological father, whose love she doubted, continued with current relationships.

...'cos with my dad it was always like one thing then I thought ok he doesn't [love me] then yeah so I, I tend to ...I tend to go through that really dark time then I'd start you know looking for little signs then I'd get neurotic again and I know that's not healthy but it just, I...I feel like I can't control that sometimes ja.

This may have also been be a way of spoiling the good and of looking for proof of her internalised unlovable objects stored in an anti-libidinal ego structure as part of the self. The good, idealised father was protected and preserved while the abandoning and unloving one was transferred onto the self as proof of her failure to elicit such love and acceptance. As Lerato split off her distrusting and rejecting parts and projected these onto objects, she also may have landed up feeling persecuted and re-introjected this as depression against the self.

There are gradual grief experiences as Kavaler-Adler (2007) points out, which relate to abandonment and loss in childhood and adolescence and in Lerato's story, the unavailability of the biological father and abandonment by her older brother (through his drug taking and leaving the family), that may be mourned eventually. Distorted mental states also suggest not only a minimisation of any link between external and internal reality, but an outright denial of this and may encourage the development of a false self (Kavaler-Adler, 2007). This was what appeared to have manifested later in Annie's life when despite being ill with depression and an eating disorder Annie was required by her mother to 'put on a happy face' to appease her father.

Winnicott (1958b) wrote about the capacity to be alone as one of the most important signs of separation-individuation and maturity in emotional development. The experience of being alone in the presence of the mother where the mother is the reliable, available object, is present internally in the child's psyche. The capacity to be alone therefore depends on the existence of a good object in the psychic reality of the individual.

Transitional objects enable the child to pass from omnipotent control to the experience of 'not me' and create a link between the inner and outer worlds where the two interact in an intermediate space (Farrell, 1995). Transitional objects become the stepping stones toward

whole object relations, allowing the child to move towards acceptance of reality and of relating the inner and outer reality. When both parents are experienced as frightening and unprotective, fear of annihilation prevails, interfering with separation-individuation, activating the attachment system and leading, particularly in Annie, Ilsa and Kreveshni's cases, to demands for perfection, caregiving and intellectual achievement without the feeling of being held. Poor development of a robust sense of self and insufficient internalisation of a good enough object was seen to create conflicts over physical separation and the capacity to be alone (Winnicott, 1958b) in at least three of the participants.

Winnicott (1958b, 1971) maintained that the internalisation of the other before the boundaries of self were fully formed, undermines the creation of a coherent sense of self since the child is forced to internalise the other as a core part of herself. Since the caregiver cannot contain the child's anxiety and mirror the self state in an accessible way, the child instead of gradually constructing a representation of her internal states, is forced to internalise the object, an alien part within self-representation (Fonagy, 1999b; Fonagy, 2008). This internalised image cannot reflect the changing emotional and cognitive states of the individual because it is based on an archaic representation of the other and not on the individual's thinking and feeling self as seen by the other. In this study, evidence of this process in was an inability in a few individuals to process and articulate strong affective states that were defended against. One of the participants, more able to reflect on the process in hindsight, related how in avoiding being alone she had been, in fact, avoiding thinking about her experiences and emotions as this evoked intense anxiety and depression.

For the child growing up with violence, what is potentially internalised within the self is the caregiver with terrifying intentions (Fonagy, 2008). According to Fonagy and Bateman (2008) such internalisations of the other can generate momentary experiences of unbearable psychological pain and, when in the mode of psychic equivalence, the self can feel attacked literally from within. Being overwhelmed by an experience of badness, self-destruction then might have appeared to have been the only possible escape for participants with thoughts of suicide. Winnicott (1960b) mentioned the idea that, in extreme cases, internal states of terror at being without the good object were created. The monster of potential annihilation was experienced as being very real, leading to suicide being an option that would avoid destruction of the true self. Fonagy (2008) comments on how this process is impacted by the collapse of mentalisation which entails a loss of awareness of the relationship between internal and external reality. In the mode of psychic equivalence, the child assumes that what she thinks also exists in the physical world and the fear of being alone and of persecutory, abandoning others predominates. Because the memory of the trauma feels currently real and remains unintegrated there is a constant danger of re-traumatisation from within. The individual then begins to fear her own mind and internalised dangerous mental states. Inhibiting mentalisation or choosing not to think about her own mental states and feelings becomes an intrapsychic adaptation in dealing with attachment trauma. It was the fear of being annihilated from within when left alone, that gave rise to intense feelings of depression and to suicidal thoughts as expressed by one of the young women in this study.

For her, experiencing the persecutor and persecuted from within led to intolerable states of anxiety and dread and therefore the need to project the abused parts of the self became necessary for pain to be tolerated. Some of the participants accomplished this through the process of projective identification as well as the use of other psychological defences which enabled them to cope. One participant ensured that she was hardly ever alone at home and she adapted by engaging in altruistic caregiving towards others, for instance.

I think I only like myself when I can do something for other people, so if I were to sit in a room by myself I wouldn't feel good about myself' and 'I just, if I'm alone I don't [you] know sit there with my thoughts, I just feel depressed, so I guess I'm preventing myself from really thinking about things, doing anything

Jacobson (in Kernberg, 1985) conceived of depression as related to the fear of abandonment by the object and to a fear from the development of aggression against the needed but frustrating object. The child in identifying with and taking in the intolerable badness of his objects manages to preserve their goodness and availability (Fairbairn, 1952). Essentially the child uses the 'moral defence' by failing to acknowledge the destructiveness and abandonment of the loved objects. Instead she develops the notion of 'conditional badness' whereby she is deserving of the abandonment or rejection because of some inner flaw or behavioural wrongdoing. This was observed in Annie's beliefs that she had somehow failed or provoked her parents' difficulties with caregiving: "I still struggle to make sense of it, I blame myself a lot, just because, I don't know, I guess I try not to think about it, it's just this underlying feeling that I did something wrong…"

Equally, Lerato suggested that her mother was justified in engaging in very harsh disciplinary measures with her brothers. "Yeah and ...and I didn't really do much wrong compared to the others". Jane too justified her father's harsh disciplinary methods by classifying her childhood behaviour as being deserving of such discipline. The adherence to the moral defence was better resolved in Ilsa and the suggestion is that this may have been one of the reasons for her depression lifting in early adulthood, as distance from both parents allowed for perspective taking.

.....it sort of created a distance and it still hurts, I still have a fight with him and get on the phone with my mom and cry about it, but at the same time it doesn't hurt as much as it used to uhm because it's not me it's him now whereas in the past I thought I have done something wrong and now I'm gonna fix it and get someone to do it like this and...so.

Incidently, what is also interesting in the above comment is Ilsa's ability to rely on her mother for emotional support, something which was not often made available to her in childhood.

If the individual engages strongly in the moral defence she is able to preserve the goodness of the object and to circumvent its loss by thinking of herself as having a temperamental flaw and as causing the behaviour in the parents by doing something wrong. This is what Fairbairn (1952) termed as guilt and self directed aggression in depressive states of mind. By taking responsibility for parental failures and thinking of the self as flawed some of the participants then directed guilt within, against the self which led to feelings of depression and of not being good enough. Seen from this point of view, depression then functions as a defence for preserving the inner endopsychic structure and insulates the individual against lack of control and the reality of relationships with the parental objects.

In relation to attachment and to some extent, in linking this to the moral defence, Gilbert (1992) suggested that it is the sadness associated with the lack of caregiving that is turned into depression. This is accompanied by changes in self-evaluation where the individual blames the self for this lack and experiences the loss of self-esteem. However, Gilbert (1992) extended this process to include experiences in the present where the incapacity to adjust to the loss was exacerbated by the inability to sustain other attachment supports in current life. This was not observed in this study, in fact none of the participants reported feeling isolated in the present and they all maintained significant attachments outside of their family, despite there being some indications of experienced self-blame related to attachments with parents. Although some also communicated feeling disappointed by the loss of romantic attachments in the past, they all had supportive peer relationships and/or alternative parent substitutes on whom they relied. This may suggest that as children who were exposed to domestic violence in childhood, they could better recover due to access to other relationships that were safe and caring as suggested by Fonagy (1999b). This in itself may have attenuated feelings of depression in adulthood for some and may be the reason why none of the participants struggled with severe depression in adulthood despite battling with this in adolescence and in their transition to adulthood.

However, states of mourning may be incomplete for participants since in authentic mourning, love for the lost object is experienced even while the object is hated and although this situation may be very painful, this loss is faced together with sadness as well as concerns for the destructiveness felt towards the object (Garland, 2004). Engaging in this process would require the acknowledgement of one's own hatred and capacity for destructiveness, which seemed to be a process that was not fully conscious for some participants and was avoided by others due to their fear of negative emotions and potential for dysregulation. Annie, for instance minimised her anger and hatred despite non-verbal cues being present, such as gritted teeth while speaking about a particular topic, which were suggestive of this. Some of the participants were experienced as being defended against their own capacity for destructiveness, with the exception of Leigh-Ann, Ilsa, Jane and Lerato who acknowledged this and conveyed concerns about effects upon external objects. It is this process of mourning that may be crucial for participants to engage with as they grieve the loss that inevitably accompanies trauma of any kind (Lemma & Levy, 2004).

When an individual does not feel that they have the resources to engage in the work of mourning or as Antonovsky (1987) would have stated where the load balance is not manageable, this may lead to the loss of equilibrium. Trauma tends to overwhelm. This seemed to be the case with some of the participants of this study who were at different stages of negotiating loss and trauma in their lives. The implication here however, is that this may not be a perpetual stage and that as new relationships develop, the opportunity for the revision of new objects is made, internal working models become more subject to review and the capacity to mourn lost objects may be further facilitated.

9.3.3 Role reversal and attachment

Davar (2011) stated that in order to avoid psychic annihilation, in early development, children tend to become focused on what the caregiver needs from them rather than on self development. When she is not held in mind by the parent the child may be forced into a premature state of separatedness where dependency needs are not adequately met (Årseth, et al., 2009; Davar, 2011) and where the needs of the parent are paramount. This is supported by the predominance of role reversing experiences in participants' narratives. Absence of holding was therefore evident in pathological states of role reversal or what Bowlby (1988) referred to as 'inverted' relating between parents and child, where the parents expected and demanded care and attention from them as children and they complied. This bore resemblance to Schechter and Willheim's (2009) concept of the secure base distortions with the role reversal sub-type where the child takes responsibility for the parent's emotional well being.

This could be extended to include having the child occupy a persistent parental role towards siblings and even expecting the child to intervene in the marital discord and 'fix' the marital relationship, as was the case with participants in this study. The intersection of role reversing aspects of participants' relationships with their parents and their adaptation to this, essentially appears to have fostered a caregiving role in them that was perpetuated through different stages of development. This caregiving did not however, seem to feature the controlling, aggressive tendencies present in children with Disoganised Attachment.

This is an important aspect of this research since a variety of expressions of role reversal were particularly marked in all of the participants' relationships with their parents. As children they were frequently occupying the role of confidante to their mothers, some of them were often involved by their parents in the marital discord and were sometimes requested to deliver messages about divorce and separation between parents. One participant was requested by her father, when she was child, to persuade her mother not to seek a divorce, another was requested to raise the issue of divorce with her father when she was a very young child. Some participants were expected to provide protection and caregiving to their mothers and siblings during family violence and often tried to enlist the assistance of other family members and even of the police when the domestic violence occurred. This implies that they took on the protective role which belonged to the parents.

Role reversal as an established pattern of relating between parent and child, has also been specifically linked to unresolved/disorganised attachment in individuals (Diamond, 2004). Diamond (2004) has explicitly stated that a child who displays disorganised states of mind in childhood does so as a response to caregiving failure and exposure to trauma. Out of this adaptation to environmental failure arise certain roles and ways of being in the world which may become entrenched in how the individual perceives and interacts with society.

For instance, disorganised attachment in infancy tends to later be re-organised into two forms of attachment behaviours, one of which is controlling, punitive and hostile behaviour towards the parent (Diamond, 2004). The other is the compulsive caregiving shown by these participants as children towards their parents suggesting an ongoing preoccupation with the parent's well being which may have extended into adulthood (Diamond, 2004; Hesse & Main, 1999). It is this very type of preoccupation with the parents which was most evident within this sample. Although only three participants were classified as demonstrating unresolved/disorganised attachment states of mind due to unresolved loss and trauma, all of the young women in this study occupied strong caregiving roles towards others, and some went to great extents to maintain this in their relationships with friends and partners, perhaps demonstrating a perpetuated effect of their role reversal experiences of childhood. This may not be singularly related to experiences of domestic violence and may be present in non-violent families as well, but what it suggests is that couples involved in domestic violence may be compromised in their parenting capacity and therefore be more prone to look to their children for caregiving and intervention.

The development of a compulsive caregiving self was observed in Kreveshni's attempts to directly protect her mother from her father as well as by her fears that the mother figure may not be strong enough to withstand separation. She spoke about her need to differentiate from her mother yet this was impeded by her excessive concerns over her mother's emotional well being, which was a perpetuation of her childhood situation. "Stronger voice but not as strong as it is with my dad now (quieter tones) now I'm more ..have a stronger voice with dad where I can tell him something but with my mom it's still a little bit of a struggle but not so much where I feel like I don't wanna make her upset...".

Ilsa's role reversal with her mother depicted a childhood spent emotionally supporting her mother in being her confidante and in taking over her maternal duties as far as her siblings were concerned. This type of role reversal was also evident in Annie's catastrophic fantasies of being abandoned by her mother and of needing to protect her to the point of endangering herself physically during the domestic violence by placing her body between her parents during fights.

In Hannah and Lerato's identifications with their mother's helplessness and not knowing how to console the maternal object, there were early preoccupations with maternal well being and fear of damage to the mother and hence to the sense of self. These two young women were also their mother's confidences during times of stress and upheaval. In Leigh-

Ann and Jane's caregiving to their siblings during times of violence, attempts were made to adopt a maternal role. One of the participants eventually intervened in her parents' situation when at the age of nine she threatened to obtain a restraining order against her violent father, something that seems rather adultified for a child of her age. Jane too made attempts to protect her mother by defending her verbally, during altercations. Their concern over their own survival was particularly expressed in caring for the other whether this was their mother, who was often perceived to be the victim, or their siblings.

Researchers connect the development of this caregiving role to role reversing in childhood, which is particularly marked in families where the child's attachment needs are neglected (Mayseless, et al., 2004). Hesse and Main (1999) related that in some cases parents use their child as an attachment figure in times of distress and anxiety. This may be, in fact, what was happening to participants in childhood. Parents may have sought comfort from their children when in situations of anxiety or pain, eliciting protection from the child as opposed to providing it. It is possible that domestic violence evoked such intense attachment anxiety in the parents themselves (Dutton, 1999; Henderson et al., 1997) that being without access to external supports, they looked to their children for rescue. This is perceived as originating from the parents' own unfulfilled needs in being cared for and in their difficulty regulating their own emotions and need for protection (Bowlby, 1980, 1988; Mayseless et al, 2004). In order to maintain the attachment, participants complied while their own needs remained neglected. As children then they may also have learned that expression of inner needs may produce external punishment or be ignored and lead to overload³¹ (Antonovsky, 1987).

Slade (1999) maintains that insecurely attached mothers may be dysregulated by their child's emotions and needs, thus being unable to provide adequate maternal care. Although this is likely to have happened it was not immediately apparent in most of the narratives of participants. What the results of this study rather suggest is that mothers often caused dysregulation in their children with their own unprocessed emotions and that this was particularly evident during role reversing occurrences which were linked to episodes of domestic violence and its after effects upon the parent. Instead of being dysregulated by their children's emotions, these mothers were possibly already dysregulated by the domestic violence and their own affect. The children, able to discern the incapacity of the adult to emotionally care for them, may have tended to over-regulate their own emotions, internalising the trauma or seeking support elsewhere. It is possible that these sensitive children had been picking up cues from their mothers from an early age and had responded in this way to minimise maternal distress and maintain proximity and attachment to the mother. For some, the expression of their own distress as children was articulated much later, in adolescence, which proved to be a challenging time for their mothers and it was then that the relationships between these daughters and their mothers became fraught with conflict and at times physical aggression on the part of the parent.

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³¹ As when strain overwhelms the individual's capacity to cope with environmental demands.

Mayseless et al. (2004) report on girls being more likely than boys to be expected to fulfil this role reversing. They also related the fact that excessive role reversal in childhood leads to difficulties later on in the development of autonomy, fostering instead, enmeshment with the parent which was the case with two of the participants in this study. It also promotes the tendency to relate to others in a caregiving mode as observed in all of these young women. Arseth et al., (2009) and Mayseless et al., (2004) indicated a strong association between role reversal in childhood and lower levels of identity exploration, attachment insecurity, the presence of depression as well as anxiety in adulthood. This was not entirely evidenced in this study especially in relation to attachment insecurity. Most participants were classified as securely attached as adults, furthermore, experiences of anxiety and depression were not debilitating although lower levels of identity exploration were noticeable. In two cases where the role reversing was particularly prominent, separation-individuation processes were noticeably more problematic suggesting that intensity of role reversal may be linked to more intense problematic symptoms in individuals.

Diamond (2004) suggests that individuals who have experienced considerable role reversal in childhood may be found to eventually develop organised internal working models of attachment that involve the self and other as helpless and /or malevolent and intimacy as tainted with fear and anxiety. In some ways this was supported by the findings especially regarding two of the participants who were considerably avoidant of intimacy in couple relationships and one other who appeared to attract partners who could not establish deep emotional connections with her.

This issue of role reversal raises concerns about parental access to support systems outside of the home and about the importance of informing parents with regards to the effect of excessive role reversing on the child. Parents in violent relationships who are isolated may seek intervention at times and in these contexts it would be essential to assist them in seeking emotional support from adult connections rather than from their child, particularly after episodes of domestic violence when they may not have immediate access to their therapist. Community programmes that support mothers and their infants could also provide this information to parents as part of their programmes on child development.

Although all the participants presented with experiences of role reversal and were typically compliant, accommodating caregivers as children, not all of them warranted a classification of u/d. This implies that despite the fact that all the participants had endured disorganising experiences in childhood, many had managed to resolve these, pointing to sufficient care having been internalised either from alternative caregivers or from their parents in between bouts of domestic violence. Antonovsky (1987) maintained that what was crucial about events in the person's life was not the event itself but the consequences which arose as a result. He argued that endemic stress such as that prevailing in one's historical context, could either provide movement towards a strong or a weaker SOC depending on how the

individual responded to it in using GRR's. Equally, the strength of one's SOC would determine whether the outcomes would be 'noxious or salutary' (p. 29).

The consequence of cumulative trauma though, is that it tends to disorganise ego functions due to failure in parents to protect and over time this tends to influence the child's character development (Diamond, 2004) or their sense of self and consequently the establishing of a SOC as a way of being in the world (Antonovsky, 1979; 1986). This is significant since two of the participants classified as u/d also attained lower scores for the SOC (29). However, the third participant classified as u/d also had a higher SOC score when compared to those of other participants. She seemed to have a more protective and supportive relationship with her mother, suggesting that maternal availability may have reduced the need for greater intensity of role reversing between parent and child, making emotional support reciprocated. In other words, although she was expected to provide care and protection for her parent at times, this was not persistent and it seemed as if her mother was also capable of providing care and support for her daughter, possibly reducing the ill effects of role reversal, but not necessarily of the trauma exposure as seen by the u/d classification.

In summary, three of the participants in this research demonstrated unresolved states of mind regarding trauma and loss, one of whom had lost her mother to domestic violence and the other two of whom had incurred physical abuse and expressed a lack of continuous access to an alternative attachment substitute that could buffer the impact of the trauma in the home.

Winnicott (1960a) referred to such disruptive experiences as leading to initial ego fragmentation and later to very selective responses to the 'helpless' mother. Linked to this compulsive caregiving self would be the lack of differentiation between the maternal ego and that of the child, which was expressed to some extent in Annie and Kreveshni who still battled with issues of separation but who, at the same time, were making attempts to individuate, suggesting that this was a state in flux and not necessarily permanently fixed for them. Diamond (2004) maintained that this would also involve the mother's own solicitation of caregiving which would mostly be of an emotional nature eliciting over-preoccupation by the child which links to Levendosky et al. (2012) alluding to the possibility of traumatised mothers projecting the caregiving role onto their children. They would then rely on their children for advice and support. This may have been the challenge for these two participants, who will eventually have to negotiate their relationships with their parents.

All other participants demonstrated the ability to separate more clearly and survive but not without some difficulties. For instance, Ilsa still experienced states of anxiety in being alone although an improvement in her condition was reported after four months of tolerating aloneness. Lerato too experienced difficulty in talking about her mother's pain although she too had managed to separate and create her own world apart from the pain of her mother.

In her compelling paper, Diamond (2004) suggested that compulsive caretaking roles in children may prefigure the lack of resolution of mourning and loss seen in the AAI scripts of unresolved individuals. Studies have also linked childhood separation anxiety to disorganised attachment status in infancy and with lack of resolution of loss and trauma in early adulthood (Diamond, 2004). In some of the participants the separation anxiety appears to have been better resolved than in others, probably in part due to the continuous presence of alternative attachment figures. The excessive preoccupation with the mother (Fairbairn, 1952) impedes the natural development of disillusionment and mourning that would allow for differentiation of child from mother (Klein, 1932). In itself it may be conceptualised as a defensive strategy aimed at preventing the loss of the love object and as alleviating unbearable threats of potential annihilation and the resultant anxiety. This is reminiscent of Klein's persecutory anxiety of the paranoid-schizoid position as well concerns around loss, guilt, mourning and reparation which are often detected in the AAI narratives of adults classified as u/d (Diamond, 2004). This was certainly true for the narratives of all these participants and not only for those classified as u/d. For some, their experiences of trauma and loss were simply better resolved than for others.

9.3.4 Intimacy: motherhood and romantic relationships

Established internal representations of self and others tend to shape adult romantic relationships as well as the parenting approach of parents with their children (Calabrese et al., 2005). Likewise, Shaver et al. (2009) report that attachment anxiety may accentuate an individual's tendency to make poor decisions about close relationships. It may also foster intrusiveness and anxious parenting. Sroufe et al. (1999) further maintain that such early maladaptive patterns are internalised and carried forward as modes of affective regulation and expectations in relationships. They also posited that individuals with histories of insecure attachment may be more likely to form relationships that are not supportive and are easily disrupted. Such individuals tend to not trust their partners, may suppress their own needs and emotions and have a low awareness of the needs of others (Shaver, et al. 2009).

These positions were not clearly observed in all the participants since the majority have attained a classification of secure (most likely earned) on the AAI and three of the participants, had established attachments to partners that were of relatively long duration and perceived to be supportive. Annie did express the ongoing experience of separation anxiety from her partner, yet Zvělc (2010) also warns that a complete absence of separation anxiety in adulthood can lend itself to a lack of attachment, a lack of roots and to infidelity. He warns that fear of separation and abandonment may actually be adaptive in adult relationships and in the subsequent development of secure attachments. Separation anxiety in adulthood maintains the relationship and only becomes disruptive when it is very intense and occurs at the slightest threat of separation. When an individual finds difficulty in being alone and struggles with the use of transitional objects to reduce separation anxiety then

this is indicative of an incomplete process of separation-individuation. It is important to reflect on these points within the framework of participants' early experiences and attempts at wellness. Depending on the severity of the trauma and loss experienced, some may have not yet secured developmental stages of full separation and individuation and were in the process of doing so.

Participants' attitudes towards mothering were also indicative of their full awareness of how their experiences may have affected their parenting capacity. Yet all demonstrated deep empathy and sensitivity with regards to the vulnerability of children. This was especially so for Jane who was the only one to have become a mother.

I suppose I suppose it's the capacity to...I learned how to relate to her when she was born actually, I suppose it's the capacity to know that like whatever she does I'll be here and it gives her the potential to then do whatever she wants so...ja like maybe I put in too much...but when I wrote her the letter I almost wished that uhmm that I would be sufficiently reliable for her that she would be able to like do whatever she wants and know that she can do it, she'll have the capacity to...like do whatever she wants to do, she can do it, she'll have a reliable base.

Due to the rigidity of childhood environments that the participants experienced, which often elicited great fear and curtailed freedom of exploration, most of these young women may in the future attempt to overcompensate with their children. What could happen is that as a consequence, they may experience difficulty with limit setting with their children since this would make them the bad object to their child. It is possible that given their acute awareness of how their family environments and parents made them feel as children, these participants would perhaps be reluctant to discipline their children for fear of evoking similar feelings in them. This would pose different problems for them within their families such as difficulty setting boundaries and overindulging children at times.

But for participants, their exposure to domestic violence affected more than just their attitudes towards mothering, their expectations in romantic attachments were also influenced. Ribeiro et al. (2010) allude to the internalisation of malevolent object representations which may lead the individual to fear closeness and intimacy in relationships. Domestic violence does create an environment where aggression and lack of love are expressed through violence, leading to diminished trust and hope as well as the confirmation of annihilation anxieties and external persecution (Klein, 1932). This of course impacts the development of relationships in young adulthood through internalised expectations of loss and rejection which participants were able to reflect on. Lerato, for instance, stated:

Oh well, I have this thing that I used to do a lot like if I really like a guy the I wouldn't date him, I think I was just afraid to be in that vulnerable space so I would date people that I don't really like you know as much and that wouldn't last, it would literally last like a month.

As suggested by Sroufe et al., (1999), early experiences may support the view of the self as isolated, unable to achieve emotional closeness and as being unworthy of care. Levendosky et al. (2012) expand this in proposing that one of the possible outcomes of growing up with domestic violence is an exaggerated sensitivity to rejection as seen in a few participants' reluctance to trust partners and avoidance of couple relationships. When a parent rejected explicitly or implicitly, this may have been internalised as an expectation in attachment relationships and became synonymous with unbearable painful affect for them. Rejection and eventual loss may have become the expectation in dating relationships which reinforced the perception of the self as flawed, unworthy and as eliciting rejection from desirable objects. Behaviours rooted in avoidance have been found to be connected to insecure attachment and as a symptom of PTSD in adults and children (Busch & Lieberman, 2007).

Some attachment avoidance, characterised by fears of intimacy and the reluctance to rely on others for the fulfilment of one's needs (Wei, Mallinckrodt, Larson & Zakalik, 2005) was present but predominantly in participants demonstrating security of attachment with slight dismissive features. In demonstrating some attachment avoidance certain individuals tended not to rely on others for validation. Although most of the participants did experience a fear of intimacy and sensitivity to rejection by potential partners, none of them were so defended against interpersonal relationships as to be completely isolated or alone. They befriended others, such as members of both sexes, and one participant was married while two others were involved in serious, stable relationships.

The tendencies towards attachment avoidance observed in this study are best described by Zvělc (2010) as existing on a continuum and as a type of alienation which was manifest in social isolation encompassing distrust and withdrawal from intimate relationships to different degrees as seen in this study. According to Antonovsky (1972) isolation engenders a sense of powerlessness in the person because the development of a strong sense of the meaning of life is dependent on identification with others, not just in close relationships, but also with the broader community.

Although this isolation can be protective and initially adaptive, since it provides an initial withdrawal from an unproductive and dangerous family environment, it may also impede the development of supportive affiliations in adulthood. Zvělc (2010) further describes this social isolation as the ego withdrawing from relationships due to depriving experiences with significant others. Objects are then perceived as dangerous and abandoning and are avoided. To a certain extent this was the case with Hannah's approach to couple relationships.

... I just have this notion that if I see, even if it's very early stages, if I see anything that resembles what my father was like in terms of something as small as for example if the person's phone is on the table and they won't let me go through the phone or touch their phone...so that's for me...immediately I feel like this person's probably cheating or...it's small things like that it really impacts how I relate to a boyfriend or dating

relationships, so as a defence I've avoided that completely 'cos I feel like it's not really the person who'll do something to me but just how I've told myself that I will never let myself go through what my mother...went through and it's how I am just trying to run away from someone doing what my dad did to her, doing to me and I think that in an attempt to do that just can never relax and trust someone 'cos I feel like anything, any hint of something that resembles my father in any way, anything I just can't stomach.

Two main patterns of romantic attachment were identified in this study involving the fear of intimacy and distrust. The first one was an outright avoidance and suspicion of the opposite gender and a defensive stance against possible betrayal and consequently emotional abandonment and hurt. The second pattern seems to have been more related to providing caregiving to partners in the hope of maintaining relationships, while at the same time 'making up' for the emotional distance and lack of trust that the participants may have brought to the relationship. Hannah and Kreveshni openly discussed their lack of readiness in pursuing romantic attachments and it seems that this was a process that they were still working through in their development. Exposure to parents' damaged and damaging relationships may later manifest in a difficulty with sharing intimacy with others although this may be a much needed temporary isolation for both young women who had grown up in inappropriate social environments that had engendered great dissatisfaction and fear. Jane also reflected on her experience in the following way:

...but I would never commit to the relationship and I don't know if that was because I was so scared of the rejection that I knew I was not that serious about it. If it was I'm not gonna marry this guy and the problem is I'm not serious about it and I don't want the rejection, the mess and the break up or if it was I never fully trusted anybody, you know I'm not gonna get close to you if I don't trust you.

However, she had been able to conquer her distrust and had gone on to marry a good friend from her childhood whom she had known and possibly 'vetted' over the years:

...I'd known him for a very long time, so I met his little sister when I was eleven, and we've been friends since then, so...he was always just the big brother and (name of friend) my sister in law is quite a sleeper so when I came to her house he and I used to hang together...

Leigh-Ann had found herself caught up in a relationship with someone whom she felt made demands upon her time which she could not fulfil and after an episode involving some verbal aggression from her boyfriend she broke up the relationship. "I just told him it's over because I'm not going to have anybody bullying me or anything and making me feel guilty about anything, no I just drew the line".

Her need to be a caregiver and to come across as strong may have interfered with her ability to be vulnerable in relationships, at least enough to receive support from another who could provide this. A similar pattern was found with Ilsa who feared intimacy and attracted men who could not provide her with the commitment and security she craved and at the same time seemed to terrify her. Instead she complied and gave in, while at the same time keeping her emotional self insulated from men who just could not reach her.

Well my brother said something very interesting to me the other day and he's so right, he says I always date arrogant guys, he says they are so arrogant they're so full of themselves they don't take a second to think about you they just want you to tag around with them and do what they want to do and you do it, so he goes -stop. And it's so true...

As Klein (1937) pointed out, individuals may choose romantic partners whose external characteristics are very different from those of their parent but whose personality components echo those early impressions of the parent. This seemed to be the case with a few of the participants. Ilsa in particular had realised that her choice of partners left her feeling disappointed and let down, echoing her feelings towards her father. This was something with which she grappled but which she was prepared to acknowledge. The trouble emerged when 'bad' characteristics of the parent were not discarded for the good. This was not the case with Jane, Lerato or Annie who had established relationships with partners who could be reliable, committed and emotionally available. Annie had secured a relationship with someone who wanted to provide her with reciprocated caregiving which she battled to accept. "...yeah I want to feel looked after it's difficult though because I've never felt that from a male, so I don't know how I would feel if...I mean he does try look after me but I guess I just uh...uhm I don't completely create situations where he can, uh".

In maintaining control through her caregiving, she may have made her dependency more bearable and yet this dependency is maintained since the object which she has looked after may then be depended upon to stay (Segal, 1973). Reparation on the other hand would entail giving up control of the object and accepting the other and the relationship as it is. Zvělc (2010) has an interesting and somewhat novel approach to this. He reasons that the coexistence of merging and separation states in relationships is composed of different ratios between the two at different times in life and that what may actually be dysfunctional is a lack of flexibility in the partners rather than issues of separation-dependence. Lack of differentiation, he argues, as the inability to distinguish between self and other, is what causes difficulty in the attachment.

In conclusion, difficult patterns of relating or lack of flexibility/ingenuity, however, are not necessarily exclusive to adults exposed to domestic violence in childhood but may be present amongst many populations, highlighting the importance of early object relating rather than just the exposure to trauma. What may be also significant and unique in contexts of parental domestic violence is the potential for severely disrupted capacity for object relating in parents coupled with exposure to violence. Delays in separation-individuation and the inadequate level of inter-subjective caregiving, provided for the child by parents who are violent, may disturb child development and the capacity to trust. The traumatic nature of relating in the family adds multiple complications and its management in adulthood, may be largely impacted by the quality of the mental representations acquired within attachment as well as by the quality of the present attachments.

Fonagy (2008) points out that social functioning is impaired by childhood and adolescent trauma and adversity in that this causes a breakdown of attachment related mentalisation. To a certain extent this was seen in this research study but only up to a point. Individual differences must be taken into account as there were numerous opportunities for growth such as new relationships, engaging in therapy, reawakening faith and even parents making changes and attempts at reparation with their children, which may have reduced the effects of early adversity and engendered hope, forgiveness and depressive attempts at reengagement.

9.4 Spontaneous reactions to domestic violence in childhood (Research Question II)

The participants in this study reacted spontaneously to their environments of domestic violence through a variety of defensive organisations which served to guard against anxiety and internal disequilibrium and which still assisted them in adulthood. Some of these defences ranged from immature states of splitting and projective identification to more mature defences such as humour, thought suppression and altruistic caregiving which is revisited in this section. The participants' attachment states of mind are also explored as spontaneous reactions to domestic violence between parents and therefore as defensive manoeuvres that ensured survival and greater safety. These spontaneous reactions are therefore viewed through the lens of adaptation and resilience as ways that allowed them to cope and to feel some sense of control in chaotic childhood environments.

Demonstrated resilience

Adaptation is a word that may potentially convey a sense of flexibility and resilience. It has been linked to the ability to resume mental health despite early hardship (Herrman, Stewart, Diaz-Granados, Berger, Jackson & Yuen, 2011). These authors suggest that there are multiple sources and pathways to resilience which often interact.

The traumatic family environments of participants were found to make considerable psychological, physical and relational demands upon their abilities to regulate intense mental states of fear, anger and anxiety. As conceptualised by Cramer (2000) adaptation inevitably encompasses the development of unconscious defensive organisations which have enabled such children to physically and psychologically survive dangerous environments yet remain connected to their caregivers despite their violence and lack of protection. This seems linked to Crittenden's (1999) notion of attachment organisations as self-protective strategies, where attachment styles become adaptive as ways of circumventing psychic injury and retaining safety. However, what may have been adaptive in childhood may sometimes become self defeating in adulthood. It is thus crucial to observe both the adaptive ways that defences operated in individuals in childhood as well as the maladaptive ways that these defences may have been perpetuated in adulthood if they were to remain un-relinquished and not replaced. Lindbom-Jakobson & Lindgren

(2001) argue that recovery has to do with the way psychic trauma is handled as well as the extent to which it interferes with daily life.

Antonovsky (1972) also focused on adaptive capacity as a way for individuals to respond to stressors. Antonovsky (1979; 1987; 1996) spoke about GRR's (GRR's) or salutary resources (Antonovsky, 1990) as inherent properties to the person and environmental assets, which enabled the individual to successfully cope with stressors (a traumatic history being one of these) in life and move towards the health side of the ease/disease continuum. He perceived defences as facilitating this process (Antonovsky, 1979) and here I am extending the processes involved in adaptation as being closely connected to Antonovsky's GRR's. An individual's SOC essentially developed out of repeated life experiences impacted by GRR's which constructed a general orientation to view life as making sense cognitively (Comprehensibility), instrumentally (Manageability) and emotionally (Meanigfulness) (Antonovsky, 1979).

In this research study the word adaptation has been deemed to also include conscious aspects of manageability such as participants' use of resources in themselves and their environments in assisting them to survive their home lives. For instance, their ability to acknowledge their experiences yet to still be able to attain conscious psychological distance from states of trauma and loss, is a psychological resource that could be closely connected to coherence and comprehensibility. Taking perspective and attaining some emotional distance from traumatic experiences may have made such experiences easier to process and understand. These were then better integrated which may reflect more positive adaptation.

Also, adults who have the capacity to reflect on their own experiences in childhood tend to be more psychologically secure that those who cannot, even when their experiences of trauma are more distressing (Seligman, 2007). For participants, their hope and fear, love and pain were not necessarily contradictory but rather a reflection of their own integration of experiences, their hopes for the future and for change.

Adaptation could also include their search for meaningfulness in the discovery of faith and of God as an alternate attachment figure, their academic success, protection of siblings, mental escapes into fantasies of books and creative writing and even their different ways of conceptualising parental behaviour and avoiding perpetuation of the moral defence. It would also include participants' conscious awareness of their own feeling states, and their capacity to discuss their childhood experiences in a coherent way as markers of comprehensibility. In this way, the concept of adaptation allows for an exploration of the areas that which object relations, attachment theory and Antonovsky's SOC concept intersect.

9.4.1 Defensive Organisations

Cramer (2000) conceived of defences as strategies which reduced anxiety and promoted adaptation. Defences therefore, may be considered as inner resources which are enlisted to restore equilibrium and are therefore designed to avoid the negative effects of such emotional experiences which disturb or pose a serious threat to the internal organisation of self. Cramer (2000) conceives of defences as existing along a continuum eventually leading to less adaptive and immature defences. These also need to be considered within a context of developmental appropriateness and in environments that may be dangerous and traumatic for the individual. Therefore, even when traumatised individuals use immature defences later on in life this may have the purpose of maintaining psychic equilibrium and keeping traumatic experiences which can overwhelm, at bay. The difficulty emerges when these defences that protect, also interfere with the individual's pursuing of life goals and relationships in adulthood. Cramer (2000) suggests that time frame should be an important consideration when determining how adaptive the defences that are used are.

The participants in this study used a variety of defence mechanisms which were self protective strategies against the trauma they experienced but which also served to maintain their proximity to their caregivers and avoid maltreatment as much as possible. Their use of immature defences in adulthood was rarely found to be extreme in nature in these young women' lives, although some of them did demonstrate avoidance with engaging in certain facets of life such as establishing supportive couple relationships due to fear of intimacy. This was despite the fact that they were functioning well in other areas of their lives, such as strong bonds with siblings, academic success, establishing alternate parental attachments, friendships and engaging in therapy. One of the participants ended a non-supportive romantic attachment during the time frame of the interviews which was suggestive of her ability to reflect on her past experiences and acknowledge the effect that these may have had on her present relationships and on her choice of partners. All the participants demonstrated the capacity to learn from experience and had used a variety of means to do so, including attending therapy.

Suppression, a more mature defence (Bowins, 2004) was often used in their choice of mental escapes to distance themselves from memories and experiences which disturbed their functioning and development as seen in Leigh-Ann and Ilsa's statements indicating their conscious, deliberate decisions not to think about the trauma. Since experiences of trauma and loss could be held in mind and were discussed, this suggests that such mechanisms seem to have been more conscious than unconscious but Brewin & Andrews, (2000) and Boag (2006) imply that the process of suppression may be synonymous with 'repression proper' or conscious repression after awareness. They maintain that Freud may not have sufficiently distinguished between repression proper and suppression and that he, at times, used the two terms interchangeably.

As would perhaps be expected in situations of cumulative trauma, primitive defences had not been fully relinquished by participants although the extent to which the so called 'normal' population is also able to do so merits further investigation. This does not make it any less pathological but does perhaps highlight the need for a focus on early attachment in the treatment of children at risk.

Splitting and projective identification

It is possible that in environments of domestic violence the paranoid schizoid position (Klein, 1932; 1937), as a developmental stage, is not as easily resolved in childhood as it is in more well functioning family contexts. Because danger, aggression and hatred are intensified through domestic violence between parents, the natural oscillation between love and hate and reparation and revenge are unbalanced, intensifying the inner conflict in the individual. This would perhaps explain why participants in this study demonstrated serious difficulties with trust and fear of intimacy in certain respects. In the paranoid schizoid position persecutory anxieties are also managed through splitting, projections and introjections (Diamond, 2004). Seligman (2007) maintained that projections may compensate for the absence of mentalisation, which may become problematic when these are assumed to be equivalent to objective reality. Segal (1973) too, warned of distortions of judgment arising from enduring rigid states of projection, which according to Antonovsky (1987) are likely to lead to a sense of unease. On the other hand, Antonovsky (1987) also argues that a person with a strong SOC will not hesitate to blame others when it is appropriate to do so. Participants made use of a variety of immature defences such as splitting and projective identification but their use of these was not so inflexible as to distort their judgement, in other words they were able to take responsibility for their behaviour and to assign responsibility to others for theirs, when appropriate. They recognised that they affected their environment and also that there were situations that were beyond their control.

Splitting or the separation of good from bad experiences, perceptions and emotions linked to objects is a necessary defensive organisation which can become maladaptive as a predominant way of coping and relating to others (Klein, in Kernberg, 1985; Segal, 1973). Splitting was predominantly used by participants in childhood especially with regards to split images between parents and sometimes in their split images of the father figure. Fathers tended to be associated with more extreme externalising behaviours than mothers, making the use of splitting by their children more intense. Splitting could be thought of as an adaptive defence used by these children to remain connected to fathers who were dangerous and volatile.

Research on attachment disorganisation has also linked projective identification with real experiences which originate with parents (Diamond, 2004). In projective identification parts of the self such as loving and hateful feelings are projected into the internal and external object and parts of the object are then identified with parts of the self (Segal, 1973; Waska, 2008). This process may lead to various outcomes (Waska, 2008). One of these is the re-

internalisation of an injured object causing depression and fear, which is depicted in the lives of some of the participants. Another possibility is the re-internalisation of a hostile and dangerous object which causes persecutory anxieties and which was also present in the participants interviewed, to differing degrees of intensity. Projective identification also has benign forms (Young, 1994) since it is the beginning of empathy, a means of communication and a request for relationship between individuals (Braucher, 2000; Segal, 1973). Essentially it prevents separation and loss when it is directed towards the ideal object (Fonagy, 2008). When it is directed towards the bad object it is done in order to gain control of the source of danger (Segal, 1973), which is evident in Annie's projections of the abused, helpless self onto her father thus reducing threat and enabling the relationship to continue.

Klein believed that projective identification originated from the child yet attachment research suggests that it does, in fact, originate from the parent (Diamond, 2004). It is possible that the excessive use of projection and projective identification by parents can disrupt the attachment relationship and alter parent-child interactions, as these projections became internalised by them and are enacted in adulthood (Levendosky et al., 2012). Such experiences seem to produce mistrust and persecution where the ideal object can become synonymous with punitiveness and abandonment (Waska, 2002), as in the case of potential desirable partners who are avoided due to possible abandonment and hurt that may follow.

For some, dependence was not relinquished but was sufficiently terrifying to ensure that a false caretaking self developed in order to enable dependence to continue, while avoiding true intimacy and vulnerability in close relationships. Partners that were attracted were those who may not have had the capacity for intimacy and who were therefore less threatening to the self, as was the case with some participants in their search for romantic relationships. According to Young (1994), the relationship created by projective identification is symbiotic and continues until the projection is taken back and there is a movement from the paranoid/schizoid position to a more depressive position which was a point of possible transition for all participants.

Klein regarded persecutory fears and anxieties, which predominate the paranoid-schizoid position, as being a necessary part of development (Segal, 1973). However, these anxieties and fears appear to be associated with hostile experiences that were prevalent in participants' childhoods, possibly making contact with reality painful and disrupting the capacity for integration, resulting in a greater need for splitting and projective identification to be used as defences against intolerable anxiety in relationships.

Splitting allows for the re-ordering of experiences, for instance where splitting the object into good and bad parts enables the protection of the good from the bad. In Annie's case the good and idealised substitute mothers were split from the abandoning and inaccessible mother who could not be connected with. Self representations and part objects may also have been subjected to splitting such as a representation of self as anxious and unable to relax while her sister held aspects of the idealised self, the parts of the self that could be

easy going and fun and which were projected onto her sibling: "...my sister wasn't as affected uhm she was quite happy just doing her own thing, very independent, uhm, and I just wasn't".

Most of the participants used splitting to enable retention of the ideal object, separating it from the persecutory one. Most splitting occurred in images between parents, such as the perpetrator father and the victimised mother, or even in oscillations between parents where parents interchanged roles in the mind of the child. Sometimes there was a marked split between the images of the various mother figures, such as in Kreveshni's case, where the maternal object was retained as desired and idealised and the grandmother became denoted as the bad object, characterised by persecution and abandonment. Splitting was also present in images of the father figure where Hannah created split images of the father as an ideal object who was easy going and fun with her but also of an alternate father who was destructive and aggressive with her mother. In their research with college students, Lopez et al. (1997) noticed that the capacity for integration of internalised objects is a skill that continues to mature beyond adolescence, thus providing a more normative stance on splitting as a defence mechanism. They suggest that normally functioning individuals may not necessarily have completely integrated internal images of self and other associated with experiences of caregiving. This may be particularly relevant to children exposed to family violence where integration may be subject to even greater disturbance. These researchers also acknowledged that more securely attached individuals tended to use splitting considerably less than insecurely attached ones and this was present in this study where securely attached participants' use of splitting was less prominent. Also, the rage associated with more preoccupied attachment states of mind may very well be suggestive of a greater propensity to engage in splitting.

It would be expected that in environments of family violence, splitting and projective mechanisms would abound given the rigidity and apparent aggression displayed in front of and sometimes towards children. The participants in this study did indeed display use of these defences but not rigidly so and they also managed to develop alternative strategies or mental escapes to cope with states of anxiety, fear and anger that they experienced in their childhood.

Mental escapes

Due to relational trauma and the pain of deprivation children may use a variety of ways to escape from intolerable anxiety brought about by a distressing family environment. Mental escapes comprise various methods of avoiding troubling memories and may range from somatisation where pain is felt in the body to more cognitive ways of self protection such as intellectualisation, displacement, thought suppression, humour and altruism which were all exhibited by participants in differing combinations. One of the most interesting defences used and which is perhaps also connected to the resilient use of the mind, is what Bowins (2004) calls imaginative involvement, where there is a shifting of attention away from

distressing experience to a more pleasant area of focus. This was most pronounced in Hannah and Lerato who represented it in the following way:

Hannah:so I remember when I was growing up and I learned to read, I used to read a lot so I'd read fantasy books and hmmm ja I would read anything that I would pick up and I used to read quite a lot because I was always in the house, there was not really anything I could do so as soon as I knew how to read I got books and I used to read all the time to myself and I really enjoyed that, that's what kept me busy most of the time".

Lerato: "...I literally used to live in my own mind like I'd be around people but I'd just be you know I'm living in my own mind so....

The ability to retreat from a painful childhood world perhaps provided Lerato and Hannah with a sense of safety, allowing them to detach from frightening inner reality and the terror of external reality. Klein (1932) stated that hallucinatory states accompanied children's actions and experiences in childhood where fantasy (although she referred to this as phantasy, as mentioned before) encompassed the expression of sensation and instinct. This she perceived as a necessary precursor for emotional contact with others which eventually occurs upon the reaching of the depressive position. The imagination then facilitated the transition through paranoid-schizoid states but would not lead to psychological isolation if worked through successfully. When perpetuated, such avoidance of reality with self and others can be a form of pathological isolation and omnipotent defence against terrifying anxiety and depression (Colombi, 2010; Steiner, 1993). If persistent this retreat would inevitably delay development and integration, as fantasies would remain isolated and split, impoverishing the real sense of self. Winnicott (1952), like Klein, also suggested that illusional experience was a natural part of the developmental process. For him, this was a way of aiding transition to realisation where imagination and reality coincided and the child became aware of the caregiver as a separate other and was capable of tolerating momentary frustrations caused by the mother's absence.

For children exposed to trauma the relinquishing of fantasy and other mental escapes may be somewhat delayed, since physical and psychological distance from a dangerous family environment is only possible to attain much later. Although distrust and avoidance did present in early adulthood for Hannah and Lerato, as well as for most of the other participants, the fantasy retreat through creative writing and reading of books enabled these two participants in particular, to transform reality into something more pleasant (Bowins, 2004) and may have actually provided them with an alternative way of learning about others and of developing awareness of other's states of mind.

It has been suggested that living inside a fantasy world may disrupt the healthy development of a sense of self but as Colombi (2010) points out it does not always necessarily compromise the areas of thought and emotional awareness. Crittenden (1999) interestingly points out how insecurely attached, avoidant children often tend to engage in neutral activities such as reading to circumvent parental anger and avoid parental hostility,

as may have been the situation with Hannah and Lerato. Such tendencies do seem to exist on a continuum where as the need for fantasy increases, so does the manifested isolation, whereas when more contact with inner and outer reality is made, the engagement with an exclusive fantasy world and alienation become less and less intense, diminishing 'creativity' in writing for Lerato, for example, who was making more contact with others and this appeared to be reducing her need to escape through creative writing: "It's better, it's better for me as a person but I just don't know how much as a writer".

There were also times during the discourse when Lerato demonstrated some mild disorientation and requested that certain questions about the domestic violence be repeated. The subject matter was clearly difficult for her to engage with and she may have dissociated slightly at these times, suggesting that this may have been a common defence against trauma for her. This was also observed in other participants, who often reported feeling numb or 'not feeling anything' when occurrences of trauma and loss were being discussed. These states, however, did not prevail throughout the interviews. Dissociation essentially permits the ego to alter the internal state so that pain appears irrelevant (Bowins, 2004). Numbing blocks affect that is disturbing and interferes with daily life and although this is not inherently pathological, Sroufe et al. (1999) tell us that usually dissociation does involve a need to separate affect from memories of trauma. This was observed to be the case with participants but again it was not engaged in to such an extent as to disrupt functioning or completely digress thought processes at all times.

Mental and affective escape is also made possible through thought suppression which involves the conscious blocking of memories and perceptual reality (Juni, 1997). Threatening experiences are denied attention as focus is diverted away from distressing memories while maintaining some awareness. This was the case with Ilsa who deliberately avoided painful memories of her mother's sexual abuse so that normal functioning could continue without disruption: "..... so didn't really think about it till someone asked about it kind of thing".

Hannah also acknowledged cutting off distressing memories and affect.

... I think I've come to a point where I can block certain things out so I felt very numb...so I blocked it out, and uhmm I just reason in my mind that it was something that happened long ago and I think I've dealt with it so I didn't necessarily have any significant negative feelings.

The participants also used a variety of escapes in dealing with troubling, distressing emotions that had perhaps been amplified by their exposure to domestic violence. Through displacement, the anger and hatred initially felt may have been redirected to a substitute object as was the case with Kreveshni's disdain for her grandmother and Annie's criticism of her paternal grandfather as a 'monster'. This, according to Juni (1997) creates a distraction against pain and hurt. Most of the participants also exhibited use of intellectualisation and rationalisation where external events were put into a logical context thus minimising the

emotional impact of such experiences. By providing a socially acceptable reason for events, experiences that were potentially disturbing, became less so (Bowins, 2004).

For some of the participants what was threatening was the fact that demands from within and without, at times, exceeded personal resources (Antonovsky, 1987). This was often evident in experienced somatic symptoms either in childhood or developed illnesses in adolescence which were perpetuated as states of breakdown (Antonovsky, 1972) in adulthood and which required caretaking from their mothers. Hannah related incidents of her stomach being 'tied up in knots' when her parents argued and fought physically. Lerato experienced a significant period of illness in adolescence and Kreveshni and Annie confessed to welcoming states of illness to acquire caregiving from their mothers which could have served as a need for closeness and care as pointed out by Sroufe, et al. (1999). In these cases the psychological experience of anxiety and fear could have also been converted into bodily symptoms which would have been experienced as evidence of the reality of the danger experienced (Bowins, 2004; Hurvich, 2003). At the same time, these illnesses may also have provided real credence to their sense of vulnerability and mental anguish providing opportunities for instrumental caregiving to be received from parents who were otherwise experienced as disengaged or harsh. Garland (2004) argues that in psychosomatising the individual has possibly identified with the 'torturer' (p64) and directs attacks on the body by the self as a form of masochism. Alternatively one could argue that by being psycho-somatically ill, the individual identifies with the injured object who sustained the violence and assault, in attempts to assuage survivor guilt. In this study, the use of illness appears to have been strongly related to regressive attempts at receiving acknowledgement and care from parents who had been eliciting care from their children instead.

9.4.2 Compliance and caregiving as adaptation

As previously mentioned, compliance and caregiving were marked characteristics of these participants in childhood and young adulthood. Crittenden (1999) referred to children of insensitive or unavailable mothers as using such strategies to elicit adult attentiveness and closeness. She spoke about type A children, who had experienced self threatening dangerous environments as using compliance and caregiving to increase their safety. This is particularly relevant here since all of the participants used these methods to survive their childhood environments. This may have been undertaken to prevent aggression from caregivers and to avoid lack of protection. As children they essentially switched roles with the parent as role reversing became increasingly pronounced. Type A children tend to discern what parents want and what they are likely to do in order to take protective measures before the parents become dangerous (Crittenden, 1999; Crittenden & Dallos, 2009). Such states of vigilance may have tended to decrease the child's tolerance for new experiences and exploration, a condition which was very pronounced with most of the participants. However, such children were also more likely to engage in more neutral

activities such as reading a book or doing a puzzle in which the parent may or may not be involved (Crittenden, 1999).

Crittenden (1999) maintains that type A children also elicit more parental involvement through compulsive caregiving, the use of false positive emotion, and rapid compliance which may in turn decrease parental hostility and rejection. All of the participants in this study presented as compliant and perceptually vigilant. One of the participants for instance, was not only compliant as a child but when participating in this study seemed to provide herself an alternative for escape when booking the first appointment, perhaps in case the first interview with the researcher did not meet with expectations of safety. Once this had been established, after meeting the researcher, the alternative (a prior appointment) was quickly discarded and the interview proceeded. Jane too often pre-empted possible rejection or criticism by qualifying her answers carefully. Kreveshni, Annie, Leigh-Ann and Ilsa communicated a strong desire to assist and rescue the researcher from the plight of a lack of participants. In childhood they were not often reprimanded by their parents to whom they were often confidentes and whose maternal role they assumed with regards to siblings. They were all essentially adaptable and helpful children who developed into adults who mostly demonstrated an aversion to conflict and who sought to rescue, which was perhaps an indication suggesting that they would very much have liked to have been rescued themselves.

Crittenden (1999) observed that adaptation in this sense is the promotion of safety and not necessarily of security. In adulthood, she points out, security does not necessarily require a supportive, non dangerous environment in childhood, and anyway, change in attachment style in adulthood appears to be linked to the maturation of the mind in considering and modifying its own operation. Many children are also able to organise internal states and provide meaning to their experiences while protecting themselves. There are interplays between maturation and experience which may originate new internal organisations. She suggests that with maturation, the individual's mind becomes 'capable of making new distinctions, new integrations' (p.169) and therefore to re-structure own behaviour. This was markedly present in this study as interactions between internal resources of participants (such as intelligence) and new relationships promoted internal organisation and the search for meaning. Participants were also able to reflect on their parents' possible mental states and on their motivations for behaviour allowing them to better understand their early environments and make different choices about their own behaviour. Their ability to accurately allocate responsibility for specific events and for reflecting on the effects of those events upon themselves was manifest. Most of them acknowledged that experiences with their parents had made them less trusting of others, avoidant of conflict and more defensive when engaging with the world. Hannah, for instance clearly verbalised her reluctance to enter into a romantic relationship at this point in her life and Ilsa was aware that her choice of partners left her dissatisfied and disappointed. They were aware that they had an effect upon their context but they were also able to identify situations that could not be changed and that were beyond their control. They were reflective of their experiences and seeking new ones, which is an indication of resilient processes in the restoration of a sense of agency in choice.

However, what is also significant about Crittenden's view is that she did not consider early secure attachment to necessarily lead to security later. This could lead to the supposition that attachments styles then are deemed to be subject to change and connected to life experiences which is something Bowlby (1988) himself alluded to in his conceptualisations of attachment development. This would suggest the possibility that although six out of seven participants classified as secure on the AAI, they were not necessarily securely attached in childhood. It could also suggest that even though one participant was classified as insecure, this remains subject to change even in adulthood as she is exposed to different experiences .

Sroufe (2005) also pointed out that there are multiple influences that may impact outcome besides attachment history. He suggests that other aspects of parenting such as supporting social contacts of children, limit setting and stimulation also influence later development as do peer and sibling relationships. The presence of mediating factors and adaptation thus appeared to overlap in the lives of individuals suggesting that exposure to an unsafe family environment and its impact is complex and far from clearly understood. One of the issues which was prominent in this study was the presence of alternative attachment figures in the lives of all the participants whether in childhood, adolescence or young adulthood. These figures seemed to have provided emotional support and even protection in times of need which could have effectively buffered some of the negative impact of exposure to family violence and disrupted attachment.

9.4.3 Attachment styles as defensive manoeuvres

According to attachment theorists like Ainsworth (1969), Bowlby (1980) and Fonagy (2001, 2008) the sensitive responsiveness of the caregiver is believed to be one of the most important determinants of attachment security in the child and this appears to be a crucial aspect missing during violent episodes where parents became dysregulated in front of their children and were unable to think about what effect this may have had on their child. Certain parameters in both mothers and fathers have been identified by Fonagy (1999b; 2008) as promoting attachment security, these are: Sensitivity, prompt responsiveness to distress, non intrusiveness, warmth and involvement. Social support from other adults, including support from a partner, has also been identified as promoting the capacity of parents to elicit security of attachment in their offspring. Conversely anxiety, aggression, suspicion and psychopathology in parents has been associated with insecure attachment in children. The parents of the participants of this study appear to have at times, interacted with the world from a predominantly paranoid/schizoid position (Klein, 1932) demonstrating high levels of paternal aggression as well as maternal overprotection in a dire need for control. This may have interfered with the healthy development of their children as

the parents' internalised images of danger and malevolence were projected to members of the family and the outside world. As the attachment system was activated by such projections of danger the children would have naturally sought proximity and comfort from a caregiver that was often not available, was frightened or frightening (Hesse & Main, 1999).

Internal representations or internal working models of self and others acquired in childhood are purported to become the cornerstone for later attachments where expectations about others towards the self become ingrained (Berlin, et al., 2008; Calabrese et al., 2005). If the children's distress was met with parental abandonment, anger or detachment as was the case for participants during domestic violence, then they would likely have developed the expectation that with that individual their distress would not have met with the needed reassurance. To protect the self from further injury they would have developed defensive attachment mechanisms to avoid rejection from the parents and at the same time to remain connected to the caregiver (Lieberman, 2007; Fonagy, 1999b). Since patterns of attachment serve to maintain the child in close proximity to the caregiver, as avoidant children they may have actually minimised signals of distress and negativity in order to avoid rejection from the parent (Sroufe, et al., 1999) as seems to have been the case with participants who demonstrated slight dismissive features of attachment. Anxiety signals, as reported by others, on the other hand may have maintained the attention of a distant and inconsistent parent (Sroufe et al., 1999). Even disorganised children maintain proximity to the parent in the context of a frightening caregiver and internal conflict (Main & Hesse, 1990). This internal conflict is over the need to seek protection from a potentially frightening and rejecting parent. Therefore, "What are usually interpreted as maladaptive attachment strategies may, under some conditions, be beneficial for survival of an individual, "(Ein-Dor, Mikulincer, Doron & Shaver, 2010, p.124).

What Ein-Dor et al, (2010) are highlighting in the statement above is the fact that in some environments children may adopt attachment styles and particular roles which ensure not only their physical survival but also their psychological protection. In this context, it becomes almost irrelevant to determine these survival responses as being pathological since these enabled the participants as children to endure and survive danger, such as domestic violence between parents, for instance. These attachment styles (insecure and disorganised), only essentially become problematic when the need for their use is eliminated and yet they are perpetuated into adulthood.

Therefore insecure attachment states of avoidance, disorganised behaviour and high anxiety may be just a type of defence that participants in this study may have developed in childhood as a response to adverse family environments. Although most of the young women in this study were classified as securely attached on the AAI, there were indications that in at least 6 of the 7 participants this may have been a state of earned secure attachment in adulthood rather than a state present in their childhood. Leigh-Ann appears to have had a rather sensitive maternal figure who was emotionally available and it is

possible that this may have fostered secure attachment in childhood. She was also the only one who did not relate experiencing separation anxiety from her mother in childhood. The rest of the participants demonstrated high levels of separation anxiety as well and clingingness and or distance seeking from their parents. One of the participants was classified as demonstrating a preoccupied attachment style in adulthood which may have served in itself as a defence against abandonment in childhood. Attachment behaviour then may have functioned as a way of self protection from external danger (Crittenden, 1999; Crittenden & Dallos, 2009).

9.5 The quality of participants' current psychological worlds (Research question III)

In order to evaluate the quality of participants' internal states, an examination of their demonstrated coherence on the AAI and of their SOC becomes necessary. Most participants exhibited at least moderate coherence when relating past attachment experiences with their parents. States of unresolved /disorganised states of mind were detected in three participants, specifically in relation to experiences involving loss and trauma. Overall, participants' SOC scores fell below the average range of means for the general population, but this was a rather unique sample composed of individuals exposed to childhood relational trauma so this would be expected. Findings suggest that for the majority (except one) of participants, their psychological worlds were relatively ordered and structured despite their core assumptions about the helpfulness of others and their trustworthiness having remained shaken.

9.5.1 Internal coherence in the AAI

What is intriguing is that despite their experiences with their parents, most of the participants demonstrated moderate to high coherence in their narratives of their attachment experiences in childhood and in adulthood. Coherence as classified by the AAI involves the capacity to think about one's own thoughts and to represent feelings, memories and experiences specifically related to attachment without the need to deny or distort them (Slade, 1999; Slade et al., 2005). Fonagy and Target (1997) extended this concept of coherence to also include the individual's capacity for mentalisation or ability to not only reflect on their own internal experience but also to recognise and represent that of others. They maintained that this may only be achieved within the context of a secure attachment relationship. Bowlby (1988) further posited that traumatised children tended to develop multiple contradictory internal models of attachment and this may be expressed in incoherence of narrative. In light of this, when the early experiences of these participants are contemplated against their established classifications of security of attachment, such results may seem puzzling.

The question is how can clearly traumatised children exhibit later coherence of mind and moderate stability of internal representations as expected in secure attachment states of mind? Slade et al. (2005) make available the possibility that mothers who are insecure may nevertheless, demonstrate reflective functioning and adequate caregiving at times, which then contributes significantly towards their children's developed security of attachment. The implication of this study is that despite being traumatised some mothers did demonstrate periods of emotional availability and effective mothering which possibly facilitated the development of coherence and mentalisation in their children despite persistent trauma in the family. In some cases these mothers could not, and it was then in such cases when some attachment substitutes possibly did and continued to do so.

Some experiences of trauma and loss remained not fully processed for some participants and are suggestive of a need for further therapeutic intervention which may assist them to do so. The unresolved disorganised attachment classification was predicted by lapses in narrative such as in reasoning or discourse (Hesse, 1996; Hesse & Main, 2006) which were predominant enough in the AAI texts of Kreveshni, Leigh-Ann and Annie to warrant such a classification, but in relation to particular recalled events only. It is the lack of resolution of past experiences of loss and trauma that is associated with this particular classification of attachment states of mind (Hesse & Main, 1999) and not the actual experiences themselves. These u/d states of mind also occurred only in relation to particular experiences in childhood and were not necessarily applicable to other sections of their narratives. This included, most importantly, their overall representations of their relationships with their parents in childhood, which appeared, to differing degrees, to have been thought about and reworked in adolescence and adulthood.

9.5.2 The SOC -29 and AAI coherence of mind

Extending the notion of coherence, as typified by quality and organisation of conscious and unconscious attachment representations in the AAI, is Antonovsky's SOC concept which does include this focus on interpersonal relating, but also includes other dimensions. The factorial structure of the SOC is multidimensional and has not been clearly consolidated yet (Eriksson & Lindström, 2005), although an attempt has been made here to define it as a measurement of perceived inner resources and the ability to rely on others for support. The word 'perceived' perhaps best epitomises Antonovsky's (1979, 1986) description of SOC as being a global orientation or a personal disposition within an individual towards experiencing life.

The SOC dimensions are comprised of the individual's present experiences and future expectations in relation to self and others but not exclusively related to attachment with parents. SOC incorporates conscious attitudinal positions and beliefs regarding the expectation of co-operation from others in the now and in the future; the perceived ability of the self to mobilise support; to perceive the environment as predictable and to have the motivation and confidence to engage with future goals in relationships, spirituality,

emotions and even career. SOC therefore encompasses not just one's understanding and conceptualisation of past attachment history but broadens this to include understanding of self and outlook on life in the past, present and future in relation to others and not just parents. Bothmer and Fridlund (2003) made a useful attempt to reconfigure the questions of the SOC (29) under five major themes, namely that of a) meaning of life, b) control over feelings, c) negative emotions, d) trust/mistrust and e) changing future, which are used here to enable a better understanding of the participants' responses and SOC readings, particularly those whose SOC scores were the lowest within this sample. As suggested by Volanen (2011), SOC can be conceived of as being a psycho-emotional scale that differs from the specificity of the AAI, which is mostly concerned with issues of emotional regulation and effects of past attachment experiences on current attachment styles and not necessarily with purpose in life, future expectations or core assumptions about the world. Thus, while related, coherence as measured on the AAI and SOC, are related but distinct concepts.

It would perhaps be expected that securely attached states of mind may be matched by at least moderate SOC scores for this particular sample. This is so because stability of inner representations would be expected to positively impact the perception of future relationships as stable and predictable (comprehensibility and ability to attach securely), self-evaluation (meaningfulness), and therefore self confidence (manageability) and hope for a predictable, positive future. But what must also be kept in mind is that this particular sample is composed of individuals who have been exposed to cumulative trauma in childhood and may therefore not be comparable to more normative populations whose SOC scores are higher. Antonovsky's (1979, 1986) initial studies were also conducted with holocaust survivors who had experienced trauma and persecution but not necessarily within the family of origin as relational trauma like the participants in this study experienced as children.

This is an important research element because these participant's scores on the SOC (29) confirm Volanen's (2011) study indicating that negative life events affect the strength of an individual's SOC and that childhood living conditions, particularly being in fear of a family member, does so even more significantly. In fact, Volanen (2011) suggested that childhood living conditions were among the most influential factors contributing towards the developed SOC later in life, with a poor relationship with both parents placing an individual at higher risk to a lowered SOC. A study by Lundberg (1997) also supports the notion that those exposed to experiences of hostility and conflicts in the family during childhood have a 30% increased risk of having a low SOC in later life. Given the deleterious effect of family violence this would possibly explain why the participants in this study achieved lower SOC scores than would be expected in the general population.

However differences between AAI coherence measures and SOC conceptualisations make space for the possibility that an individual may demonstrate the capacity for coherence in

relating their past attachment experiences and effects but may also demonstrate difficulties in having expectations of others as being helpful in the future and having the self-confidence to pursue goals. This is where the effects of trauma, such as decreased trust in others and lowered self-esteem, for instance (Freyd, 1998; Lim et al., 2012), and implications for future development intersect with AAI classifications demonstrating coherence. An individual may have the cognitive and emotional awareness and insight as to their experiences, be moderately able to regulate strong emotions and yet be affected by these experiences in ways that somewhat dilute their expectations for cooperation in a world that can be chaotic and unpredictable. By implication, what the AAI does not measure is the individual's projected beliefs about having their attachment needs met in the future. Although all the participants that demonstrated securely attached states of mind on the AAI showed a strong valuing of attachment, they did not necessarily believe secure, safe attachments were easy to come by.

Most participants' coherent attachment states of mind were equally matched by their moderate SOC scores for this sample in particular (taking into account their early experiences of trauma), in terms of some positive expectations of the future, the demonstrated self confidence to engage with challenges and, to be understood. There was a tendency in some participants to demonstrate greater trust in self than trust in future cooperation from others. This concurs with research studies which attest that experiences of trauma and violence diminish basic assumptions of the world as being a meaningful, benign and safe place (Volanen, 2011) and therefore of others being naturally helpful and benevolent. Core assumptions about the world and others as being untrustworthy and unpredictable therefore remained. For them the world was not really very structured or manageable despite there being self-confidence in the management of emotions which were sometimes negative.

One participant demonstrated an insecure style of attachment and a lowered SOC score (101) in comparison to other participants, suggesting an incomplete process of resolution but with indications of potential for forward movement in her attendance of therapy and in attempts to form new, supportive relationships. She was also observed to have a vibrant and humorous outlook which may have further aided her as personal resources (manageability) in overcoming effects of trauma in the future. Volanen (2011) revealed that life events may influence the strength of the SOC thereby suggesting that therapeutic interventions and other significant and positive experiences may improve the strength of the SOC as a possibility for participants. The experience of physical separation from the family environment is also an important factor to consider since it may provide the individual with a degree of emotional separation and the safety needed for processing and integration of trauma to begin to take place. This particular participant was still residing with her parents and this in itself, may have made it more difficult for her to distance herself emotionally, to think about and order her internal experiences of trauma.

What was at first unclear was why two of the participants who demonstrated security of attachment and relatively good coherence of narrative on the AAI would demonstrate a contrast in their considerably lower SOC scores in comparison with other participants (92 and 105, which are considerably lower than the rest of the sample scores) and particularly in reference to comprehensibility. These particular results are therefore evaluated individually.

Annie for instance, was classified as securely attached, which when framed against a backdrop of therapy of long duration, her cognitive ability and a supportive couple relationship becomes understandable. However, her SOC score was the lowest of the group demonstrating, by her answers on the SOC questionnaire and during the interviews, far greater pessimism regarding the future and a deep seated disappointment with and distrust of herself and others, which was carried through in her low motivation to expect positive experiences in the future. One of the biggest hurdles appears to have been the expectation of unpredictability in the world around her and a demonstrated lack of personal confidence in handling unfamiliar situations in the here and now and in the future. This may not have been reflective of her true abilities but a mere reflection of her perception of herself and her world. Annie also reported difficulties with establishing clear goals for her life which overlapped with a slight existential lack of purpose and meaning in life. The latter may have been related to a lack of internalised secure enough objects which were capable of providing meaning and thus a well established and defined sense of self. It should also be stated that Annie's experience of domestic violence was characterised by the most frequent and involving violence where she herself was assaulted. Her relationship with her father was therefore particularly characterised by parental rejection and volatility suggesting that the father's role as protector was subject to greater disturbance for her than for other participants. This may have augmented her distrust in others and her expectation for rejection in the future.

Volanen (2011) suggests that the experience of violence shatters the individual's sense of self worth and confidence in one's ability to control future life events leading to a negative perception of the world and of self. This appears to have been the case with Annie and the suggestion is that she was able to attain a capacity for inner coherence but that this had not yet enabled a revision of core assumptions and therefore a changed outlook on life and its challenges. For her, the world remained considerably scary, disordered and unpredictable, perhaps because her cognitive coherence surpassed her ongoing search for emotional resolution. Lemma (2004) reported on the fact that trauma may be expected to diminish an individual's trust in one's internal objects making hopeful expectations of the future difficult. This may have been the case for Annie who still appeared to need to develop the internal confidence to manage internal conflict thereby engaging more freely with the external world.

Despite a lower SOC score, Ilsa, on the other hand, demonstrated remarkable motivation to engage with life and hope for the future. She too demonstrated moderate coherence and security of attachment. She trusted herself to find solutions to difficult problems and to achieve her goals, but her trust in others was severely compromised, more so than in other participants, except for Annie. This stance was supported by tendencies towards slight dismissive features in her attachment representations, that were present and which were suggestive of a somewhat more positive model of self than of others. The difficulty was that for Ilsa, trusting others in a world that remained unpredictable, disordered and chaotic, while she was ordered and careful, was very difficult. She was aware of her own difficulties with establishing intimate relationships with others and did not expect to be treated fairly in relationships. While on the surface she may have consciously trusted herself more than others, it is possible that unconsciously she remained unsure of her own internalised objects' capacity to tolerate closeness and connection. Her relationship with her father was particularly complex being characterised by perpetual parental manipulation and the sexual abuse of her mother by her father.

Despite this she was prepared to maintain hope for the future and willing to engage as indicated by her answers on the SOC (29) questionnaire and responses during interviews. Ilsa's experience of domestic violence had also been tainted by the complexity of the marital relationship which had encompassed sexual abuse of the mother and which could have more negatively affected her trust in her object representations of others when compared to other participants, none of which had experienced this unique factor. The possibility is that her experiences of trauma had so affected her expectation of persecution, that the world around her was perceived as being mostly unpredictable and dangerous. It is also possible that the sexual abuse of a parent exacerbates the negative effects of domestic violence upon a child, increasing distrust and fear of others, more so than in cases where domestic violence is expressed in a physical and verbal manner. This may lead to greater attachment disturbance in childhood and to increased confusion which is perhaps a possible avenue for further research in comparing the effects of domestic violence, different types of exposure and the SOC of adults exposed to this in childhood. It is possible that the development and growth of SOC occurs through the resolution of trauma, and that the fact that these two participants had more intense trauma to negotiate, implies that they may still be engaged in a period of transition, where expectations of themselves and others are still 'under review'.

What is also noted here is the need for further research in investigating the SOC in adults who have been exposed to domestic violence in childhood in South Africa and a comparison to others who have not. This would provide a fairer basis for comparison among those groups who have endured trauma. Perhaps this would also serve to highlight areas of SOC development which are particularly vulnerable to traumatic experiences in childhood.

Overall it is also important to mention that the three lowest SOC scores in this sample were attained by participants who experienced more current difficulties with physical illness, depression and more prominent anxiety. While the possibility exists that these conditions are a result of their current psychic organisations, the corollary argument also exists in that perhaps their psychic organisations and related expectations of themselves and others were reflected as they were on the measures, due to the fact that these conditions made it more difficult for them to think about and expect more support and assistance from others in the future, and therefore dampened their sense of trust in others and sometimes, in themselves. The possibility remains that by addressing these conditions, and their need for them in some aspects of their lives, they may eventually develop a better capacity to think about the future with a greater sense of hope and to find order in their inner world and consequently in the world around them.

The highest SOC scores were obtained by three participants who had not been directly, physically involved in the domestic violence and who had sought physical distance when this was taking place between parents, either by being in another room looking after siblings or by distracting themselves at the time. Two of these participants also tended to have more consistent access to alternative attachment figures and for the third, the domestic violence was of limited duration, having occurred for a period of four years only and ended with the divorce of her mother from her stepfather. The possibility is that varying duration of exposure to domestic violence may lead to differing intensity of effects upon children as suggested by Howell, et al., (2010).

9.6 Generation of meaning out of childhood experiences (Research Question IV)

Antonovsky (1979, 1987) maintained that a sense of meaning in life is dependent upon the individual's identification with others, such as in significant relationships but also with the broader community. Interpersonal relationships and participants' attachment states of mind in this context are therefore conceived as resources that they have used to generate meaning out of their childhood experiences, made possible identification with supportive others and thus assisted them in resuming the process of maturational growth. The presence of attachment substitutes in their life, their faith in God, earned attachment security and their search for self definition contributed significantly to their current adaptiveness and the sense that life was worthwhile. Their ability to remember benevolence, to love, to care and to invest in reparation were also suggestive of their valuing of others and of meaningful attitudes towards suffering which had been unavoidable. What was also marked in this study was the fact that when parents were able to be open about their own traumatic experiences in childhood, this assisted the participants in better understanding their parents and in making more meaning out of the domestic violence and its origin.

9.6.1 Attachment Substitutes

Both Ainsworth (1985) and Bowlby (1982) proposed that a history of insecure or unsatisfactory attachments would predispose a child to search for substitute attachment figures. A child would naturally seek an object that is capable of connectedness and of holding the components of self in security of attachment (Colombi, 2010; Winnicott, 1958b). Children who did not experience secure attachment with their parents would therefore be more prone to seeking replacements, such as teachers, older siblings or other relatives who were perhaps more responsive and available. Ainsworth (1991) suggested that some children may become attached to parent surrogates and may find in them the security that they could not attain with their own parents. This is supported in this study as attachment surrogates often provided safety and sometimes even provided a secure base in childhood and adulthood allowing the individuals in this study to explore and re-assess their internal working models.

These caring relationships assisted in the creation of meaning since they were especially significant to participants, in their propensity to reduce suffering and help make sense of the world (Heath, 2011). Antonovsky (1972) stressed the importance of 'profound ties '(p. 542) to others who are caring and who in turn become a resource to the individual in increasing inner strength to address life challenges and demands. Protective surrogates in participants' childhoods tended to be family members such as grandmothers and aunts or an older sibling. In adulthood a supportive function was usually performed by a partner, a strong friendship or a therapist.

Although the surrogate may never really be a complete replacement for the attachment figure, they may also provide the individual with a shared understanding of experience and with friendship (Ainsworth, 1991) or as in therapy, with a safe space and relationship for healthier development of a sense of self. Fonagy (1999b) reported that studies of resilient children suggest that even a single secure relationship may be sufficient for the development of reflective processes, although he actually refers to this as possibly 'saving' the child. Through mentalisation, by attributing a cognitive or emotional state to others, their parents' behaviour thus became more understandable and served a protective function as they were better able to moderate the impact of the bad experience with their parents. For instance, a mother who is irresponsible and needy and a father who is violent may be so due to their own trauma, depression and unhappiness and this is perceived as unrelated to their relationship with the child. Through attachment surrogates, participants may therefore have been better able to engage in such reflection, avoiding assigning the blame for their parents' behaviour to themselves. This was evident in Jane, Lerato, Leigh-Ann, Hannah and Ilsa's understandings of their childhoods. Mentalisation then became an internal protective process for them.

In Jane's case, her grandmother became the replacement figure who was perceived as accessible and as providing what Lieberman et al. (2005) term as unconditional care and she was able to distinguish between a mother figure who was available and one who was not.

So my mom you know I suppose it's hard for her, because she always had this great competitor in the eyes of your mother-in-law so I would always choose my granny over her [mother] which I suppose now is really sad 'cos I have my own kid and that would kill me if my daughter did that ...

Hannah was also able to seek comfort from her grandmother and aunt, while Leigh-Ann maintained close relationships with extended family members such as aunts and uncles directly related to her mother. Ilsa had a positive relationship with her grandmother and with a friend's family with whom she moved in for a period of time when she was sixteen years old. Kreveshni's grandfather was a supportive parental figure in her life and his death, when she was a young teenager, activated unresolved feelings of loss with which she still battles in adulthood. Lerato remembered relying upon her older brother as the 'only one' she was ever sure of. Annie however, experienced difficulty in finding alternative attachment figures in the home and therefore became excessively preoccupied with finding mother substitutes in teachers and therapists, something she acknowledged as still prevailing in her adult years:

I think yeah I'm just so focused on the people...the immediate people around me, like mothers and whatever I can't really uhm...and that hasn't been satisfied, so I don't think there are anymore that I could think of. Uhm...you know there are a lot of people but they're all mother substitutes so.

Perhaps, this too served to maintain her distance from a maternal object that she was dependent on, yet feared. Despite this she had created a safe space with her long—term therapist with whom she was able to discuss her stress, anxiety and fear. While certain of the participants struggled to individuate, intriguingly, Jane and Lerato's difficulties in their relationship with their mothers intensified in adolescence where in experiencing the paranoid-schizoid position, teenagers naturally turn away from their parents and attempt to free themselves from their old attachments (Klein, 1937, 1940). This may have facilitated the possibility of mourning the loss of the idealised maternal object since these mothers were able to withstand their children's expressed rage and the relationship survived.

Kuchan (2009) argues that when hatred is felt towards the mother object who is 'good-enough' and survives then the idealised mother may be relinquished for a separate, real maternal object that is flawed but loved. In this study, even when the mother was not always 'good enough' this process was still successfully experienced by some participants. Despite mothers being experienced as rejecting and unprotective at times, some participants still managed to fully experience their hatred of the object, to express this and the relationships survived and improved. The loss of the object could therefore be mourned. Even if there were times in childhood where these participants, as children, were clearly not protected and became engaged in pathological role reversing, some of the parents did make

concerted efforts to maintain relationships with their children and tried to make amends for past experiences that may have been harsh and insensitive. A capacity to integrate may also be suggested by participants' awareness of how traumatic experiences triggered personal responses as well as how the use of experiences (Lindbom-Jakobson & Lindgren, 2001), such as alternative attachments or therapy, were sources of information that informed current relationships and own behaviour.

9.6.2 Understanding parents

Some participants' parents were open with their children in sharing and acknowledging their own early experiences with their parents and their own trauma sources. Although this did not appear to have assisted the parents with their own emotional regulation, since the domestic violence continued, it does seem to have helped their children to make sense of their childhood in some ways.

Participants were able to understand where the violent behaviour and emotional dysregulation of their parents had originated. Their ability to understand their parents' mental states was a mediating factor in their resilience (Fonagy in Gerber, 2006). For instance, five participants recounted how their fathers had been exposed to intense and ongoing domestic violence as children and in some cases had been physically abused by their own parents. They were also able to connect the lack of warmth and caring experienced by their parents as children to ongoing states of extreme anxiety and aggression experienced by them as adults. Annie, for example, described her mother as being very anxious and 'all over the place' and went on to explain what she perceived to be the origin of this.

Yeah, uhm, she [mother] never really indulged in her own problems it was always about making sure everyone else was okay and again trying to be strong so never expressing her sadness and I mean I know she went through huge problems with her mom, her mom just blamed her for everything, her mom was extremely anxious and just had so many problems and kind of sucked my mom into her problems and she would call my mom up and just scream at her for nothing....

Leigh-Ann also made similar connections when talking about her father's violence: "I think it might have resulted from his childhood because his father was also really aggressive towards his mother 'cos his father broke his mother's ribs, and her leg, so I think that kind of damaged him in a way".

Reflections like this seem to have assisted participants in understanding that their parents' difficulties were not connected to them and that they could not take responsibility for their parents' behaviour since the origin of this lay elsewhere. This may have prevented some from internalising states of self-blame and persecutory guilt for the trauma, and rather allowed for emotional separation from home circumstances, up to a point. These insights also allowed participants the opportunity to feel compassion and sadness for their parents who at times, could not tolerate their own suffering, anxiety and pain. The question that

arose in connection to this was also whether parents made attempts to understand their children and their response to the trauma. Or in other words, did participants feel understood by their parents? The answer was, for most of them, in the negative. None of the participants felt that their fathers were in any way sensitised to the effect that their behaviour was having upon them as children. Despite mothers being at times available and providing caregiving, six out of seven participants also did not feel that their mothers were sensitive to their incurred emotional trauma in childhood due to the domestic violence in particular. One participant felt understood by her mother and this parent did attempt to separate from her abusive partner, but was killed in the process.

This issue raises concerns about the fact that while these participants were sensitive to their parents' backgrounds and the effects of these on their emotions and behaviour, parents often were not able to reciprocate with regards to the effects of the domestic violence upon their children. This could be due to high levels of emotional dysregulation and lowered mentalisation states being experienced by partners when they are involved in violent episodes. Because the event may be so traumatic for parents, they may afterwards avoid feelings of guilt and therefore avoid thinking about the effects of their behaviour or defend strongly against doing so. As children, participants may not have been kept in mind by their parents at crucial moments of trauma and were left to work through their own trauma on their own, while simultaneously attempting to regulate their own affect. This would have been difficult due to the lack of opportunity for communicating about experiences and intense emotions evoked (Crittenden & Dallos, 2009).

The development of mentalisation would inevitably have been expected to be detrimentally influenced and yet these children seem to have been able to develop a sense of compassion for their parents' mental states and an understanding of the parents' own trauma. There are reasons to suppose therefore, that they used resources within themselves and in their environment to enable reflective processes to develop and, in these cases, this demonstrates resilience.

9.6.3 God as the alternate parent

The connection between elements of psychoanalysis such as the tension between the inner capacity for love and hate, attachment to God and the Judeo-Christian faith have been alluded to by various theorists in the field (Graqvist & Kirkpatrick, 2008; Kuchan, 2009; Young, 1994) although research into this connection seems to remain emergent. Faith in God remains a fascinating component of the search for meaningfulness in individuals with traumatic backgrounds and was raised in fairly intense ways by two of the participants in this study, as they wrestled with love and hate as well as with issues of forgiveness and accountability of self and others.

Granqvist and Kirkpatrick (2008) point out that strong affect is experienced in the context of a relationship with God which does resemble the attachment of a child to her mother. God

is experienced as a type of parental figure and as a secure base highlighting the strong connection between attachment quality and faith (Granqvist & Kirkpatrick, 2008). Kuchan (2009), herself a practicing psychoanalyst, comments on the benefits of a 'divine-human process of relationship' (p. 121) where God is not experienced as a human construct but as an objective subject, and this is suggestive of a bond of attachment in itself. This was the reported experience of two participants in this study. One can only speculate as to the potential for benign change that this may foster to internal working models as well as opportunities to process hatred, rage, anxiety and pain within a context of forgiveness and repair.

The relationship of faith and attachment is not fully understood but there are two prominent theories that have been proposed to explain this connection: The first is compensation hypothesis; this viewpoint suggests that God provides a kind of attachment relationship that an individual did not have with a parent as a primary attachment figure. The attachment to God regulates distress and this has been supported by research with religious converts who have experienced emotional turmoil and have also reported more problematic childhood relationships with parents than matched controls groups or nonconverts (Granqvist & Kirkpatrick, 2008). Interestingly, in their research review, Granqvist & Kirkpatrick (2008) reported that turning to God as an attachment figure was associated with an improved sense of well-being even when respondents remembered their mothers as relatively insensitive. In a similar way, both Hannah and Jane reported experiencing their mothers as emotionally unavailable, yet their security of attachment classification denoted a balanced and coherent perspective of early experiences with parents. Both young women, however, also had access to attachment substitutes that had facilitated the development of their faith. Faith in God as a loving, protective father was discussed at length by them as having positively influenced their lives and relationships and as eliciting their ability to forgive. Hannah related her experience of this as follows:

Ok so I think the big part of how it changed for me even in terms of how I relate to my father is, when I consider my relationship with God I see him as a father to me so even when my father has his shortfalls whatever I consider God to be the perfect father for me. So it's just moved from it being about rules and doing right and wrong to just a loving and a caring relationship with God and I feel that even if my parents are not necessarily there all the time to provide you with the necessary emotional care and my mom is depressed half the time and she doesn't really admit that she is but it's just that emotional aspect has never been there for me from my parents, so I think turning to God for that it really influenced my faith...

As was the case with Hannah and Jane, Park et al. (2003) report that secure individuals with insecure attachments in childhood seem to report a secure attachment to God, a position that is confirmed by Mikulincer and Shaver (2008) who comment on secure individuals seeking proximity to alternate parental attachment figures such as God, in times of need. In this later study with undergraduate students they also noted that insecurely attached individuals were less likely to seek proximity to God following experiences of separation.

The alternate theory of correspondence indicates that due to repeated experiences with attachment figures, children develop beliefs and expectations about the availability of caregivers which ultimately guide future responses in other social interactions (Granqvist & Kirkpatrick, 2008). Secure individuals are therefore more likely to adopt parental beliefs in general due to their earlier experiences with sensitive and religious caregivers. This viewpoint was not fully supported by the experiences of participants in this study. Hannah reported having a rigidly religious mother who had fostered in her a fear of God and this culminated in a temporary period of agnosticism at University. It was only when she made contact with others in friendship that Hannah's faith was reawakened and transformed. Jane too reported not being raised in a religious environment where neither parent really focused on faith during her childhood. She had, however, struck up a friendship in primary school with someone whose family was church going and it was in this context that faith was first introduced. Her concept of God, rather than being simply an attachment figure or alternate father, was also that of a saviour who forgave her for her capacity for destructiveness and enabled her, in turn, to forgive others. When reflecting on her childhood she was able to distinguish between her spiritual commitment and that of her parents.

So I'm...my parents are kind of agnostic I suppose they're not...'cos my dad will go to church but he'll dabble in stuff like freemasonry so he's not like completely committed to that I suppose uhm and I really became a Christian when I was fifteen, uhm my...actually my husband and his sister 'cos she was my best friend.......Ja, she took me to church with her, and that's when I became Christian and I really didn't...I wasn't anti—God before then but I didn't realise like how much God loves us and what He did for us and so uhm, it's really become a central tenet of my life......it really is a very central part of my life, I'm very grateful for grace and for what it offers us uhm and how living life with God now is a better way to live so even if there's no after life I can tolerate that, but uh, doing life with Christ now is better than not.

It could be suggested that despite having negative or neutral experiences of faith in childhood with parents that were violent or unavailable, the presence of sensitive others made the possibility of an attachment to God, as a safe and available presence, possible in adolescence and adulthood for these participants. This does add some credence to both theories of correspondence and compensation since participants seemed to be searching for a greater purpose in life, for meaning and for what they could not attain in their relationships with their parents. This was also facilitated by alternative attachment figures as providing a bridge to the development of faith in God. What is also of further significance here is the participants' willingness to re-engage with God and others and therefore to trust despite their early traumatic experiences.

9.6.4 Earned Attachment Security

Although it is not possible to be certain about participants' childhood attachment states of mind, one has to consider the likely possibility that some of these young women attained a classification of secure attachment style due to overcoming negative parenting histories.

The AAI classification distributions of clinical and non-clinical groups tend to differ markedly in the population with clinical samples showing more insecure and unresolved attachment representations which have implications for patterns of caregiving by them as parents (Bakermans-Kranenburg & van Ijzendoorn, 2009; Solomon & George, 1999; Zajac & Kobak, 2009).

When considering these high risk clinical samples involving adults exposed to trauma and to violent families, Bakermans-Kranenburg & van Ijzendoorn (2009) and Liotti (2004) report on the high likelihood (70%) of such individuals attaining a classification of unresolved or cannot classify on the AAI. Busch & Lieberman (2007) also maintain that exposure to domestic violence is a risk factor for the development of disorganised attachment in children.

Although three participants in this study did classify as unresolved with regards to trauma and loss, most of them also demonstrated secondary secure attachment states of mind in adulthood. Given their troubling childhood experiences of cumulative trauma and disrupted parenting it could be speculated that insecure attachment states of mind may have been present for most of them in childhood, yet somehow this was not perpetuated in adulthood. Due to their childhood experiences of trauma they could also be considered at high risk (as in clinical samples) for developing seriously disrupted attachment states of mind, yet they do not fit the expectation of research by Bakermans-Kranenburg & van Ijzendoorn (2009) and Liotti (2004). Therefore, it becomes vital to consider earned security as a viable explanation for the findings of this study.

The classification of earned security has varied over time as research attempts are made to clarify this concept, with sometimes a focus being placed on loving or unloving scores of one parent or both on the AAI (Roisman, et al., 2002; Saunders, et al., 2011). Roisman et al. (2002) maintain that individuals who are able to produce coherent accounts of their early experiences of which a significant part were negative or harsh, are classified as earned secure. In their study, earned secures did manifest with depression, as was the case with some participants in this sample. Yet in the Roisman et al. (2002) study such adults also presented with similar levels of supportive parenting skills as continuous-secure individuals.³² This would perhaps be an important hypotheses to test in the future with further research on earned secures who are parents in South Africa.

Despite negative experiences in childhood, the individuals in this study seem to have in one way or another, received supportive maternal care (Roisman et al. 2002). Saunders et al. (2010) suggest that there are various ways in which this may have occurred, for instance through the presence of alternative attachment figures or through long-term therapy as possible pathways to earned security of attachment. This study extends this to specifically

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³² Continuous secure individuals are deemed to have been securely attached to their caregiver/s from early childhood (Roisman et al, 2002).

include the support of older siblings as well as friendships in the school years and the families of such friends. Attachment substitutes in adulthood were also found to play a significant role in this.

Roisman et al. (2002) suggest that sometimes mothers themselves, may attempt to compensate for negative environments by attempts to improve conditions for their children, which was the case with some of the mothers of participants who valued their relationships with their daughters and sought to maintain the attachment. Alternative attachment figures were also found to be willing to listen to participants when they were upset and to help them in their distress. Earned secure women have been reported to be more likely to have attended long-term therapy which may have assisted them in coherently reframing their childhood and helping them to reflect on their internal states and those of others (Saunders et al., 2011). Buchheim & Kächele (2003) suggest that internal working models of attachment may be reorganised after a new and positive experience with a partner or psychotherapy. This is supported by the fact that six of the participants in this study had attended therapy, most of long duration and some were still doing so. They all also had access to alternative attachment figures at different stages in their lives, suggesting that even if there are limitations in childhood, accessibility to a caring adult other than a parent, access to such a relationship in adolescence and even young adulthood can make a difference for the better. Saunders et al. (2011) suggest that if individuals with unloving parents are able to internalise better attachment strategies from other supports as is suspected to be the case with most of these participants, perhaps these new strategies may very well exceed their negative working models from childhood and internal representations of self and others.

9.6.5 Searching for the true self

Zvělc (2010) relates attachment and separation as complementary states which allow for the individual's capacity to connect with others while simultaneously developing individuality. Secure attachment provides the child with a basis for active exploration and mastery of the environment by enabling autonomy and encouraging dependence on caregivers in times of stress and need, promoting self- regulation and freedom from worry about the availability of the caregiver (Demidenko et al., 2010). This fosters the development of a coherent identity, something which several of the participants recognised as being something that they had not managed to explore fully within their family and which was described by one of them as follows:

...so it very negatively affected my identity, I didn't have an identity, I was just that person in the marriage with my parents, I wasn't even the child, so I was just.....it was like a three-way sick sort of marriage... .

Disorder in the family environment may negatively affect the development of self and consequently that of a strong SOC as depicted by participants. A person with a strong SOC, which has been established in childhood, would be able to use the orderliness of the

environment to counterbalance internal pressures towards disorder (Antonovsky, 1987). They would mobilise their resources to do so and this was something that some of the participants could engage in better than others. It is however, important to remember that even when early care by parents has been markedly negative, few childhood environments are utterly deplete of positive encounters, courageous decisions (Antonovsky, 1987) or sustained positive change. The unique constellations of these in the participants lives could explain why these young women were at different stages in their search for self definition.

Another crucial aspect to consider is the process of separation-individuation described by Mahler (1968, 1970), which entails the development of independence and autonomy from utter dependence on another and it is this which facilitates the emergence of a stable sense of self (Zvělc, 2010). Demidenko et al. (2010) report that a child's perception of the degree to which she is valued is dependent on the responsiveness of esteem by the caregiver which is introjected to form the basis for a developing sense of self. Due to a negative internal model of self, a few individuals did demonstrate a limited ability to draw on internal resources for reassurance and validation, and were therefore compelled to seek this from external objects, although most exhibited greater trust in their own abilities and trustworthiness than in that of others.

There was also, sometimes, the sense that four of these participants were often prematurely thrust into intellectual work, which Winnicott (1960b) described as a type of mending for parental deficits, a way of making reparation for the parents' destructive tendencies, but which was in actual fact cold comfort for them as children, leaving them with some difficulty with facing their own destructiveness and thereby mourning the loss of the parental object (Klein, 1937; Sheppard, 2009). At the same time, intellectual work may have given them a purpose, an opportunity to develop their own mind and to adopt a role in their search for self identity. For most of the participants, their academic success was extremely rewarding and important, evoking hope for the future and a sense of personal accomplishment.

Winnicott (1960) warned that when a false self organisation was present in an individual who had high intellectual capacity there was the possibility for the false self to become located in the mind. A disconnect then existed between intellectual activity and psychosomatic existence and the mind was used as an escape and the intellect as an avenue of solving personal problems. There were traces of this in the lives of participants but this was not observed to be particularly marked in this sample, although it may have been expected given their early environmental experiences and the focus on education that most parents maintained. Winnicott (1960b) described the true self as capable of creativity, of spontaneous gestures and a sense of realness. In individuals with high degrees of split between the true self and the false self there appears to be a poor capacity for symbols and a poverty of cultural living, extreme restlessness and a need to collect impingements of others from external reality so that living can be filled by reactions to these. None of the

participants in this study exhibited such intense splits or an excessive preoccupation with others' lives, although one participant did confess to making occasional attempts at 'solving' others' relationship problems. Most of their concerns however, revolved around attaining resolution for experienced trauma and establishing supportive relationships in the present, and it was these dimensions that seemed to belie their search for self definition and purpose.

Antonovsky (1987) maintained that it was possible to encourage people to seek out SOC enhancing experiences that facilitated long-lasting and consistent change. It is suggested here that therapy could be one of these experiences which could fortify the self and perhaps foster differentiation within the capacity for relatedness. Zvělc (2010) defined true individuality as the attainment of object constancy evidenced in the capacity to be alone and tolerance for periods of separation from significant attachments which the majority of participants were negotiating and were in the process of attaining. Zvělc (2010) positioned this on a continuum, where as the individual developed so did the development of intersubjectivity or mentalisation (Fonagy, 2008) where the other was recognised as separate and the capacity for real intimacy emerged. Conceiving of these participants' positionings on this continuum would perhaps provide a realistic appraisal of their development, of accomplished milestones and of those still to be conquered in attaining security of sense of self.

9.6.6 Love and reparation

A tolerance for feelings of anger, love, loss and grief enable love to co-exist with loss (Kavaler-Adler, 2007). Thus the experience of processed anger and rage at parents who were emotionally abandoning and, at times, violent, could be thought of as a prerequisite for the survival of love and for the grieving of loss. This process was made possible for some participants especially in relation to their attachments to their mothers. In Lerato's case, for instance, at first the maternal object was split into the idealised, omnipotent mother and the devalued, mean and unfair one, who persecuted. A period of anger and expressed protest ensued in adolescence with verbal attacks upon a mother who was perceived as demanding and unfair but who also survived such angry, personal assaults. The reintrojected mother, became someone who was very different. Through the sadness of mourning, her limitations were acknowledged and disappointment and pain at her flawed state was experienced, leading to empathy and compassion for the vulnerable and wounded parent.

I think it was very important to...to break down that whole perception of like absolute strength because now I can accept her as a human being instead of this this uhm...this person I perceived as very, very, absolutely strong. I..I think that's changed how I react towards how, how she is sometimes as well.

In initially splitting the mother's image into the idealised and devalued object, Lerato may have dissociated from herself the devalued bad parent and protected the idealised one

(Fairbairn, 1952). She may have sacrificed her own image and assigned the label not good enough or bad to herself to rationalise parental failure. When this became conscious, the idealised view of the parent had to be surrendered and the search for the true self could begin. Opportunities for facing her own guilt emerged, but so did acknowledgement of the downfalls of the parent without the taking of responsibility for parental failure. The frozen image of the internalised mother was therefore relinquished for a more whole object who could serve as a transitional object in relation to others (Kavaler-Adler, 2007; Winnicott, 1971). Capacity for concern and compassion intensified as the renewed space allowed for individual mourning and new self-other connections. As Waska (2008) pointed out, guilt in the depressive position is connected to a sense of responsibility for destructiveness and is coupled with a desire for reparation to redeem the damaged object. Guilt in this sense can be a realisation of the potential to destroy and hence the fear of one's own self.

Oscillations between love and hate were present in all the participants to different extents with some having begun the process of moderating and integrating experiences. Lerato who had been so consumed by her hatred in adolescence was eventually coming to terms with her simultaneous internal states of good and bad and the possibility of extending this to others. Jane in her contemplation of need for revenge against her father had found the ability to forgive, in her own need for forgiveness. Interestingly, after giving birth to her daughter she was able to hold in mind her own capacity for love and destruction in her ambivalence towards being a parent as exemplified in her dream of seeing her infant daughter dropped in a bath full of water and needing to resuscitate her. Simultaneously this too made it possible for Jane to consider that the despite the destructiveness of her parents, they also loved her as she too, loved her own daughter despite her ambivalence towards motherhood.

After I had her they wheeled me back into the ward and we waited about two hours and then at about...it must have been at about 10 o'clock at night, my mom walked in and I said to her, (name of baby) is about 3 hours old, and I said to her I've just realised how much you love me because like I've just figured it out (clicked fingers, left hand rocking pram) I suppose that really (baby gurgled, Jane moved to attend to her daughter), transitioned things for me ..that... that my mom must have loved me, you know my mom actually, of course you know that in your head, but only until I had my own baby did I actually realise she must have...

Fluctuations between objects that are both loved and hated and internal and external (Young, 1994) were evident in all participants. As individuals they realised their own capacity for hate and how it may destroy. So too sadness emerged as did hope (Sheppard, 2009). The ability to deal with one's own destructiveness may entail first facing and dealing with the destructiveness of the parent and the individual may then make reparation not for their own aggression but for that of the parent. Sometimes this also involves the understanding that the parents' capacity to parent was compromised and was not what it should have been, as reflected on by both Jane and Leigh-Ann.

Jane: I think it was a bit of this is not how we wanted life to be, like they were young, they were fooling around, and they fell pregnant and they were almost prematurely accelerated into a state of life that they weren't ready for...

Leigh-Ann: Yes, on the days he [father] was there he wouldn't even pay any attention to us, we would always linger to my mother, he was always out working, late at night, which we never understood...

Lieberman et al. (2005) added that memories of feeling cared for and of being loved by both parents could also alleviate fear and anxiety mental states while providing an alternative model for the development of intimate relationships where safety and security were obtained. For the majority of participants, this was extremely important as parents were also remembered for their capacity to care and protect in their various imperfect attempts to do so.

(i) Remembering benevolence

...every advance in the process of mourning results in a deepening in the individual's relation to his inner objects, in the happiness of regaining them after they were felt to be lost in an increased trust in them and love for them because they proved to be good and helpful after all (Klein, 1937, p. 360).

The possibility that a traumatised and damaged parent also demonstrated a capacity for emotional connection or protection (Lieberman, 2005) as well as the awareness of accessible alternate attachment parental figures would perhaps go a long way towards explaining why some participants became securely attached despite domestic violence and were later able to integrate the good and bad parts of their parents.

Leigh-Ann (after her father's suicide): ...but I was really hurt, I remember sitting in my grandmother's dining room and thinking, yes he [father] hurt me by killing my mother but I didn't want him to die.

Hannah: ...I think both of my parents tried so hard to compensate for what was happening in their marriage, so my mom would go out of her way to try and protect me and do nice things for me, and I guess at that stage, to try and make me like her 'cos I preferred my aunt, and my dad used to buy a lot of stuff so he would buy things for me and I think I felt quite loved by both of them even though I didn't quite understand what was happening between them but both of them went out of their way to great lengths to try and make things ok.

Most of the participants recognised that despite their parents being very flawed and sometimes frightening, they also demonstrated redeeming qualities such as protecting their children from bullying at school or facilitating opportunities for them to pursue academic careers and other interests outside of the home. In these moments of realisation these parents became more real, capable of both generosity and malevolence, and an image was depicted of wounded human beings who themselves were engaged with inner embattled states of love and hate. Fairbairn (1952), Klein (1932) and Winnicott (1965) considered the capacity to integrate the good and bad aspects of a love object as antecedent to object

constancy and the derivative process of the capacity to love. Maltreated children who were securely attached may eventually have been able to simultaneously process the bad and good parts of their parents demonstrating the capacity for integration (Lieberman et al., 2005). Lieberman et al. (2005) suggest that having a realistic sense of the danger posed by the abusive parent, while holding on to the loving and redeeming aspects, might be an indicator of the traumatised person's capacity to recover from trauma. Simultaneous states of fear, hatred, love and longing for the parents, which all participants reported, created a tolerance for ambivalence and experiences of joy, intimacy and love were also worthy of attention as were negative experiences in promoting a move towards psychological healing.

Simultaneously memories of early nurturance and benign caregiving may elicit feelings of loss, grief and of missed opportunities which can be experienced as painful and sad (Lieberman, et al., 2005). Yet the ability to retain loving memories is referred to by Lieberman et al. (2005) as essential in the recovery from trauma and in the movement towards psychological health, extending the possibility of the intergenerational transmission of forgiveness and compassion for participants, instead of the transmission of only damaged objects. Remembering and integrating their early experiences of joy, safety and of being loved may have encouraged and facilitated the development of self worth and emotional investment in further development. Such experiences may have tended to reduce splitting and fostered the integration and tolerance for ambivalence towards parents and their relationships with them.

The recovery and re-experiencing of loving early memories is said to be fundamental to this process (Lieberman et al, 2005). Finding redeeming memories of moments that entailed sensory experiences of protectiveness, warmth and love were reflected on by various participants one of which was Jane's memories of the effort her mother would make to make their birthday parties joyful as well as shared moments of affection:

uhm...so we always had absolutely everything that we'd need and my mom used to have these tickle fights with us which was...we used to ask her mom please tickle me, please tickle me, and then she used to tickle me to the point I used to lose my voice, I used to laugh so much...which we used to love as kids, we used to ask her to do it every weekend.

Her father too was remembered not just a violent, dangerous man but as someone who could be counted on to provide instrumental assistance in moments of distress and who could discuss politics with his daughter. In remembering benevolence, hope may have been activated allowing for re-connecting with the good object (Lemma, 2004). During times of emotional distress this good object may have allowed for reflective processes which make the experience tolerable, engendering a belief that difficulties may be overcome:

I suppose it's that..I suppose an issue of grace really, because my parents have been through the most horrendous things together like there's been all sorts of infidelity and uh that's that things can get really bad but never that bad that it's kind of hopeless, like there's always the opportunity to repair, there's always, which I suppose is a nice

ending to things because you know now the relationships are really good despite what has gone on there's hope who knows what could happen but it's ja.

What may be the case for participants in this study is that despite their traumatic childhoods they may also demonstrate the ability to shield their children from a repetition of the past and to empathise with their children's vulnerability. In identifying with the protector, (Lieberman et al., 2005) acknowledged memories of painful affect may lead to the participants being more attuned to their own child's sadness and may motivate them to make changes in their own life but also to access memories of being cared for and protected by alternate attachment figures. These experiences perhaps 'alleviated terror, offered hope and provided an alternative model of intimate relationships as a source of comfort and security' (Lieberman et al., 2005, p. 511).

Not only the participants' future parenting but also their adult attachments are potentially affected by this. Wampler, et al., (2003) report that the way an individual processes and talks about their past experiences, also has implications for couple relationships. They comment on how seven studies which explore adult attachment styles and couple relationships observed more positive behaviours in securely classified individuals' interactions with their partners and less negative behaviours than experienced in interactions with insecurely classified individuals. In communications, securely attached persons provided more clarity, were less rejecting and were more supportive listeners. The key factor, they reasoned was not the content of childhood experiences, but how the person thought about and talked about these experiences. Hope for the future of participants' relationships was therefore engendered through their ability to reflect realistically on their experiences of trauma and benevolence as a mixed experience in childhood without denial of effects upon themselves and their current attachments.

Security of attachment, however, is not necessarily synonymous with healthy or secure relationships but there is evidence that the attachment style in one partner may act as a buffer in the impact of attachment style of the other (Wei et al, 2003).

(ii) The capacity for concern and maturity

Winnicott (1963a) wrote about guilt and its links to anxiety and ambivalence which as experiences in themselves, allowed the integration of the good object along with the idea of the destruction of it. This is reminiscent of the depressive position and the individual's ability to face their own capacity for destructiveness towards a loved object that could be simultaneously loved and hated (Klein, 1932; 1937).

The capacity for concern is thus linked to further integration in the individual and relates to a sense of responsibility being attained especially regarding close relationships which includes responsibility for one's own extreme feelings, especially hatred (Young, 1994; Winnicott, 1963a). Most of the participants demonstrated an acute awareness of their own capacity for destructiveness and concern for its effects upon others, especially siblings who

had in the past been aggressed against. As individuals they cared, felt and accepted responsibility and this emerged after the experience of accepting destructiveness within an environment that had not necessarily been good enough but that could have intensified such destructiveness. The need for reparation was evident in desires to maintain connectedness between siblings in the family and in their value for different types of attachment relationships.

Klein (1937) wrote about the existence of concern within the child for the loved object which was not merely connected to dependence but to a tendency to 'make right' and help loved ones despite destructiveness. This sense of responsibility is unveiled in genuine sympathy, the capacity to mentalise and thus to understand significant others and what they may feel (Fonagy, 2008; Klein, 1937). Interwoven with this, lies the capacity to identify with another person, to put their feelings and desires first, for a time, and instead of anxiety, the possibility for generosity emerges as opposed to a consuming concern for the self. This was evident in Lerato's empathy for both her mother and brother and their problematic relationship and in her desire that they would reach resolution and be able to remain connected. In fact, all the participants demonstrated care and consideration towards their siblings and some of these relationships had improved over the years and developed into close and deep connections.

Maturity, according to Winnicott (1963b), implies not only personal growth but also socialisation in that the individual became able to identify with society without sacrificing personal spontaneity and became able to attend to personal needs while taking responsibility for the maintenance of society as well. This proved to be a challenge for participants who appeared to experience difficulty in balancing care for others with caring for themselves. It is possible that for these participants who developed compulsive caregiving selves, the ability to be vulnerable and accept caring from significant others may be challenges that they need to negotiate throughout their adulthood. Both Winnicott (1963b) and Fairbairn (1952) maintained that independence was not absolute nor existed in isolation but came to be related to the environment so that there was an emergence of interdependency, a process which they were still working through.

Klein (1937) spoke about the child's ability to detach the self sufficiently from emotional connections at home and to make friends with school mates as a positive development for the individual. She maintained that new friendships proved to the child that she could love and be loved and that goodness existed and that repair could be made when harm was done to others in reality and in fantasy. Tendencies to make reparation emerged, at this stage and the sense of guilt was reduced and self-trust increased. This was evidenced in most of the participants where trust in female friends also increased but not necessarily in the opposite sex as it later emerged for them. In being able to establish connections with other girls, the suggestion is made that participants may have dealt more successfully with

their hatred towards the maternal object and that the injury was repaired in their identification with other women.

Supportive peer relationships have been linked with quality of attachment in adolescence and interestingly to better emotional regulation of anxiety (Allen & Miga, 2010). This was not supported in this case where it appears that despite early experiences of extreme anxiety and possible childhood insecure attachment states of mind, all of the participants were able to establish attachment connections with peers that remained a support to them to the present. The majority also exhibited moderate coherence in talking about their attachment related experiences and emotions. It is therefore significant that security in attachments is not only linked to positive models of self or relationship with parents but also includes the capacity for internal organisation of emotion and thought around attachment experiences with others (Allen & Miga, 2010). Possibly, the capacity to think about their own and others' states of mind may have been facilitated by interaction experiences with peers that were positive and supportive.

Klein (1937) suggested that motherhood too, affords the individual the opportunity to experience fantasies of doing for her child what she would have liked to have received from her own mother and in this way she can make 'good the injuries done'. In this way Jane, in particular may have compensated for the disappointments she experienced in connection with her own mother while deriving fulfilment from being an available, safe and responsible mother to her own daughter. In her ability to attain a maternal personality she saw and perceived her own daughter's helplessness and this evoked the desire to make reparation. Klein (1937) spoke about the mother being able to put herself in the child's place and to do so with love and sympathy which was connected to feelings of guilt and the need to make reparation. This was evident in Jane's dialogue about her daughter and in her desire to make things as 'good enough of an experience as possible' for her little girl. All the other participants, despite not being yet mothers, conveyed similar affect when discussing the possibility of raising their own children in the future.

The empathic parent has access to memories of painful early emotions which makes her attuned to her child's own emotional world and motivates her to make childhood as pleasant as possible for her daughter.

Emotional regulation as an indicator of maturity was also identified by Antonovsky (1987) as:

...the legitimacy of emotional expression tempered by the prohibition of physical aggression (p. 104).

Winnicott (1963b) perceived maturation as a journey as the individual interacted with a complex world and was gradually able to perceive what lies within the self. For him, local society became a sample of the self's personal world as well as a sample of external reality. The individual became able to live a personal existence that was satisfactory while

remaining involved in society's affairs. This was something that was echoed by Antonovsky's (1987) views of the individual's integration into community. Winnicott (1963) also maintained that adults seldom reach full maturity but the ability to work and be married was indicative of a compromise between copying the parents and at the same time establishing their own identity, the adult life has started and so has the journey towards independence. Despite early experiences of domestic violence these participants all appeared to be at different stages of maturity in their attempts to deal with internal struggles of love and hate. Despite the constant interaction of love and hate, feelings of love could develop and become strengthened and stabilised (Klein, 1937). In the depressive position love surmounts hate and promotes reparation, integration and eventually whole object relations (Young, 1994) and is a process that these young women were developing through and negotiating in their lives.

9.7 Summary: A bridge over troubled waters

At the beginning of this chapter, focus was placed on disturbed early object relations and attachment followed by an overview of adaptive responses by participants to their negative childhood environments.

The effects of exposure were discussed, revealing that internal representations of self were varied, revealing a mix of self reliance, dependability but also of caution, anxiety and awareness of some kind of damage. Representations of others as vulnerable and needy or as untrustworthy and unreliable also prevailed, epitomising some of the participants' own challenges with trust, intimacy and integration of internalised images. Despite this there was also a need for reparation, forgiveness and mending of self and relationships.

Antonovsky (1979, 1987) spoke about the river of life being fraught with times of tempest and the individual's ability to swim being related to a strong SOC. In a related but somewhat differing approach it is proposed here that combined adaptive responses to early trauma really serve as 'a bridge over troubled waters' where the journey may be undertaken with contemplation of the waters below but also with a semblance of safe passage to the other side, protecting the self from overwhelming anxiety and fragmentation. There may have been times where the individuals landed up in the water and experienced breakages in relationships, depression and even suicidal thoughts in adolescence, but at the same time opportunities were also made for reaching the bridge and climbing to safety. Being on this bridge perhaps entails facing the reality that trauma did take place, that residues of such may tend to cling as participants continue on their journey and yet the individual learned to swim despite the current. These residues were found to be manifested in attempts to deal with rage, hatred and a fear of intimacy while engaging in mourning the loss that inevitably accompanies trauma of any kind. There is no evidence here to suggest that any participants have remained unscathed, on the contrary, serious challenges were faced by these young women, but not all was lost and damage was not so insurmountable as to defeat the individual's capacity to love, to remember benevolence and to wish and to strive for something different and better. Love endured.

The quality of early caregiving and the availability of alternate attachment figures, when parents are unavailable, stood out as important factors in how participants coped with trauma. This research study therefore, holds implications for the treatment of individuals as well as for community interventions geared at supporting women and their children within a South African context, where domestic violence is prevalent. It points towards avenues for further research which can be tested later such as the prevalence and effects of role reversal amongst families characterised by domestic violence, for example. Another critical area to be considered within the South African domain would be the need for exploration on how interventions need to be geared at increasing the capacity of the caregiving system to support and sustain normal developmental tasks in children (Kinniburgh & Blaustein, 2005) exposed to domestic violence.

Consequently, implications for parent education and the training of professionals in this regard are also highlighted by this study and may serve to adapt ideas on early intervention to the reality of clients and their experiences making treatment and training more relevant to the context of family relationships. Working with traumatised children, for instance, brings certain complications to intervention which at times may be more geared towards identifying pathology and 'treating' certain behavioural components. In many cases it may actually be the quality of the attachment between the child and their caregiver that requires attention. Educational programmes for parents, within communities in South Africa, also perhaps become a preventative measure to the perpetuation of traumatic attachment states of mind into adulthood. All of these factors will be outlined in the next chapter as concluding thoughts are reviewed.

CHAPTER 10

CONCLUSION

This investigation into the lived experience of university female students, who have experienced domestic violence in childhood, has highlighted important factors with regards to the effects of this type of trauma as well as the strategies used by participants to survive parental violence and remain connected to caregivers. It therefore is of particular significance to the field of domestic violence and adds to the current body of knowledge in various ways.

10.1 Central findings

Effects of exposure to domestic violence in childhood

Domestic violence was found likely to sabotage loving states of mind in participants as children. The presence of role reversal, strong separation anxiety and annihilatory fears in childhood intersected with difficulties to separate and with simultaneous fears of intimacy. Yet through access to alternative attachments in childhood and adulthood, the presence of available and sensitive parenting from either mother or father or both at times, faith and therapy, love survived and security of attachment, in most cases, emerged. Compliance and caregiving roles in relationships were also prominent in the narratives of participants.

Resilient adaptation

As children, participants reacted to the domestic violence by developing a wide range of defensive mechanisms such as mental escapes, suppression of traumatic memories and humour. In their adaptation to a traumatic environment, participants were able to remain connected to parents while avoiding hostility and rejection, revealing innate resilience as children and flexibility as adults, most of whom could coherently discuss their experiences.

Intrapsychic world

Internal representations of others as unpredictable and untrustworthy were found to prevail for participants to some extent and were evident in lowered SOC scores when compared to the general population scores. This was particularly the case for those who had been directly involved in the violence between parents. Threats to body integrity experienced by them as children may have intensified traumatic reactions and sabotaged the development of a stronger SOC. The varying duration and intensity of exposure to domestic violence may have differing effects upon the development of coherence with regards to attachment and to SOC. Participants who had made direct attempts to intervene between parents seemed to be more traumatised and presented with a lower SOC score.

This is a tentative suggestion given the small sample in this study, however it may justify further research in this area.

Meaning generation

Love and reparation were made possible through identification with alternative attachment figures in the lives of participants as well as through memories of benevolence demonstrated by parents at times. God featured as a sought after father substitute, facilitating the process of forgiveness. When parents could be open and disclosed their own traumatic backgrounds, participants were able to extend compassion and derived understanding for the behaviour of parents which was frequently violent and insensitive.

10.2 Significance of the study

Addressing gaps in current research

Current research on domestic violence is plentiful but very narrow in its outlook in certain respects. Studies conducted thus far on the topic seem to present with some tunnel vision and invariably focus on the negative effects of exposure to domestic violence in childhood remaining well into adulthood, potentially impacting intra-psychic and interpersonal functioning (Shaver et al., 2009; Van Den Bosse & McGinn, 2009). The majority of the research on this issue also appears to be international in nature, with sparse focus on South Africa, and tends to be based on quantitative methodologies which produce statistical generalisations. These are undoubtedly useful but fail to provide the research community and professionals in the field with in-depth understanding of the world of young adults who live through environments of domestic abuse as children. This study attempts to bridge these gaps in the research on domestic violence by:

1. Broadening the focus and incorporating possible beneficial aspects of healing and learning which individuals who have survived such environments may have attained from processing their experiences. The most relevant issues in emerging adulthood involve individuals' capacity for processing experiences with parents in childhood and adolescence with the outcome of these experiences in adulthood (Schwartz & Finley, 2010). This process supports the emerging adult in his/her preparation for full independence and for the critical tasks of adulthood such as tertiary education, financial autonomy, committed relationships and eventually parenthood. All of these being important tasks facing the young adult who has embarked on tertiary studies. Yet, the focus of the available research appears predominantly to centre around the potential development of serious, life impacting psychopathology in children and adolescents exposed to environments of violence in childhood (Bryant & Spencer, 2003; Devaney, 2009; Imhonde, Aluede & Oboite, 2009; Kernsmith, 2006). This research study challenges this notion and approaches the investigation of the

- internal world of such adults from a more balanced perspective considering issues of survival and resilience without ignoring psychopathology or maladjustment.
- 2. This research was conducted within a South African context with participants who were born and raised in this country. The contextual relevance of the stories told is therefore authentic and informative for further research in the field in this society.
- 3. Rather than focusing purely on data of exposure to domestic violence, this study has sought to understand participants' experiences and the meaning they have assigned to such experiences of trauma as well as how these may have impacted their self representations and quality of attachments to others.
- 4. Through the integration of the three theories of Object Relations, Attachment theory and Salutogenesis, an exploration of coherence, after exposure to domestic violence, from psychoanalytic and salutogenic perspectives was made possible. To the researcher's knowledge this has not been attempted before and is especially relevant to a study which is focused on a South African context where domestic violence is prevalent. The concept of coherence as measured by the AAI and its connection to security of attachment did not necessarily correlate with a high SOC. What this indicates is that participants' self evaluations/perceptions were not always congruent with their demonstrated capacities to convey mentalisation and attachment related coherence. The idea that trauma may diminish these self evaluations and positive outlook on life remains and this may be closely connected to the fact that cumulative trauma has been found to affect individual's core beliefs of the world as a benevolent, predictable and ordered space (comprehensibility). The internalised representation of self in relation to others therefore, seems to have been distorted by early experiences of a world that was experienced as dangerous and chaotic. Despite this, the capacity for reflective functioning was present in most of the participants, evident in their coherent narratives.

10.3 Implications of the study and areas for further research

The link between domestic violence and disrupted caregiving is well established (Kinniburgh & Blaustein, 2005; Levendosky et al., 2012). The quality of the attachment relationship and of caregiving received in childhood stood out as a critical factor in the development of participants in this study. Access to an adult who was reliable, consistent and available may have prevented utter dysregulation in the participants as children during and after times of exposure to episodes of domestic violence between parents, and their resilience may, in part, have been possible by virtue of the containment that one good relationship provided (Fonagy, 1999b). This highlights the importance of infant observation as programmes of attachment intervention for parents in South Africa who are or may have been involved in violent relationships. Focusing on child development in later years is helpful and necessary but it is the foundational attachment between mother and child in the first years of life that may very well provide the child with a capacity for resilience, a SOC and with the internal representations to regulate affect and overcome exposure to adversity. This is especially

relevant for governmental programmes in South Africa and for NGOs who focus on early childhood development and prevention and intervention practices.

The development of a SOC in an individual may be sabotaged by experiences of cumulative trauma in childhood, not in the sense that it is diminished, but in the sense that domestic violence may prevent the SOC from developing optimally in the child in the first place. When parents were violent they were likely to struggle in creating environments of safety and exploration which would have facilitated the development of a higher SOC in their children. In this study, the family violence was also perhaps experienced as a deterrent to the development of trust and expectations of predictability, making the development of comprehensibility difficult in participants. When the family of origin was violent and unpredictable, the children may have transferred this to their expectations of others in general. This may have been primarily due to experiences that were enduringly traumatic and which were internalised, hindering life satisfaction in the long run. This is an important area for further research with traumatised South Africans, particularly those exposed to attachment trauma and for investigation into the kinds of experiences that may strengthen the SOC.

Relationships with parents

Domestic violence experienced in childhood appears to have escalated the use of primitive defences of splitting and projective identification by participants. Internal representations of fathers in particular as objects of both love and wrath were particularly evident and such split images were difficult to reconcile and integrate. Further research on children's experiences of their fathers as parents in environments of domestic violence is needed to shed light on the treatment of children and adults affected by domestic violence.

The internalised images of mothers were seemingly more integrated and relationships were better resolved in adulthood. Fathers remained more unreachable and emotionally distant to their daughters in adulthood. Preoccupation with mothers and their caregiving was very prominent for participants. This may also be related to the mother being the primary object of identification for these young women as children. It would be interesting to investigate whether this would also be the case for young male students exposed to domestic violence or whether the role of the father, as a primary object of identification for the male child, would also feature strongly.

Direct interference (coming between parents, incurring physical damage during the violence, trying to protect the mother) by children in the domestic violence between parents appears to have intensified the trauma experienced by participants and to have increased the intensity of negative emotions experienced such as rage, anger, anxiety and fear. Participants who engaged in this direct interference also appear to have experienced greater intensity of role reversing experiences with maternal figures, in particular, and this appears to be connected to greater difficulties of separation-individuation experienced in

adulthood. Parent education on role reversal and appropriate awareness of child developmental milestones may be vital for mothers of all cultures who have experienced domestic violence and is especially useful for women's shelters to implement in cases where this is missing. Focusing on alternative avenues of parental support is also vital, especially when access to therapy for the parent, is limited. The issue may not be the level of disclosure between parent and child but rather how the parent chooses to talk about the domestic violence and the level of coherence demonstrated by the parent in doing so.

It interesting to note that relationships with mothers improved when, as adults, participants had been able to attain some physical distance from the marital dyad by either moving out of the home or through the separation and subsequent divorce of parents. The fact that exposure to domestic violence ended in one way or another, seems to have provided most of the participants with the emotional space to begin processing their traumatic experiences and their relationships with their parents. This suggests that individuals may naturally engage in healing processes once the exposure to violence is terminated, highlighting the importance of intervention in families that are violent. Although the separation of parents and subsequent family disruption may always be painful for children, staying together for parents who are engaged in domestic violence, may not always be best for their children in the long run.

Caregiving tendencies and 'parentification' in childhood also seem to have created difficulties for participants in intimate relationships in adulthood. These young women may have felt safer providing caregiving to others instead of receiving it reciprocally as this may have protected them from disappointment and vulnerability in attachments. The capacity to trust in others was the most disturbed element in participants' lives which suggests that this may be a rather lasting effect of exposure to domestic violence in childhood. These are important areas of therapeutic work for therapists working with clients who have experienced domestic violence in childhood. Another aspect of this work may be addressing unprocessed traumatic sequelae that have remained encapsulated in memory rather than worked through as well as addressing and exploring anger and the fear of conflict that may remain.

Adaptive responses

While the negative effects of domestic violence exposure are undeniable, the resilience demonstrated by participants as children and even in adulthood remains considerable and is an area of strength that may be tapped into in therapy with such clients.

Participants used their minds through fantasy and academic work to mentally escape fear and trauma. Their tendencies to rescue siblings, parents and friends also demonstrated an early emergent capacity for concern and empathy. Due to their awareness of their pain, they developed sensitivity to that of others.

Alternative attachments and connections with others such as replacement parental figures, friends and supportive significant others were searched for, even into adulthood with a deep valuing of attachment, search for safety and something different from their experiences of their parents marital dyad. These alternative relationships often facilitated the internalisation of self-soothing representations that ameliorated the effects of trauma and the developmental disruption experienced. This highlights the importance of attachment figures that are available in childhood and emphasises the need for supporting the caregiving system of children at risk.

Most of the participants were self-reliant and independent young women who were capable of self-reflection and who did not deny the after effects of their exposure to domestic violence, the damage to their internal representational frameworks and their struggles with relationships as a result.

Coherence of attachment states of mind had been attained by most through new experiences such as therapy and supportive relationships which had initiated the reviewing and revising of internal working models.

Participants were able to hold onto benevolent experiences with their parents and to retain relationships with them despite experiences of trauma and areas of dissatisfaction in these relationships. This may have facilitated the process of mourning and their movement towards the depressive position which most had engaged with. Most of the parents had also made significant changes to their environments and consequent availability to their children, suggesting that they valued their relationships with their daughters and were attempting to make reparation.

Cultural and gender factors did not predominate the narratives of participants and gender stereotypes were mentioned by only two participants, by Hannah within the contexts of religion and by Lerato due to expectations for her behaviour that she experienced from her mother's parenting style.

10.4 Limitations of the study

Despite the study being open to members of both genders, no male students volunteered to participate in this study. This could be due to a variety of reasons but is perhaps somewhat linked to the fact that a patriarchal society may make it easier for females to acknowldge and talk about their exposure to trauma and their victimisation rather than males, who are expected to be 'strong' and non emotional. This was unfortunate in that potential gender differences in exposure to domestic violence and resilience could not be explored or commented on. The participants in this research study were all female students of the helping professions (Psychology) who had successfully completed several years of tertiary study demonstrating considerable intellectual capacity. Due to being at university, they may also have had easier access to information and other resources fostering introspection and

better understanding of the dynamics of domestic violence as well as a willingness to explore affective states related to the topic. Only Psychology students volunteered for this study and consequently exposure and resilience responses in students from other areas of study (Social Work, Hearing and Speech Therapy) were not explored in the research. Different results may also have been obtained with participants who were enrolled for different subjects of study such as Science and Engineering for instance. It is possible that the theme of caregiving as a response to domestic violence would have been less pronounced in these student populations. This is a limitation in this study. Different results would also have been likely in participants from populations without university admission which were not included in this research Such young adults may not have had as many opportunities for developing resilience and may have demonstrated more problematic attachment styles as well as difficulty in establishing supportive relationships. Therefore this is a limitation in the potential for generalisability of results.

The number of participants in this study is limited in the sense that this makes generalisability difficult, however, this was not the primary aim of the study. All the participants were also volunteers which suggests both a limitation and a strength of the study. The willingness to volunteer is suggestive of participants' ability to discuss their trauma and to process their experiences in coherent ways or to be in the process of doing so. This inevitably skews the data acquired as the type of students interviewed would therefore already present with some form of resilience. However, this being a study that focuses on resilience of domestic violence survivors, the interviewing of such students was a clear advantage for the research study and part of the process of purposive sampling. This did, however, limit the study's ability to explore higher levels of avoidance as a form of defence in this particular population.

This study was also comprised of participants from moderate to high socio-economic backgrounds, inevitably suggesting that they had access to various resources in their environment that would have fostered their resilience. Candidates from lower socio-economic backgrounds would not necessarily have had access to resources such as therapy and the financial independence to reside separately from parents in early adulthood, for instance.

10.5 Final thoughts

Exposure to the domestic violence of parents is a deeply painful experience for children and aspects of this type of attachment trauma are inevitably internalised and carried into adulthood. However, such experiences do not have to remain perpetually debilitating, and hateful states of mind that sabotage love, kindness and hope can be acknowledged and conquered. Exposure to domestic violence is only one part of the story of individuals like the participants in this research study and there are multiple facets and alternate endings to these stories which are shaped by a variety of experiences and encounters with others.

Developmental trajectories of traumatised children are therefore not necessarily clear-cut or predictable, necessitating careful and considerate attempts of investigation of factors that ameliorate or exacerbate long term responses to early, cumulative trauma.

REFERENCE LIST

- Abrahams, N. & Jewkes, R. (2005). Effects of South African men having witnessed abuse of their mothers during childhood, on their levels of violence in adulthood. *American Journal of Public Health 95*(10), 1811-1816.
- Abrahams, N., Jewkes, R., Martin, L.J., Mathews, S., Vetten, L. & Lombard, C. (2009).

 Mortality of women from intimate partner violence in South Africa: A national epidemiological; study. *Violence and Victims*, 24, 5446-5556.
- Adam E.K., Gunnar M.R. & Tanaka A. (2004, Jan./Feb.). Adult attachment, parent emotion and observed parenting behaviour: Mediator and moderator models. *Child Development*, 75(1), 110-122.
- Allen, J.P., Moore, C., Kupermic, G. & Bell, K. (1998). Attachment and adolescent psychosocial functioning. *Child Development*, *69*(5), 1406-1419.
- Allen, J. P. & Miga, E.M. (2010). Attachment in adolescence: A move to the level of emotion regulation. *Journal of Social and Personal Relationships*, *27*(2), 181-190.
- Alliance for Rural Democracy. (2012). ARD slams Department of Justice's new proposals on the Traditional Courts Bill. Retrieved from http://www.nhopulse.org/press-release/alliance-rural-democracy-slams-department-justice-s-new-proposals-traditional-courts-b
- Almedom, A.M. (2005). Resilience, hardiness, sense of coherence and post traumatic growth: All paths leading to "Light at the end of the tunnel"? *Journal of Loss and Trauma*, 10, 253-265.
- Alexander, P.C., Moore, S. & Alexander III, E.R. (Aug. 1991). What is transmitted in the intergenerational transmission of violence. *Journal of Marriage and the Family*, *53*, 657-668.
- Ainsworth, M.D.S. (1969). Object Relations and Attachment: A theoretical review of the infant-mother relationship. *Child Development*, *40*, 969-1025.
- Ainsworth, M.D.S. (1985 Nov) Patterns of infant-mother attachments: antecedents and effects on development. *Journal of Urban Health Bulletin of the NY academy of Medicine*, 61(9), 771-791.
- Ainsworth, M.D.S. (1991). Attachments and other affectional bonds across the life cycle, in

- Parkes, C.M., Stevenson-Hinde, J. & Marris, P. (Eds.) *Attachment across the Life Cycle* (pp33-51). London: Routledge.
- Anderson, K.M. (2010). *Enhancing resilience in survivors of family violence*. NY: Springer publishing company.
- Anderson, K. M. & Danis, F.S. (2006) Adult daughters of battered women: Resistance and resilience in the face of danger. *Affilia*, *21*(4), 419-432.
- Antonovsky, A. (1972). Breakdown: A needed fourth step in the conceptual armamentarium of modern medicine. *Social Science and Medicine*, *6*, 537-544.
- Antonovsky, A. (1979). *Health, Stress and Coping*. San Francisco, US: Jossey-Bass.
- Antonovsky, A. (1987). *Unraveling the mystery of health. How people manage stress and stay well*. San Francisco, US: Jossey-Bass.
- Antonovsky, A. & Sourani, T. (1988 Feb.) Family sense of coherence and family adaptation. Journal of Marriage and Family, 50 (1), 79-92.
- Antonovsky, A. (1990). Studying health vs studying disease. Lecture at the Congress for Clinical psychotherapy, February, Berlin, Germany. Retrieved from http://www.ensp.unl.pt/.../soc_AAconference_berlim_91-1.pdf
- Antonovsly, A. (1991). The structural sources of salutogenic strengths. In C.L. Cooper and R. Payne (Eds.) *Personality and stress: Individual differences in the stress process* (pp 67-104). New York: John Wiley & Sons.
- Antonovsky, A. (1993). The structure and properties of the sense of coherence scale. *Social Science & Medicine*, *36*(6), 725-733.
- Antonovsky, A. (1996). The Salutogenic model as a theory to guide health promotion. *Health Promotion International, 11*(1), 11-18.
- Antonovsky, A. (1998a). The sense of coherence: An historical and future perspective. In McCubbin, H.I., Thompson, E.A., Thompson, A.I. & Fromer, J.E. (Eds.). *Stress, coping and health in families: Sense of coherence and resiliency,* (pp 3-20). California, US: Thousand Oaks, Sage.
- Antonovsky, A. (1998b). The Structure and Properties of the SOC scale. In McCubbin, H.I.;

 Thompson, E.A.; Thompson, A.I. & Fromer, J.E. (Eds.) *Stress, coping and health in families: Sense of coherence and resiliency*, (pp 21-40). California, US: Thousand Oaks, Sage.
- Årseth, A.K., Kroger, J. & Martinussen, M. (2009). Intimacy status, attachment, separation-

- individuation patterns, and identity status in female university students. *Journal of Social and Personal Relationships*, *26*(5), 697-712.
- Babbie, E. & Mouton, J. (2009) *The Practice of Social Research* (The South African edition), South Africa: Oxford University Press, Southern Africa (PTY) LTD.
- Bakermans-Kranenburg, M. & van Ijzendoorn, M. (1993). A psychometric study of the Adult Attachment Interview: Reliability and discriminant validity. *Developmental Psychology*, *29*, 870-879.
- Bakermans-Kranenburg, M. & van Ijzendoorn, M. (2009 May). The first 10,000 Adult

 Attachment Interviews: distributions of adult attachment representations in clinical and non-clinical groups. *Attachment and Human Development*, 11(3), 223-263.
- Baker, J.E. (2001). Mourning and the transformation of object relationships, evidence for the persistence of internal attachments. *Psychoanalytic Psychology*, *18*(1), 55-73.
- Baker, L.M. (1998). Sense of Coherence in adolescents with cystic fibrosis. In McCubbin, H.I.,

 Thompson, E.A., Thompson, A. I. & Fromer, J. E. (Eds.) *Stress, Coping and Health in families: Sense of Coherence and resiliency* (Resiliency in family series), (pp 145-168).

 UK: Sage Publications.
- Bancroft, R. L. (1998) Understanding the batterer in custody and visitation disputes.

 Retrieved from http://www.thelizlibrary.org/liz/understanding-the-batterer-in-visitation-and-custody-disputes-pdf
- Bancroft, R. L. (2002). The parenting of men who batter. Court Review, 36(2), 44-49.
- Barnard, D.K. (2011) South Africa: Domestic Violence statistics- SAPS lack data to protect victims of abuse. DA spokesperson on police, 7 December 2011. Retrieved from http://www.da.org.za/archive/domestic-violence-statistics-saps-lacks-data-to-protect-victims-of-abuse/
- Bartholomew, K. & Horowitz, L. (1991) Attachment styles among young adults: A test of a four category model. *Journal of Personality and Social Psychology*, *61*(2), 226-244.
- Baxter, P. & Jack, S. (2008). Qualitative case study methodology: study design and implementation for novice researchers. *The qualitative report*, *13*(4), 544-559.
- Berlin L.J., Cassidy J. & Appleyard K. (2008). The influence of early attachments on other relationships. In J. Cassidy & P. Shaver (Eds.) *Handbook of attachment: Theory, research and clinical applications* (pp 333-347). New York: Guildford Press.
- Berghaus, B.J. (2011), A new look at attachment theory and adult attachment behaviour.

- Behaviorology Today, 14(2), 3-10.
- Bergman, A. & Harpaz-Rotem, I. (2004) Revising Rapprochement in light of contemporary developmental theories. *Journal of American Psychoanalytical Association*, Spring, *52*(2), 555-570.
- Bernhardt, S. (2004). A critical literature review of marital violence and the women who witnessed it during their childhood years (Unpublished Master's dissertation). Rand Afrikaans University, Johannesburg, South Africa.
- Benoit, D. & Parker, K.C.H. (1994). Stability and transmission of attachment across three generations. *Child development*, *65*, 1444-1456.
- Billings, J. & Hashem, F. (2010). Salutogenesis and the promotion of positive mental health in older people. Paper presented at EU Thematic conference, April, Madrid, Spain.
- Black, D.S., Sussman, S. & Unger, J.B. (2010 June). A further look at the intergenerational transmission of violence: Witnessing interparental violence in emerging adulthood. *Journal of Interpersonal Violence*, 25(6), 1022-1042.
- Boag, S. (2006) Freudian Repression, the common view and pathological science. *Review of general psychology 10*(1), 74-86.
- Bondi, L. (2003). Empathy and identification: Conceptual resources for feminist fieldwork.

 ACME: An International E-Journal for Critical Geographies 2(1), 64-76.
- Boston, M. & Szur, R. (1990). *Psychotherapy with severely deprived children*. London, UK: Karnac Books.
- Bothmer, M.I.K.V & Fridlund, B. (2003) Self rated health among university students in relation to sense of coherence and other personality traits. *Scandinavian Journal of Caring Sciences*, *17*(4) 347-357
- Bradfield, B. (2011). Dissociation and restoration in trauma survivors and their children.

 Psychoanalytic psychotherapy in South Africa, 19(2), 66-102.
- Braucher, D. (2000) Projective Identification: A request for relationship. *Clinical Social work Journal*, *28*(1), 71-83.
- Bretherton, I. (1991) The roots and growing points of attachment theory, in Parkes, C.M., Stevenson-Hinde, J. & Marris, P. (Eds.) *Attachment across the Life Cycle*,(pp 9-32). London, UK: Routledge.
- Bretherton, I. (1992 Sept.) The origins of attachment theory: John Bowlby and Mary Ainsworth. *Developmental Psychology*, *28*(5), 759-775.

- Brewins, C.R. & Andrews, B. (2000 Dec.). Psychological defence mechanisms, the example of repression. *Psychologist*, *13*(12), 615-617.
- Borelli, J.L., Crowley, M. J., David, D.H., Sbarra, D.A., Anderson, G. M., & Mayes, L.C. (2010).

 Attachment and emotion in school-aged children. *Emotion*, *10*(4), 475-485.
- Borelli, J.L., David, D.H., Rifkin-Graboi, A., Sbarra, D.A., Mehl, M.R. & Mayes, L.C. (2012).

 Language use in the Adult Attachment Interview: Evidence for attachment-specific emotion regulation. *Personal Relationships*, 1-15.
- Bowins, B. (2004 March). Psychological defense mechanisms: A new perspective. The American Journal of Psychoanalysis, *64*(1), 1-24.
- Bowlby, J. (1969). *Attachment and loss Vol.1*. London, UK: Pimlico.
- Bowlby, J. (1973) *Attachment and Loss vol.2*, Separation, Anxiety and Anger. US Minnesota: Harper colophon Books, Basic books.
- Bowlby, J. (1988). *A secure base*.US, New York: Routledge.
- Bowlby J. (1998). Attachment and loss Vol. 3. London, UK: Pimlico.
- Browne, C. & Winkelman, C. (2007). The effect of childhood trauma on later psychological adjustment. *Journal of Interpersonal Violence*, *22*(6), 684-697.
- Bryant, S.A. & Spencer, G.A. (2003). University Students' attitudes about attributing blame in domestic violence. Journal of Family Violence, *18*(6), 369-376.
- Buchanan, F. (2008). *Mother and infant attachment theory and domestic violence: Crossing the divide*. The University of South Wales, Sydney: Australian Domestic & Family Violence Clearing House.
- Buchheim, A. & Kächele, H. (2003). Adult Attachment Interview and psychoanalytic perspective: A single case study. *Psychoanalytic Inquiry*, *23*, 81-101.
- Busch, A.L., Cowan, P. A. & Cowan, C.P. (2008). Unresolved loss in the Adult Attachment Interview: Implications for marital and parenting relationships. *Development and Psychopathology*, 20, 717-735.
- Busch, A.L. & Lieberman, A.F. (2007) Attachment and Trauma: an integrated approach to treating young children exposed to family violence, in Oppenheim D. & Goldsmith, D.F. (Eds.), Attachment Theory in clinical Work with children: Bridging the gap between research and practice (pp 139-171). New York: The Guildford Press.
- Calabrese, M.L., Farber, B.A., Westen, D. (2005). The relationship of adult attachment constructs to object relational patterns of representing self and others. *Journal of The*

- American Academy of Psychoanalysis and Dynamic Psychiatry, 33(3), 513-530.
- Campbell, J. & Pretorius, T.B. (2004). The health sustaining and stress-reducing roles of fortitude and the subjective experience of safety in adolescents' exposure to violence in lower socio-economic areas in South Africa. Retrieved from http://www.monash.ac.za/tyronepretorius/fortitude-and-violence-in-adolescents.pdf
- Carlson, B. E. (2000). Children exposed to intimate partner violence: Research findings and implications for intervention. *Trauma, Violence and Abuse, 1*(4), 321-340.
- Cartwright, D. (2004). The psychoanalytic research interview: preliminary suggestions. *Journal of the American Psychoanalytic Association*, *52*, 209-242.
- Cartwright, D. (2002). *Psychoanalysis, violence and rage-type murder: Murdering minds.* UK: Brunner-Routledge.
- Carpenter, G.L. & Stacks, A.M. (2009). Developmental effects of exposure to intimate partner violence in early childhood: A review of the literature. *Children and Youth Services Review*, *31*, 831-839.
- Celani, D.P. (1999). Applying Fairbairn's object relations to the dynamics of the battered woman. *American Journal of Psychotherapy*, 53(1), 60-73.
- Celani, D.P. (2010). Fairbairn's object relations theory in the clinical setting. New York: Colombia University Press.
- Chase, R., Mignone, J & Diffey, L. (2010). Life story board: A tool in the prevention of domestic violence. *A Journal of Aboriginal and Indigenous Community Health* 8(2), 145-154.
- Centre for the Study of Violence and Reconciliation (2009, April). Why does South Africa have such high rates of violent crime? Paper submitted to the Minister of Safety and Security, Johannesburg, 7 April 2009.
- Clarke, S. (2002). Learning from experience: Psycho-social research methods in the Social Sciences. *Qualitative research*, *2*(2), 173-194.
- Collins, W.A. & Sroufe, L.A. (1999). Capacity for intimate relationships: A developmental construction. In W. Furman, B.B. Brown & C. Feiring (Eds.) *The Development of Romantic Relationships in Adolescence*, (pp 125-147). New York: Cambridge University Press.
- Colombi, L. (2010). The dual aspect of fantasy: Flight from reality or imaginative realm?

- Considerations and hypotheses from clinical psychoanalysis. *The International Journal of Psychoanalysis*, *91*, 1073-1091.
- Curran, E. & Bonthuys, E. (2004) Customary Law and domestic violence in rural South
 African communities. Research report written for the Centre for the study of
 Violence and Reconciliation, October 2004. Retrieved from
 http://csvr.org.za/wits/papers/papclaw.htm
- Crabtree, H. (2009). Love turned angry: An exploration of domestic violence from an object relations perspective. University of Lancashire. Retrieved from http://www.uclan.ac.uk/information/services/ldu/research/exploration of domestic %20violence.php
- Cramer, P. (2000 June). Defense mechanisms in psychology today, further processes for adaptation. *American Psychologist*, *55*(6), 637-646.
- Crawford, A. & Benoit, D. (2009). Caregivers' disrupted representations of the unborn child predict later infant-caregiver disorganized attachment and disrupted interactions.

 Infant Mental Health Journal, 30 (2), 124-144.
- Crittenden, P.M. (1999). Danger and development: The organisation of self-protective strategies. *Society for Research in Child Development*, *64*(3), 145-171.
- Crittenden, P.M. & Dallos, R. (2009). All in the family: Integrating attachment and family systems theories. *Clinical Child Psychology and Psychiatry*, *14* (3), 389-409.
- Crowell, J.A. & Feldman, S.S. (1989). Assessment of mother's working models of relationships: Some clinical implications. *Infant Mental Health Journal*, *10*(3), 173-184.
- Crowell, J.A. & Treboux, D. (1995). A review of adult attachment measures: implications for theory and research. *Social Development*, *4*, 294-327.
- Crowell, J. A.; Waters, E.; Treboux, D.; O'Connor E.; Colon-Downs, C.; Feider, O.; Golby, B. & Posada, G. (1996). Discriminant validity of the Adult Attachment Interview. *Child Development*, *67*, 2584-2599.
- Davar, E. (2010). The interplay of edges. *Psychodynamic practice*, 16(4), 409-429.
- Davis, K., Taylor, B., Furniss, D. (2001). Narrative accounts of tracking the rural domestic violence survivors' journey: A Feminist approach. *Health Care for Women International*, 22, 333-347.
- Dhavhana-Maselesele, M., Myburgh, C.P.H. & Poggenpoel, M. (2009). Lived experiences of

- women victims of domestic violence in rural areas of Vhembe district: Limpopo Province, South Africa. *Gender and Behaviour*, 7(2), 2517-2540.
- De Haas, M.A., Bakermans-Kranenburg, M.J. & van Ijzendoorn, M.H. (1994). The adult attachment style, temperament and memories of parental behaviour. *The Journal of Genetic Psychology*, 155(4), 471-486.
- Demidenko, N., Tasca, G. A., Kennedy, N. & Bissada, H. (2010). The mediating role of self-concept in the relationship between attachment insecurity and identity differentiation among women with an eating disorder. *Journal of Social and Clinical Psychology*, *29* (10), 1131-1152.
- Denham, A.R. (2008). Rethinking historical trauma: Narratives of resilience. *Transcultural Psychiatry*, 45 (3), 391-414.
- Devaney, J. (2009). Children's exposure to domestic violence: Holding men to account. *The Political Quarterly, 80*(4), 569-574.
- Diamond, D. (2004). Attachment disorganization: The reunion of attachment theory and psychoanalysis. *Psychoanalytic psychology*, *21* (2), 276-299.
- Domestic Violence Act (1998) Act no 116, The Government Gazette. Retrieved from http://www.justice.gov.za/legislation/acts/1998-116-1.pdf
- Doumas, D. M., Pearson, C.L., Elgin, J.E. & Mckinley, L.L. (2008). Adult attachment as a risk factor for intimate partner violence: The mispairing of partners' attachment styles. *Journal of Interpersonal Violence*, 23(5), 616-634.
- Downey, T.W. (2001). Early object relations into new objects. *Psychoanalytical Study of Childhood*, *56*, 39-67.
- Dozier, M.; Stovall-McClough, K.C.; Albus, K.E. (2008). Attachment and psychopathology in adulthood. In J. Cassidy & P. Shaver (Eds.), *Handbook of attachment: Theory, research and clinical applications* (pp718-744). New York: Guildford Press.
- Dutton, D. G. & Painter, S. (1993). Emotional attachments in abusive relationships: A test of traumatic bonding theory. *Violence and Victims*, 8(2), 105-120.
- Dutton, D.G. (1994). Patriarchy and wife assault: The Ecological Fallacy. *Violence and Victims*, *9*(2), 167-182.
- Dutton, D.G. (1995). Intimate abusiveness. *Clinical Psychology: Science and Practice, 2*(3), 207-224.
- Dutton, D. G., van Ginkel, C. & Landolt, M.A. (1996). Jealousy, intimate abusiveness and

- intrusiveness. Journal of Family Psychology, 11(4), 411-423.
- Dutton, D.G. (1999). The traumatic origins of intimate rage. *Aggression and violent* behaviour, 4(4), 287-300.
- Eagle, G. & Long, C. (2011). In our culture, in our gender: Implications of the culture/gender interface for South African psychotherapists. *Feminism & Psychology*, *21* (3), 336-353.
- Ein-Dor T., Mikulincer, M., Doron, G. & Shaver, P.R. (2010). The attachment paradox: How can so many of us (the insecure ones) have no adaptive advantage? *Perspectives on Psychological Science*, *5*, 123-141.
- Esman A. H. (1990). Essential papers on transference. New York, US: University Press.
- Erdelyi, M. H. (2006) The unified theory of repression. *Behavioural and brain sciences*, *29*, 499-551.
- Erikson, E.H. (1968). *Identity: Youth and Crisis*. Oxford: Norton.
- Eriksson, M. (2009). Girls and boys as victims: Social workers' approaches to children exposed to violence. *Child Abuse Review*, *18*(6), 28-445.
- Fairbairn, W.R.D. (1952). Psychoanalytic studies of the personality. London: Routledge
- Farrell, E. (1995). *Lost for words: The psychoanalysis of Anorexia and Bulimia.* London: Process Press.
- Fedler, J. & Tanzer, Z. (2000) A world in denial: International perspectives on violence against women. In Park, Fedler & Dangor (Eds), *Reclaiming women's spaces*. (pp 17-46), SA: Nisaa Institute for women's development.
- Feeny, J.A. (2008). Adult romantic attachment. In J. Cassidy & P. Shaver (Eds.) *Handbook of attachment: Theory, research and clinical applications* (pp 456-475). New York: Guildford Press.
- Fishler, P.H., Sperling, M.B. & Carr, A.C. (1990). Assessment of adult relatedness: A review of empirical findings from object relations and attachment theories. *Journal of Personality Assessment*, *55*(3 & 4), 400-520.
- Fiorentino, L.M.& Pomazal, R.J. (1998). Sense of Coherence and the stress-illness relationship among employees: A Prospective study. In McCubbin, H.I.; Thompson, E.A.; Thompson, A.I. & Fromer, J.E. (Eds.) *Stress, coping and health in families: Sense of coherence and resiliency*, (pp 91-106). California: Thousand Oaks, Sage.
- Fosha, D. (2002). Trauma reveals the roots of resilience. Constructivism in the Human

- Sciences, 6(1,2), 7-15.
- Fonagy P., Steele, M., Steele, H., Leigh, T., Kennedy, R., Mattoon, G. & Target, M. (1995).

 Attachment, the reflective self and borderline states: The predictive specificity of the Adult Attachment Interview and pathological emotional development. In S. Goldberg, R. Muir & J. Kerr (Eds.) *Attachment Theory: Social, Developmental and Clinical perspectives*, (pp233-278). Hillsdale, NJ: The Analytic Press.
- Fonagy, P. & Target, M. (1997) Attachment and Reflective function: Their role in self-organisation. *Development and Psychopathology*, *9*, 679-700.
- Fonagy, P. (1999a). Male perpetrators of violence against women: An attachment theory perspective. *Journal of Applied Psychoanalytic Studies*, 1(1), 7-27.
- Fonagy, P. (1999b). Attachment, the development of the self and its pathology in personality disorders. In J. Derksen, C. Mafei & H. Groen (Eds.), *Treatment of personality disorders* (pp 53-68). New York: Plenum Press.
- Fonagy, P. (2001). Attachment theory and Psychoanalysis. New York: Guildford Press.
- Fonagy, P. (2003). Towards a developmental understanding of violence. *British Journal of Psychiatry*, *183*, 190-192.
- Fonagy, P. (2008). The mentalization-focused approach to social development. In F.N. Busch, (Ed.) *Mentalization*. Psychoanalytic Inquiry book series, vol.29, (pp 3-43). New York: The Analytic Press.
- Fonagy, P. & Bateman, A. (2008). Attachment, mentalization and borderline personality disorder. *European Psychotherapy*, 8 (1), 35-47.
- Fonagy, P.; Gergely, G. & Target, M. (2008). Psychoanalytic constructs and attachment theory and research. In J. Cassidy & P. Shaver (Eds.) *Handbook of attachment:*Theory, research and clinical applications (pp 783-810). New York: Guildford Press.
- Franklin, C. A. (2010) The Intergenerational transmission of intimate partner violence, Sam Houston State University Publication. Retrieved from http://www.crimevictimsinstitute.org/publications/?mode=view&item-21
- Freire, P.R. (2007). Object relations as a theoretical model in the work with low acculturated latino men who batter. *PRAXIS*, 7, 39-49.
- Freyd, J. (1998). *Betrayal Trauma: The logic of forgetting childhood abuse*. US: Harvard University Press.
- Fromm, E. (1973) The anatomy of human destructiveness. NY: Henry Holt.

- Frosh, S., Phoenix, A. & Pattman, R. (2003). Taking a stand: Using psychoanalysis to explore the positioning of subjects in discourse. *British journal of social psychology, 42, 39-53.*
- Garland, C. (2004). Traumatic events and their impact on symbolic functioning. In Levy, S. & Lemma, A. (Eds.) *The perversion of loss, psychoanalytic perspectives on trauma,* (pp.37-49). USA: Whurr publishers, LTD.
- Graham-Bermann, S. A. & Brescoll, V. (2000). Gender, power and violence: Assessing the family stereotypes of the children of batterers. *Journal of family psychology, 14*(4), 600-612.
- Gelles, R. J (1979) Family Violence. Beverly Hills, CA: Sage Publications.
- Gelles, R.J. & Cavanaugh, M. M. (2005). Violence, abuse and neglect in families and intimate relationships. In P.C. Mckenry and S.J. Price (Eds.) *Families and change: coping with stressful events and transitions* (3rd ed, pp 129-154). California: Sage.
- George, C., Kaplan, N. & Main, M. (1985, 1996). Adult Attachment Interview. Unpublished manuscript. University of California, Berkeley.
- Gerber, M.D. (2006 Sep/Oct) Attachment, psychoanalysis and resilience. Psychoanalytic Inquiry, *26*(4), 585-594.
- Gewirtz, A. & Edleson, J.L. (2004). Young children's exposure to adult domestic violence:

 Toward a developmental risk and resilience framework for research and intervention. Paper 6 of series: Early childhood, domestic violence and poverty:

 Helping young children and their families. University of IOWA. Retrieved from http://www.nccev.org/pdfs/series-paper6.pdf
- Giles-Sims, J. (1983) Wife-Beating: A Systems Theory Approach. New York: Guildford.
- GranQvist, P. & Kirkpatrick, L.A. (2008). Attachment and religious representations and behaviour. In J. Cassidy & P. Shaver (Eds.) *Handbook of attachment: Theory, research and clinical applications* (p 906-933). New York: Guildford Press.
- Grice, H.P. (1975). Logic and conversation. In P. Cole & J.L. Moran (Eds.) *Syntax II: Speech Acts* (P41-58). NY: academic Press.
- Grice, H.P. (1989). Studies in the way of words. Cambridge Massachusetts: Harvard University Press.
- Groarke, S. (2011). Unthinkable experience: Winnicott's ontology of disaster and hope. *American Imago*, *67*(3), 399-429.

- Gullestad, S.E. (2001). Attachment theory and psychoanalysis: Controversial issues. *The Scandinavian Psychoanalytic review, 24*, 3-16.
- Gullestad, S.E. (2003). The adult attachment and psychoanalytic outcome studies. *Intergenerational Journal of Psychoanalysis*, 84, 651-668.
- Goodman, G. (2002). *The Internal World and Attachment*. Hillsdale, NJ: The Analytic Press Inc.
- Golafshani, N. (2003). Understanding reliability and validity in qualitative research. *The* qualitative report 8(4), 597-607.
- Gwartney-Gibbs, P.A.; Stockard, J.; Bohmer, S. (1987). Learning courtship aggression: The influence of parents, peers and personal experiences. *Family relations*, *36*, 276-282.
- Haaken, J. (2008). Too close for comfort: Psychoanalytic cultural theory and domestic violence politics. *Psychoanalysis, Culture and Society, 13,* 75-93.
- Haaken, J. (2010). *Hard Knocks: Domestic violence and the psychology of storytelling*. East Sussex, UK: Routledge.
- Hagenaars, M. A. & van Minnen A. (2010). Post traumatic growth in exposure therapy for Post Traumatic Stress Disorder. *Journal of traumatic stress*, *23*(4), 504-508.
- Haight, W.L., Woochan, S.S., Linn, L.M. & Swinford, L. (2007 July/Aug.). Mothers' strategies for protecting children from batterers: the perspectives of battered women involved in child protective services. Child Welfare, *86*(4), 41-62).
- Hancock, B. (1998).Trent focus for research and development in primary health care: An introduction to qualitative research. Trent focus. Retrieved from http://faculty.uccb.ns.ca/pmacintyre/course_pages/MBA603/MBA603_files/IntroQualitativeResearch.pdf
- Hauser, S., Golden, E. & Allen J. (2006). Narrative in the study of resilience. In A. King, P.B.

 Neubauer, S. Abams & Dowling, A.S. (Eds.), *The Psychoanalytic study of the child*vol.61 (pp205-227). New Haven and London: Yale University Press
- Hardwood, I. (1987). The evolution of the self: An integration of Winnicott's and Kohut's concepts. In T. Honess & K. Yardley (Eds.), *Self and identity-Perspectives across the lifespan* (pp 55-776). London: Routledge& Kegan Paul.
- Hasui, C., Igarashi, H., Nagata, T. & Kitamura, T. (2008). Guilt and its multidimensionality:

 Empirical approaches using Klein's view. *American Journal of Psychotherapy*, 62(2), 117-142.

- Heath, I. (2011). Divided we fail. Clinical Medicine, 11(6), 576-586.
- Henderson, A. J. Z., Bartholomew, K. & Dutton, D. G. (1997) He loves me, he loves me not:

 Attachment and separation resolution of abused women. *Journal of Family Violence*,

 12(2), 169-191.
- Henderson, A. J. Z., Bartholomew, K., Trinke, S.J. & Kwong, M. J. (2005). When loving means hurting: An exploration of attachment and intimate abuse in a community sample. Journal of Family Violence, *20*(4), 219-230.
- Herbert, G.L., Callahan, J.L. & McCormack, V. (2010). An investigation of the object relations theory of depression. *Psychoanalytic Psychology*, *27*(2), 21-234.
- Herman, J. (1992). Trauma and Recovery. New York: Basic Books
- Herman, J. (2001). *Trauma and Recovery*. UK: London, Pandora: An imprint of Rivers Oram Publishers Ltd.
- Herrenkohl, T. I.; Sousa, C.; Tajima, E.A.; Herrenkohl, R.C. & Moylan, C.A. (2008). Intersection of child abuse and children's exposure to domestic violence. *Trauma, Violence and Abuse 9*(2), 84-99.
- Herrera, V.M., & McCloskey, L.A. (2001). Gender differences in the risk of delinquency among youth exposed to family violence. *Child abuse & Neglect*, *25*, 1037-1051.
- Herrman, H., Stewart, D.E., Diaz-Granados, N., Berger, E.L., Jackson, B. & Yuen, T. (2011 May). What is resilience? *Canadian Journal of Psychiatry*, *56*(5), 258-265.
- Hesse, E. (1996). Discourse, memory and the Adult Attachment Interview: A note with emphasis on the emerging cannot classify category. *Infant Mental Health Journal*, 17 (1), 4-11.
- Hesse, E. & Main M. (1999). Second generation effects of unresolved trauma in non-maltreating parents: Dissociated, frightened and threatening parental behaviour.

 *Psychoanalytic Inquiry: A Topical Journal for Mental Health Professionals, 19(4), 481-540.
- Hesse, E. & Main, M. (2000). Disorganised infant, child and adult attachment: Collapse in behavioural and attentional strategies. *Journal of American Psychoanalytic Association*, 48, 1097-1127.
- Hesse, E. & Main, M. (2006). Frightened, threatening, and dissociative parental behaviour in low-risk samples: Description, discussion and interpretations. *Development and Psychopathology*, *18*, 309-343.

- Hesse, E. (2008). The Adult Attachment Interview, protocol, method of analysis, and empirical studies. In J. Cassidy & P. Shaver (Eds.) *Handbook of attachment: Theory, research and clinical applications* (p 552-589). New York: Guildford Press.
- Holden, G.W. (2003). Children exposed to domestic violence and child abuse: Terminology and taxonomy. *Clinical child and family psychology review*, *6*(3), 873-886.
- Holmes, B.M. & Johnson, K.R. (2009). Adult attachment and romantic partner preference: a review. Journal of Social and Personal Relationships, *26*, 833-852.
- Holt, S.; Buckley, H. & Whelan, S. (2008). The impact of exposure to domestic violence on children and young people: A review of the literature. *Child abuse and neglect, 32*, 797-810.
- Holway, W. (1989). *Subjectivity and method in psychology: Gender, meaning and science*. London, UK: Sage publications.
- Hoque, M.E., Hoque, M. & Kader, S. B. (2009) Prevalence and experience of domestic violence among rural pregnant women in Kwazulu-Natal, South Africa. *The Southern African Journal of epidemiology and infection*, *24*(4), 34-37.
- Howe, D. & Fearnley, S. (1999). Disorders of attachment and attachment therapy. *Adoption* and Fostering, 23(2), 19-30.
- Howell, K. H., Graham-Bermann, S.A., Czyz, E. & Lilly, M. (2010). Assessing resilience in preschool children exposed to intimate partner violence. *Violence and Victims*, *25* (2), 150-164.
- Humphreys, C., Lowe, P. & Williams, S. (2009). Sleep disruption and domestic violence: Exploring the interconnections between mothers and children. *Child & Family Social Work*, *14*(1), 6-14.
- Hutchinson, A.K. (2005). Meaning in life and sense of coherence as predictors of coping among young adults. (Master's thesis). University of Johannesburg, South Africa.
- Huth-Bocks, A.C., Levendosky, A.A., Theran, S.A. & Bogat, G.A. (2004). The impact of domestic violence on mothers' prenatal representations of their infants. *Infant Mental Health Journal*, *25*(2), 79-98.
- Hunt, J. (1989). *Psychoanalytic aspects of fieldwork: Qualitative research methods*. London: Sage.
- Hurvich, M. (2003). The place of annihilation anxieties in psychoanalytic theory. *Journal of the American Psychoanalytic Association*, *51*, 579-616.

- Idemudia, E.S. & Makhubela, S. (2011). Gender difference, exposure to domestic violence and adolescents' identity development. Gender & Behaviour, *9*(1), 3443-3464.
- Imhonde, H.O.; Aluede, O. & Oboite, W.(2009). Domestic violence and adolescent psychological functioning among secondary school students in the Benin metropolis of Nigeria. *European Journal of Educational Studies*, 1(1), 1-6.
- Johansson, R. (2003). Case Study Methodology. Retrieved from http://www.psyking.net/htmlobj-3839/case study methodology-
 rolf johansson vr 2.pdf
- Johnson, C. H. (2009). *Intimate partner homicide, familicide and child trauma and the need*for information sharing and differential case management in justice. Paper

 presented at AIJA conference of Curtin University of Technology in October,

 Brisbane.
- Johnson, L.E. & Benight, C. (2003). Effects of trauma-focused research on recent domestic violence survivors. *Journal of traumatic stress*, *16*(6), 567-571.
- Juni, S. (1997 June). Conceptualising defense mechanisms from drive theory and object relations perspectives. American Journal of Psychoanalysis, *57*(2), 149-166.
- Kächele, H. (2011). The single case study approach as a bridge between clinicians and researchers. Paper presented June 3-5 at the Annual meeting of the Rapaport-Klein Study Group, Austen-Riggs Center, Stockbridge, Massachusetts.
- Kanninen, K., Punamäki, R. & Qouta, S. (2003). Personality and trauma: Adult attachment and post-traumatic distress among former political prisoners. *Peace and Conflict:*Journal of peace Psychology, 9(2), 97-126.
- Kavaler-Adler, S. (2007) Pivotal moments of surrender to mourning the internal parental object. *Psychoanalytic Review, 94* 5), 763-790.
- Kennedy, A., Bybee, D., Sullivan, C.M. & Greeson, M. (2009). The effects of community and family violence exposure on anxiety trajectories during middle childhood: The role of family social support as a moderator. *Journal of clinical child & Adolescent Psychology*, 38(3), 365-379.
- Kernberg, O. F. (1985). Internal world and external reality. London: Jason Aronson INC.
- Kernsmith, P. (2006). Gender differences in the impact of family of origin violence on perpetrators of domestic violence. *Journal of Family Violence*, *21*(2), 163-171.
- Kira, I.A., Templin, T., Lewandowski, L., Ramaswamy, V., Ozkan, B., Mohanesh, J. & Hussam,

- A. (2012). Collective and personal annihilation anxiety: Measuring annihilation anxiety AA. *Psychology*, *3*(1), 90-99.
- Kitzman, K.M.; Gaylord, N.K.; Holt, A.R. & Kenny, E.D. (2003). Child witness to domestic violence: A meta-analytic review. *Journal of consulting and clinical psychology*, 71(2), 339-352.
- Klein, M. (1932). The psycho-Analysis of children. London, England: Hogarth Press.
- Klein, M. (1937). Love, guilt and reparation. In M. Masud & R. Khan, (Eds), *Love, guilt and reparation and other works*, 1921-1945 (pp306-343). London: The Hogarth Press and Institute of Psychoanalysis.
- Klein M. (1940). Mourning and its relation to manic-depressive states. In Masud, M. & Khan R. (Eds), Love, guilt and reparation and other works, 1921-1945 vol. 1 (pp 344-370) London: The Hogarth Press and Institute of Psychoanalysis.
- Knutson, J.F., Lawrence, E., Taber, S.M., Bank, L. & DeGarmo, D.S. (2009). Assessing children's exposure to intimate partner violence. *Clinical Child and Family Review*, 12, 157-173.
- Kobak, R. & Madsen, S. (2008). Disruptions in attachment bonds: Implications for theory, research and clinical intervention. In J. Cassidy & P. Shaver (Eds.), *Handbook of attachment: Theory, research and clinical applications* (pp 23-47). New York: Guildford Press.
- Kohn, L.T. (1997). Methods in case study analysis. Technical publication 2: The centre for studying health system change. Retrieved from http://webanketa.com/direct/upload/books/en/methods in case study analysis by linda t kohn.pdf
- Krantz,G. & Östergren, P. (2000). The association between violence, victimisation and common symptoms in Swedish women. *Journal of Epidemiology & Community Health*, *54*, 815-821.
- Kubeka, A.M. (2008). Exposure to violence at home: a qualitative exploration of experiences and perceptions of black adolescents in South Africa. *South African Review of Sociology*, *39*(2), 282-300.
- Kuchan, K.L. (2011). Prayer as a therapeutic process toward transforming destructiveness within a spiritual direction relationship. *Journal of Religious Health*, *50*, 120-131.
- Kvale, S. (1999). The psychoanalytic interview as qualitative research. Qualitative Inquiry, 5,

87-113.

- Laing, L. (2000). Children, young people and domestic violence, paper 2, 1-28. Australian domestic and family violence, The University of New South Wales: Clearing House Issues.
- Lane, R.C. & Foehrenbach, L. (1994). Psychotherapy of a man with panic, somatisation, and traumatic anxiety: A psychoanalytic study. *Journal of Contemporary Psychotherapy*, 24(2), 107-111.
- Langhinrichsen-Rohling, J. (2005). Top 10 Greatest "Hits": Important Findings and Future

 Directions for Intimate Partner Violence Research. *Journal of Interpersonal Violence*,

 20(1), 108-118.
- Larsen, D. J. & Larsen, B.A. (2004). "I am a puzzle": Adolescence as reflected in self-metaphors. *Canadian Journal of Counselling*, 38(4), 246-259.
- Lees, J. (2005). A history of psychoanalytic research. *Psychodynamic practice*, *11*(2), 117-131.
- Lemma, A. & Levy, S. (2004). The impact of trauma on the psyche: Internal and external processes. In Levy, S. & Lemma, A. (Eds.) *The perversion of loss, psychoanalytic perspectives on trauma*, (pp 1-20). USA: WHURR Publishers, LTD.
- Lemma, A. (2004). On hope's tightrope: reflections on the capacity for hope. In Levy, S. & Lemma, A. (Eds), *The perversion of loss, psychoanalytic perspectives on trauma*, (pp 108-126). USA: WHURR Publishers, LTD.
- Levendosky, A.A., Lynch, S.M. & Graham-Bermann, S.A. (2000). Mothers' perceptions of the impact of woman abuse on their parenting. *Violence against women*, *6*, 248-272.
- Levendosky, A.A. & Graham-Bermann, S. (2001). Parenting in battered women: The effects of domestic violence on women and their children. *Journal of Family Violence*, *16*(2), 171-192.
- Levendosky, A.A.; Bogat, G.A.; Theran, S.A.; Trotter, J.S., von Eye, A. & Davidson, W.S. (2004). The social networks of women experiencing domestic violence. *American Journal of Community Psychology*, *34* 1/2), 95-109.
- Levendosky, A.A., Lannert, B. & Yalch, M. (2012) The Effects of Intimate Partner violence on Women and Child Survivors: An Attachment Perspective, Psychodynamic Psychiatry, 40(3), 397-434.
- Levy, S. (2004). Containment and validation: Working with survivors of trauma. In Levy, S. &

- Lemma, A. (Eds.), *The perversion of loss, psychoanalytic perspectives on trauma*, (pp 50-70). USA: WHURR Publishers, LTD.
- Lepisto, S., Luukaala, T., Paavilainen, E. (2011). Witnessing and experiencing domestic violence: A descriptive study of adolescents. *Scandinavian Journal of Caring Sciences*, *25*(1), 70-8.
- Lichter, E.L & McCloskey, L.A. (2004). The effects of childhood exposure to marital violence on adolescent gender-role beliefs and dating violence. *Psychology of Women Quarterly, 28,* 344-357.
- Lieberman , A. F. (2007). Ghosts and Angels: Intergenerational patterns in the transmission and treatment of the traumatic sequelae of domestic violence. *Infant Mental Health Journal 28*(4), 422-439.
- Lieberman, A. F., Padrón, E., Van Horn, P., Harris, W.W. (2005). Angels in the nursery: The Intergenerational transmission of benevolent parental influences. *Infant Mental Health Journal* 26(6), 504-520.
- Lilienfeld, S.O., Wood, J. M., Garb, H.N. (2000). The scientific status of projective techniques.

 *Psychological Science in the Public Interest, 1(2), 27-66.
- Lim, B.H., Adams, L.A & Lilly, M.M. (2012). Self-worth as a mediator between attachment and posttraumatic stress n interpersonal trauma. *Journal of Interpersonal Violence*, *27*, 2039-2061.
- Lindbom-Jakobson, M. & Lindgren, L. (2001). Integration or sealing-over, a pilot study of coping strategies of severely traumatised patients. *International Forum of Psychoanalysis*, 10, 27-34.
- Lindström, B. & Eriksson, M. (2005). Salutogenesis. *Journal of Epidemiology & Community Health*, *59*, 44-442.
- Lindström, B. & Eriksson, M. (2010). A salutogenic approach to tackling health inequalities.

 In Morgan A., Ziglio, E. & Davies, M. (Eds.) *Health Assets in a global context: Theory, Methods, Action (pp17-39).* US: Springer Science.
- Liotti, G. (2004). Trauma, dissociation and disorganized attachment: Three strands of a single braid. *Psychotherapy, Theory, research, practice, training*, *41*, 472-486.
- Lohman, B.J., Neppl, T.K., Senia, J.M. & Scholefield, T.J. (2013). Understanding adolescent and family influences on intimate partner psychological violence during emerging adulthood and adulthood. *Journal of Youth and Adolescence*, *42*, 500-517.

- Loparic, Z. (2002). Winnicott's paradigm outlined. *Revista Latino Americana de Psychologia*, 5(1), 61-98.
- Lopez, F.G., Fuendeling, J., Thomas, K. & Sagula, D. (1997). An attachment-theoretical perspective on the use of spiting defences. *Counselling Psychology Quarterly*, *10*(4), 461-472.
- Lundberg, O. (1997 March) Childhood conditions, Sense of Coherence, social class and adult ill health: Exploring their theoretical and empirical relations. *Social Science & Medicine*, 44 (6), 821-831.
- Maeder, T. (1989). Wounded healers. *The Atlantic 263*(1), 37-47.
- Mahler, M. (1968) *On human symbiosis and the vicissitudes of individuation. Vol.1: Infantile and early contributions.* Madison, CT: International Universities Press.
- Mahler, M. (1970) *On human symbiosis and the vicissitudes of individuation. Vol.2:*Separation-individuation. New York: Basic Books.
- Mahler, M., Pine, F. & Bergman, A. (1975). *The psychological birth of the human infant*. New York: Basic Books.
- Machisa, M. (2011) South Africa: Domestic violence must be included in crime stats. Gender Links, 13 September 2011. Retrieved from http://www.genderlinks.org.za/article/southafrica-domestic-violence-must-be-included-in-crimestats-2011-09-13
- Machisa, M., Jewkes, R., Morna, C.L. & Rama, K. (2011) The war at home: Gender based violence indicators project. Gauteng Research Report. Gender Links, South Africa, 16

 August 2011. Retrieved from http://www.genderlinks.org.za/article/the-war-at-home---gbv-indicators-project-2011-08-16
- Makola, S. & Van den Berg, H. (2008). Meaning/Purpose in life and related constructs: A literature review. *International Journal of Existential Psychology & Psychotherapy*, 2(2), 1-7.
- Main, M., Kaplan, N. & Cassidy, J. (1985). Security in infancy, childhood and adulthood: A move to the level of representation. In I. Bretherton & E. Waters (Eds.) *Growing points of attachment theory and research*. Monographs of the Society for Research in Child Development, Serial No 209, vol. 50 (1-2) (pp66-06).
- Main, M. & Hesse, E. (1990). Parents unresolved traumatic experiences are related to infant

- disorganised attachment status: Is frightened and/or frightening parental behaviour the linking mechanism? In M. Greenberg, D. Ciccheti & E.M.Cummings (Eds.) Attachment in the pre-school years: Theory, research and intervention, (pp161-182). Chicago: University of Chicago Press.
- Main, M. (1991). Metacognitive knowledge, metacognitive monitoring and singular (coherent) vs multiple (incoherent) model of attention: Finding directions for future research. In Parkes, C.M., Stevenson-Hinde, J. & Marris, P. (Eds.) *Attachment across the life cycle*, (pp127-159). London: Routledge.
- Margolin, G. (2005). Children's exposure to violence: Exploring developmental pathways to diverse outcomes. *Journal of interpersonal violence*, *20*(1), 72-81.
- Margolin, G. and Gordis, E. (2004). Children's exposure to violence in the family and community. *American Psychological Society*, *13*(4), 152-155.
- Matima, M. (2007). Narrative Therapy and Abused Women. Retrieved from http://www.brieftherapynetwork.com/documents/narrativepractices.pdf
- Martinez-Torteya, C., Bogat, G. A., von Eye, A. & Levendosky, A.A. (2009). Resilience among children exposed to domestic violence: The role of risk and protective factors. *Child Development*, 80(2), 562-577.
- Mayseless, O., Bartholomew, K., Henderson, A. & Trinke, S. (2004 Jan.). "I was more her mom than she was mine:" Role reversal in a community sample. Family Relations, 53(1), 78-86.
- McAdams, D.P. (2006). The role of narrative in personality psychology today. *Narrative inquiry*, *16*(1), 11-18.
- McCluskey, M.J. (2010) Psychoanalysis and domestic violence: Exploring the application of Object Relations theory in social work field placement. *Clinical Social Work Journal*, *38*, 435-442.
- McCubbin, H.I., Thompson, E.A., Thompson, A. I., Elver, K.M. & McCubbin, M.A. (1998).

 Ethnicity, schema and coherence: Appraisal processes for families in crisis. In McCubbin, H.I.; Thompson, E.A.; Thompson, A.I. & Fromer, J.E. (Eds.) *Stress, coping and health in families: Sense of coherence and resiliency*, (pp 41-70). California: Thousand Oaks, Sage.
- McCutcheon, V.V., Heath, A.C., Nelson, E.C., Bucholz, K. K., Madden, P.A.F. & Martin, N.G.

- (2008). Accumulation of trauma over time and risk for depression in a twin sample. *Psychological Medicine*, *39*, 431-441.
- McQueen, D., Itzin, C., Kennedy, R., Sinason, V., Maxted, F. (2009). *Psychoanalytic psychotherapy after child abuse*. UK: London Karnac.
- Miller, A. (1981). The drama of the gifted child. New York: Basic books.
- Milne, L.C. & Lancaster, S. (2001). Predictors of depression in female adolescents. *Adolescence*, *36*(142), 207-223.
- Minoli, M. (2004). Identity and relational psychoanalysis. *International Forum of Psychoanalysis*, 13, 237-245.
- Mikulincer, M. & Shaver, P.R. (2008). Adult attachment and affect regulation. In J. Cassidy & P. Shaver (Eds.) *Handbook of attachment: Theory, research and clinical applications* (pp503-527). New York: Guildford Press.
- Miles, M.B. & Huberman, A.M. (1984). *Qualitative data analysis : A source book of new methods* (2nd ed.) Newbury Park, CA : Sage.
- Monyela, A. (2010) Statistics on domestic violence in South Africa. Women in action, 1

 August 2010. Retrieved from

 http://www.womeninaction.co.za/socialaffairs/statistics-on-domestic-violence-in-south-africa/
- Morse, J.M.; Barrett, M.; Mayan, M.; Olson, K. & Spiers, J. (2002). Verification strategies for establishing reliability and validity in qualitative research. *International Journal of Qualitative Methods*, *1*(2), 13-22.
- Moylan, C.A, Herrenkohl, T.I., Sousa, C., Tajima, E.A., Herrenkohl, R.C. & Russo, M.J. (2010).

 The effects of child abuse and exposure to domestic violence on adolescent internalizing and externalizing behaviour problems. *Journal of Family Violence*, *25*, 53-63.
- Neimeyer, R.A. (2006). Re-storying loss: Fostering growth in the posttraumatic narrative. In L.G. Calhoun & R.G. Tedeschi (Eds.) *Handbook of post traumatic growth: Research and practice* (pp68-80). Mahwah, New Jersey: Lawrence Erlbaum.
- O'Brien, C. (2010). Winnicottian object relations and behavioural theoretical conceptualisations of difficult to treat binge-type eating disorders: Proposal for a synthesised treatment approach through dialectical behaviour therapy."

 (Unpublished Master's Thesis). Smith's College for Social Work: Massachusetts.

- Ohlsson, C. (2010, January). *Children who witness domestic violence*. Paper 71 presented at the Parliamentary Assembly by Social Health and Family Affairs Committee, Sweden.
- Okour, A.M. & Hijazi, H. H. (2009). Domestic violence and family dysfunction as risk factor for violent behaviour among university students in North Jordan. *Journal of Family Violence*, *24*, 361-366.
- Osofsky, J.D. (1995). Children who witness domestic violence: The invisible victims. *Social Policy Report: Society for Research in Child Development*, *9* (3), 1-16.
- Osofsky, J.D. (1999) The impact of violence on children. *The Future of Children, 9* (3) Winter, 33-49.
- Ogden, (1979) On projective identification. *International Journal of Psycho-Analysis*, 60, 357-373.
- Ogden, T. H. (1984) Instinct, phantasy and psychological deep structure A reinterpretation of aspects of the work of Melanie Klein. *Contemporary Psychoanalysis*, 20, 500-525.
- Ogden, T.H. (1986). *The matrix of the mind: Object relations and the psychoanalytic dialogue*. Northwale, NJ: Jason Aronson.
- Pakman, M. (2004). The Epistemology of Witnessing: Memory, Testimony, and Ethics in Family Therapy. *Family Process*, *43*(2), 265-274.
- Park, L.E., Crocker, J. & Mickelson, K.D. (2004). Attachment styles and contingencies of self-worth. *Personality and Social Psychology Bulletin*, *30*, 1243-1254.
- Park, Y. J., Fedler, J. & Dangor, Z. (Eds) (2000). *Reclaiming women's spaces—New perspectives on violence against women and sheltering in South Africa*. Lenasia: Nisaa Institute for Women's Development, JHB.
- Parker, I. (2003). Psychoanalytic research: How to locate subjectivity in contemporary research. *Interações: Estudos e Pesquisas em Psicologia, 8* (16), 13-35.
- Partington, T. (2009). Narratives of woundedness in applications for clinical psychology training. (Unpublished Master's thesis). University of the Witwatersrand, Johannesburg, South Africa.
- Parry, R. (2010). A critical examination of Bion's concept of containment and Winnicott's concept of holding and their psychotherapeutic implications. (Unpublished Master's thesis). University of the Witwatersrand, Johannesburg, South Africa.
- Pearce, P. & Simanowitz, V. (2003). Personality Development. US: Open Univ. Press.
- Pitman, J.F.; Keiley, M. K.; Kerpelman, J.L.& Vaughn, B.E. (2011). Attachment, identity and

- intimacy: Parallels between Bowlby's and Erikson's paradigms. *Journal of Family Theory and Review, 3,* 32-46.
- Polkinghorne, D.E. (2007 May). Validity Issues in Narrative Research. *Qualitative inquiry, 13* (4), 471-486.
- Polkinghorne, D. E. (1988). Narrative knowing and the human sciences. Albany: Suny press.
- Pope, C., Ziebland, S. & Mays, N. (2000). Qualitative research in healthcare. *British Medical Journal*, 320, 114-116.
- Priel, B., Besser, A., Waniel, A., Yonas-Segal, M. & Kuperminc, G.P. (2007). Interpersonal and intrapersonal processes in the formation of maternal representations in middle childhood: Review, new findings and future directions. *The Israel Journal of Psychiatry and Related Sciences*, *44*(4), 255-265.
- Pringle, C. (17 December 2010) A special kind of war zone: Violent crime in SA, Cramer

 Media Report Consultancy Africa Intelligence (CAI). Retrieved from

 <a href="http://www.consultancyafrica.com/index.php?option=com_content&view=article&id=628.a-special-kind-of-war-zone-violent-crime-in-south-africa&catid=57:africawatch-discussion-papers&Itemid=263

 watch-discussion-papers&Itemid=263
- Próspero, M. (2008). Effects of masculinity, sex and control on different types of intimate partner violence perpetration. *Journal of Family Violence*, *23*, 639-645.
- Radke-Yarrow, M. (1991) Attachment patterns in children of depressed mothers, in Parkes, C.M., Stevenson-Hinde, J. & Marris, P. (Eds.) *Attachment across the Life Cycle*, (115-126) London: Routledge.
- Renner, L. M. & Slack, K.S. (2004, March). *Intimate partner violence and child maltreatment:*understanding co-occurrence and intergenerational connections. Institute for research on poverty discussion paper at University of Wisconsin-Madison, USA.

 Reitzel-Jaffe, D. & Wolfe, D.A. (2001). Predictors of relationship abuse among young men. *Journal of interpersonal violence*, 16(2), 99-115.
- Ribeiro, L.A., Target, M., Chiesa, M., Bateman, A., Stein, H. & Fonagy, P. (2010). The problematic object representation scales (PQRS): A preliminary study to assess object relations in personality disorder through the AAI protocol. *Bulletin of the Menninger Clinic*, 74(4), 328-352.
- Riese, J. (2005). Salutogensis in social systems: Self, identity and robustness of the

- organization. In: Proceedings of the European Academy of Management Conference, EURAM 2005, Munich, Germany.
- Riessman, C.K. (2001). Analysis of personal narratives. In J.F. Gubrium J. A. Holstein (Eds),

 Handbook of Interview research: Context and Method (Reprint., pp 695-709). US,

 California: Sage publications.
- Ristkari, T., Sourander, A., Rønning, J.A., Piha, J., Kumpulainen, K., Tamminen, T., Moilanen, I. & Almqvist, F. (2009). Childhood psychopathology and sense of coherence at age 18: findings from the Finnish from a boy to a man study. *Social Psychiatry & Psychiatric Epidemiology*, 44, 1097-1105.
- Roisman, G.I., Padrón, E., Sroufe, L.A., & Egeland, B. (2002). Earned-secure attachment status in retrospect and prospect. *Child Development*, *73*(4), 1204-1219.
- Roisman, G.I., Fraley, R.C. & Belsky, J. (2007). A taxometric study of the Adult Attachment Interview. *Developmental Psychology*, *43*(3), 675-686.
- Rossan, S. (1987). Identity and its development in adulthood. In T. Honess & K. Yardley (Eds.)

 Self and identity-Perspectives across the lifespan (pp304-319). London: Routledge & Kegan Paul.
- Rosenberg, M. (1987). Depersonalisation: The loss of personal identity. In T. Honess & K.

 Yardley (Eds.) *Self and identity-Perspectives across the lifespan* (pp193-206). London:

 Routledge& Kegan Paul.
- Roussillon, R. (2009). The deconstruction of primary narcissism. *The International Journal of Psychoanalysis*, *91*, 821-837.
- Rosenthal, B.S, Wilson, W.C., Futch, V. (2009). Trauma, protection and distress in late adolescence: A multi-determinant approach. *Adolescence*, *44*(176), 693-703.
- Rowley, J. (2005). Using case studies in research. Management Research News 25(1), 16-27.
- Rubens, R.L. (1994). Fairbairn's structural theory. In J. S. Grotstein& D.B. Rinsley (Eds.)

 Fairbairn and the origins of object relations (pp151-173). New York: Guildford Press.
- Salisbury, E.J., Henning, K. & Holdford, R. (2009 Aug.). Fathering by partner-abusive men:

 Attitudes on children's exposure to interparental conflict and risk factors for child abuse. *Child maltreatment*, 4(3), 232-242.
- Sagi, A., van Ijzendoorn, M. Scharf, M., Koren-Karie, N., Joels, T. & Mayseless, O. (1994).

 Stability and discriminant validity of the AAI: A Psychometric study in young Israeli adults. *Developmental Psychology*, 30, 771-777.

- Saunders, R., Jacobvitz, D., Zaccagnino, M., Beverung, L.M. & Hazen, N. (2011). Pathways to earned-security: The role of alternative support figures. *Attachment and Human Development*, *13*(4), 403-420.
- Schechter, D.S. & Wilheim, E. (2009 July). Disturbances of Attachment and parental psychopahology in early childhood. *Child Adolesc Psychiatr Clin N Am, 18*(3), 665-686.
- Schwartz, S.J & Finley, G.E. (2010). Troubled Ruminations about parents: Conceptualization and validation with emerging adults. *Journal of Counselling and Development*, 88, 80-1.
- Seligman, S. (2007). Mentalization and metaphor, acknowledgement and grief: Forms of transformation in the reflective space. *Psychoanalytic Dialogues*, *17*(3), 321-344.
- Semple, R.J. (2001, Dec.). Psychological abuse in intimate relationships: A New Zealand perspective. *New Zealand Journal of Psychology*, *30*(2), 60-71.
- Segal, H. (1973). An introduction to the work of Melanie Klein. London: Hogarth Press
- Shalom, A. (1986). Culture and psychoanalysis. The review of metaphysics, 39(4), 715-727.
- Sharpe, S. & Faulkner, J. (2008). *Understanding Psychoanalysis*. UK: Acumen Publishing Limited.
- Shaver, P.R.; Collins, N. & Clark, C.L. (1996). Attachment styles and internal working models of self and relationship partners. In G. J.O. Fletcher & J. Fitness (Eds.) *Knowledge structures in close relationships* (pp25-62). New Jersey: Lawrence Erlbaum.
- Shaver, P.R. & Fraley, R.C. (2008). Attachment, loss and grief. In J. Cassidy & P. Shaver (Eds.)

 Handbook of attachment: Theory, research and clinical applications (pp 48-70). New York: Guildford Press.
- Shaver, P.R., Mikulincer, M. & Feeny, B.C. (2009). What's love got to do with it? Insecurity and anger in attachment relationships. *Virginia Journal of Social Policy and the Law,* 16(2), 491-513.
- Shenton, A. K. (2004). Strategies for ensuring trustworthiness in qualitative research projects. *Education for information*, *22*, 63-75.
- Sheppard, A. (2009). Winnicott's concept of innate morality and the development of the capacity for concern. *Canadian Journal of Psychoanalysis*, *17*(1), 290-297.
- Slade, A. (1999) Representation, symbolization and affect regulation in the concomitant

- treatment of a mother and child: attachment theory and child psychotherapy. *Psychoanalytic inquiry*, *19*, 797-830.
- Slade, A., Grienenberger, J, Bernbach, E., Levy, D. & Locker, A. (2005, Sept.). Maternal reflective functioning, attachment, and the transmission gap: A preliminary study. *Attachment and Human Development*, 7(3), 283-298.
- Snekkevik, H., Anke, A.G.W., Stanghelle, J.K. & Fugi-Meyer, A. R. (2003 July) Is sense of coherence stable after multiple trauma? *Clinical Rehabilitation*, *17*(4), 443-452.
- Solomon, J. & George, C. (Eds.) (1999). Attachment Disorganization. NY: Guildford Press.
- Solt, G.C. (1996, Aug.). A view from the inside: Ronald Fairbairn's contribution to men's self-understanding. *Journal of men's studies*, *5*(1), 31-48.
- Sonkin, D.J. (2005). Attachment theory and psychotherapy. *The California Therapist*, *17*(1), 68-77.
- Sorensen, P.B. (2005). Transition facilitating behaviour, bridging Attachment theory and British Object Relations. *Journal of Infant, Child, and Adolescent Psychotherapy*, *4*(2), 119-133.
- Spilsbury, J.C., Kahana, S., Drotar, D., Creeden, R., Flannery, D.J & Friedman, S. (2008).

 Profiles of behavioural problems in children who witness domestic violence.

 Violence and Victims, 23(1), 3-17.
- Sroufe, L.A., Carlson, E.A., Levy, A.K. & Egeland, B. (1999). Implications of attachment theory for developmental psychopathology. *Development and Psychopathology*, *11*, 1-13.
- Sroufe, L. A. (2005, Dec.). Attachment and development: A prospective, longitudinal study of attachment and development. *Attachment and Human Development*, 7(4), 349-367.
- Stanley, N. (2011) Children Experiencing Domestic Violence: A Research Review, Dartington:

 Research in practice. Retrieved from www.rip.org.uk/publications
- Steele, H. & Steele M. (2008). On the origins of reflective functioning. In Busch, F.N. (Ed),

 Mentalization. Psychoanalytic Inquiry book series, vol.29, (pp 133-156). New York:

 The Analytic Press.
- Steiner, J. (1993) *Psychic Retreats*. London/NY: Tavistock/Routledge.
- Stolbach, B.C., Minshew, R., Rompala, V., Dominguez, R.Z., Gazibara, T. & Rinke, R. (2013).

 Complex trauma exposure and symptoms in urban traumatized children: A preliminary test of proposed criteria for Developmental Trauma Disorder. *Journal of Traumatic Stress*, 26, 1-9.

- Strumpfer, D.J.W. & Mlonzi, E.N. (2001). Antonovsky's sense of coherence scale and job attitudes: three studies. *South African Journal of Psychology*, *31*(2), 30-37.
- Stubley, J. (2004). Bearing the unbearable: Melancholia following severe trauma. In Levy, S. & Lemma, A. (Eds.) *The perversion of loss, psychoanalytic perspectives on trauma*, (pp 87-107). USA: WHURR Publishers, LTD.
 - The Telegraph, (4 Nov. 2012), Retrieved from

http://www.freerepublic.com/focus/news/2955393/posts

- Thompson, R.A. (2008). Early attachment and later development. In J. Cassidy & P. Shaver (Eds.) *Handbook of attachment: Theory, research and clinical applications* (pp 348-362). New York: Guildford Press.
- Trappler, B. (2009). *Identifying and recovering from psychological trauma:* A psychiatrist's guide for victims of childhood abuse, spousal battery and political terrorism. US:

 Gordion Knot Books.
- Trickett, P.K. (2002). Children exposed to violence: current status, gaps and research priorities. Symposium held and presented by Analytical Sciences, July, Washington.

 Retrieved from http://www.nichd.nih.gov/publications/pubs/upload/children_violence.pdf
- Valiant, G.E. (1994 Feb.) Ego mechanisms of defense and personality psychopathology. *Journal of abnormal Psychology*, 103(1), 44-50.
- Van den Bosse, S. & McGinn, M. A. (2009). Child Welfare professionals' experiences of childhood exposure to domestic violence. *Child welfare*, *88*(6), 49-65.
- Van der Kolk, B.A. (2005). Developmental Trauma Disorder: Towards rational diagnosis for children with complex trauma histories. *Psychiatric Annals*, *35*, 401-408.
- Van IJzendoorn, M.H. (1995). Adult attachment representations, parental responsiveness and infant attachment: A meta-analysis on the predictive validity of the Adult Attachment Interview. *Psychological bulletin*, *117*(3), 387-403.
- Van IJzendoorn, M.H. & Bakermans-Kranenburg, M.J. (2008). The distribution of adult attachment representations in clinical groups: A meta-analytic search for patterns of attachment in 105 Adult Attachment Interview studies. In H. Steele & M. Steele (Eds.) *Clinical Applications of the AAI* (pp69-98). New York: Guildford Press.
- Van Schalkwyk, L. & Rothman, S. (2008). Validation of the orientation to life questionnaire in a chemical factory. *South African Journal of Industrial Psychology*, *34*(2), 31-39.

- Varvin, S. (2007). Trauma and resilience. Paper presented to panel on resilience and depletion, 45th IPA congress, Berlin: Germany.
- Vetten, L. (2000). Race, Gender and Power in the Face of Social Change. In Park, Fedler & Dangor (Eds), *Reclaiming women's spaces*. (pp 47-80), SA: Nisaa Institute for women's development.
- Vetten, L. (2005). Addressing domestic violence in South Africa: Reflections on strategy and practice. CSVR Expert paper presented at Expert Group Meeting organised by UN Division for the Advancement of Women in collaboration with: UN Office on Drugs and Crime, 17-20 May, Vienna, Austria.
- Vogelman, L. & Eagle, G. (1991). Overcoming endemic violence against women. *Social Justice*, *18*(1-2), 209-229.
- Volanen, S.M. (2011). Sense of coherence: Determinants and consequences (PhD thesis),
 University of Helsinki, Finland.
- Waldman, L. (2006). Community, family and intimate relationships: An exploration of domestic violence in Griquatown, South Africa. *Anthropology Southern Africa*, *29*(3&4), 84-95.
- Walker, L. (1979). The battered woman. NY: Harper and Row.
- Walsh, F. (2003). Crisis, trauma and challenge: A relational, resilience approach for healing, transformation and growth. Smith College Studies in Social Work, *74*(1), 49-70.
- Wampler, K.S., Shi, L., Nelson, B.S. & Kimball, T.G. (2003). The Adult Attachment Interview and observed couple interaction: Implications for an intergenerational perspective on couple therapy. *Family Process*, *42*(4), 497-515.
- Waska, R.T. (1998). Intrapsychic outcome in projective identification. Bulletin of the Menninger Clinic, *62*(3), 366-377.
- Waska, R. T. (1999, April). Projective identification, countertransference, and the struggle for understanding over acting out. *Journal of Psychotherapy Practice and Research*, 8, 155-161.
- Waska, R.T. (2002). Mutilation of self and object: The destructive world of the paranoid-schizoid patient and the struggle for containment and integration. *Psychoanalytic Review*, 89(3), 373-398.
- Waska, R. T. (2008) Using countertransference: Analytic contact, projective Identification

- and transference phantasy states. *American Journal of Psychotherapy, 62*(4) 333-351.
- Waters, E., Crowell, J., Treboux, D., O'Connor, E., Posada, G. & Golby, B. (1993). Discriminant validity of the Adult Attachment Interview. Poster session presented at the 60th meeting of the society for research in child development, New Orleans, LA.
- Waters, E., Merrick, S., Treboux, D., Crowell, J. & Albersheim, L. (2000). Attachment security in infancy and adulthood: A twenty year longitudinal study. *Child development*, *71*, 678-683.
- Wei, M., Mallinckrodt, B., Larson, L.M. & Zakalik, R.A. (2005). Adult attachment, depressive symptoms and validation from self versus others. *Journal of Counseling Psychology*, *52*(3), 368-377.
- Weinberg, E. (2006). Mentalization, affect regulation and development of the self. *Journal of the American Psychoanalytic Association*, *54*, 251-269.
- Werner-Wilson, R.J. & Davenport, B.R. (2003). Distinguishing between conceptualizations of attachment: Clinical implications in marriage and family therapy. *Contemporary family therapy*, *25*(2), 179-193.
- Widom, C. S. (1989 April). The cycle of violence. Science, 244, 160-166.
- Williams, J.R., Ghandour, R.M., Kub, J.E. (2008). Female perpetration of violence in heterosexual intimate relationships: Adolescence through adulthood. *Trauma Violence Abuse*, *9*(4), 227-249.
- Winnicott, D.W. (1945). Primitive Emotional Development. In D.W. Winnicott, *Through*Paediatrics to psychoanalysis: Collected Papers (pp 145-156). London, UK: Karnac Books.
- Winnicott, D.W. (1953). Transitional Objects and Transitional Phenomena. In D.W.Winnicott, *Through Paediatrics to Psycho-Analysis,* (pp229-242). The International Psycho-Analytical Library. UK: The Hogarth Press.
- Winnicott, D.W. (1958a). Psychoanalysis and the sense of guilt. In M.M. R. Khan (Ed.)

 The maturational processes and the facilitating environment. (pp 15-28). London:

 Karnac.
- Winnicott, D.W. (1958b). The capacity to be alone. In M.M. R. Khan (Ed.) *The maturational processes and the facilitating environment*. (PP29-36). London: Karnac.
- Winnicott, D. W. (1960a). The Theory of the parent-infant relationship. In M.M. R. Khan

- (Ed.) *The maturational processes and the facilitating environment*. (pp 37-55). London: Karnac.
- Winnicott, D.W. (1960b). Ego distortion in terms of true and false self. In M.M. R. Khan (Ed.)
- The maturational processes and the facilitating environment. (pp 140-152). London: Karnac.
- Winnicott, D.W. (1962). Ego integration in child development. In M.M. R. Khan (Ed.)

 The maturational processes and the facilitating environment. (pp 56-63). London:

 Karnac.
- Winnicott, D.W. (1963a). The development of the capacity for concern. In M.M. R. Khan

 (Ed.) *The maturational processes and the facilitating environment*. (pp 73-82).

 London: Karnac.
- Winnicott, D.W. (1963b). From dependence towards independence in the development of the individual. M.M. R. Khan (Ed.) *The maturational processes and the facilitating environment*. (PP83-92). London: Karnac.
- Winnicott, D.W. (1965). The maturational processes and the facilitating environment:

 Studies in the theory of emotional development. Int. Psychoanal. Lib., 64, 1-276.

 London, England: Hogarth Press and Institute of Psycho-Analysis.
- Winnicott, D.W. (1971). Playing and reality. New York: Routledge.
- Winnicott, D.W. (1990) On Transference. In Esman, A. H. (Ed.) *Essential papers on transference* (pp246-251). New York: University Press.
- Yakeley, J. & Meloy, J.R. (2012). Understanding violence: Does psychoanalytic thinking matter? Aggression and Violent Behavior, 17, 229-239.
- Yates, M. P.; Egeland, B.L. & Sroufe, A. (2003).Rethinking resilience: A developmental process perspective. In S.S. Luthar (Ed.) *Resilience and Vulnerability: Adaptation in the context of childhood adversities* (pp243-266).UK: Cambridge University Press.
- Yin, R.K. (1994). Case study research, design and methods. California: Sage publications.
- Young, G.H. & Gerson, S. (1991). New psychoanalytic perspectives on masochism and spouse abuse. *Psychotherapy*, *28*, 30-38.
- Young, R. (1994). Mental Space. UK: Process Press LTD
- Zajac, K. & Kobak, R. (2009). Caregiver unresolved loss and abuse and child behaviour problems: Intergenerational effects in a high-risk sample. *Development and Psychopathology, 21*(1), 173-187.
- Zoellner, T. & Maercker, A. (2006). Post traumatic growth in clinical psychology: a critical

- review and introduction of a two component model. *Clinical Psychology Review, 26,* 626-653.
- Zornig, S. & Levy, L. (2011). Trauma and deprivation: The relationship between early object relations and the constitution of a sense of self. *International forum of psychoanalysis*, 20(1), 26-30.
- Zosky, D.L. (2003). Projective identification as a contributor to domestic violence. Clinical Social Work Journal, *31*(4), 419-431.
- Zosky, D.L. (1999). The application of object relations theory to domestic violence. *Clinical Social Work Journal*, 27(1), 55-69.
- Zungu, L., Salawu, A. & Ogunbanjo, G. (2010). Reported intimate partner violence amongst women attending a public hospital in Botswana. *African Journal of Primary Health Care and Family Medicine*, 2(1), 1-7.
- Žvelc, G. (2010). Object and subject relations in adulthood-Towards an integrative model of interpersonal relationships. *Psychiatria Danumbia*, *22*(4), 498-508.