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INFLUENCE OF EARLY ATTACHMENT ON COUPLE
RELATIONSHIP FOR CHILD SEXUAL ABUSE
SURVIVORS AND THEIR PARTNERS

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INFLUENCE OF EARLY ATTACHMENT ON THE COUPLE RELATIONSHIP
FOR CHILD SEXUAL ABUSE SURVIVORS AND THEIR PARTNERS

By

Chingju Grace Chen

A DISSERTATION

Submitted to
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ABSTRACT

INFLUENCE OF EARLY ATTACHMENT ON THE COUPLE RELATIONSHIP OF CHILD SEXUAL ABUSE SURVIVORS AND THEIR PARTNERS

By

Chingju Grace Chen

This research investigated the interaction of childhood attachment with parents and adulthood attachment with current relationship partners of adult female child sexual abuse survivors (CSA) using the lens of Attachment Theory (Bowlby, 1982), Human Ecology Theory (Bronfenbrenner, 1979), and Psychosocial Development Theory (Erickson, 1964).

The study design and analysis followed phenomenological qualitative research methods (Moustakas, 1994; Polkinghorne, 1989; Wertz, 2005). Data were collected from six couples using multiple sources: individual interviews, individual diaries, and couple interviews. Data were analyzed through within-couple comparisons and between-couple comparisons. The within-couple comparisons analyzed individual partner's developmental experiences and attachment evolution from childhood to the current developmental stage with his/her parents and current partner. The between-couple comparisons analyzed the patterns observed among the couples.

The research findings showed that the participants had similar developmental experiences to their current partners. The participants' childhood relationships with their parents did have an influence on their current attachment, specifically, the model of self and other. The participants developed their current model of self and other through interaction with their parents, and their parents' responses to their childhood developmental needs and/or significant events. Through this interaction, the participants *coped or copied the interaction* with the individual parents or the parental relationships in the developmental process, which, then, influenced their current model of self and other. In the current relationship, when encountering conflicts that could not have been resolved in their relationships, they reacted with the behaviors copied from their parents or the behaviors developed in childhood that were used to cope with the interactions in the family systems. One of the partners' responses corresponded to his/her model of self, while the other's response corresponded to his/ her model of other.

These findings demonstrated that both female adult survivors and their partners contributed to the challenges in their current relationships. An integrated approach, combining individual and couple therapy with female adult survivors of child sexual abuse and their partners, is needed to provide optimum services for this population.

ACKNOWLEDGEMENTS

To my beloved grandmother who is my secure base and safe haven, and taught me the meaning of attachment and to let me pursue my dreams. She told me that it was okay to fly away to pursue my dreams and she also wanted me to see how big the world was. I will not be where I am today without the love, support, and encouragement from my grandmother.

This project started from my work with my clients who were female survivors of childhood sexual abuse in Taiwan from nine years ago. They allowed me to enter their lives and to witness their growth and change. They showed me their struggles and yet their ability to cope. This project was a collaborative effort with all the participants in this study. Each one of them wanted to share their stories so that others would not have to suffer as they did. Their stories, joys, and struggles continuously highlighted the resiliency of human beings.

The idea for this research project partially came from my interaction with my long-time supervisor in Taiwan, Ms. Lu-Sheng Shu. She refused to confirm my model of self and other in our supervision, and in my interactions with her. She helped me to see that it was possible to have better relationships with others adults even though there were

wounds from childhood that were unforgettable.

This research project would never have come true without my committee chair, Dr. Marsha Carolan. She did not give up on me when the program went through rough times and when I went through struggles in the program. She told me that she would support me with anything I wanted to do in the proposal stage. She provided me not only with a sense of confidence when I doubted the value and purpose of this study, but with the necessary space and guidance when needed.

Dr. Barbara Ames, the Graduate Director, oriented me to adult developmental research from ecological perspectives. When I took an independent study with her, she told me, "More responsibility does not mean more stress. Positive relationships can buffer the stress." This provided me with a key for looking at how positive adult relationships can support adult female CSA survivors' recovery process. I learned from her not only how to be a better researcher, but also how to become a better human being.

Dr. Robert Griffore oriented me to research methodology. I could never forget, in the first year in the program, how he patiently listened to me describing my research ideas and suggested different possible quantitative research strategies. Through those discussions, my abstract ideas gradually became more concrete.

My family and friends in Taiwan provided me with tremendous support and freedom.

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Normally, at this stage of one's life, the expectation from my culture is to take care of aging parents. My father passed away three months before I began my study, but my mother, twin sister Irina, and brother Alex allowed me to fly to the U.S. to start this journey and never once blamed me for not being there to support them during these difficult years. My extended family, grandparents, aunts, and uncles have supported my mother, sister, and brother so that I could concentrate on my study.

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Chapter 1

Introduction

Statement of the Problem

This research investigated adult attachment within couple relationships. Specifically, it addressed couples that had female partners with a history of child sexual abuse (CSA). In the statement that follows, adult development, mental health, and the influence of CSA on development and mental health are discussed.

Adult Development

The Surgeon General (Department of Health and Human Services, 1999) defines adulthood as beginning at age 18 and as a time when careers and relationships develop and achieve stability. Developmental goals at this stage should “focus on productivity and intimacy including pursuit of education, work, leisure, creativity, and personal relationships” (p.18).

Similarly, Erickson (1964) proposed that the important tasks in adulthood are to establish intimate relationships, a family, and a career and to pass on personal experiences to the next generation. Thus, adulthood is seen as a time when individuals are involved and responsible for many different relationships. Bronfenbrenner (1979) described development as a bi-directional interaction process between the individual and his/her

direct and indirect system. An individual in adulthood is not only influenced by macro and micro systems surrounding him/her, but also influences these systems. Since adults are responsible for maintaining a different range of relationships, such as those with children and co-workers, they must function well to fulfill developmental task and relational expectations.

Adult Mental Health

Mental health is crucial to adequate adult functioning. Yet, it is estimated that 5.4% to 7.2% of the adult population (aged 18 and older) suffer from serious mental disorders, with the most prevalence among adults age 30 to 44 years (Kessler, Berglund, Glantz, et al., 2002). Anxiety disorder and mood disorder are the two most common mental disorders in adulthood. In the U.S., one-year prevalence statistics for all anxiety disorders and mood disorders combined together is 23.9% among adults aged 18 to 54 (Kessler et al., 2002). Research has shown that adult women face more stressful life events than men (Machejewski, Prigerson, & Mazure, 2001). Adult women also face higher possibilities of mood and anxiety disorders than men (Kessler et al., 2002). Additionally, anxiety disorder and major depression often co-exist (Dickey, Blumberg, Division of Health Interview Statistics, National Center for Health Statistics, & Center for Disease Control and Prevention, 2002). Approximately 40% of adults who met the criteria for major

depression or anxiety disorder expressed that their life activities were influenced by their mental disorders (Dickey et al., 2002). It is estimated that Medicare payments for mental health approaches 40 billion dollars a year (Finkelstein et al., 2002).

Psychological and social causes interact to produce mental disorders in adult lives. Stressful life events, such as the breakup of intimate romantic relationships or the death of a family member or friend, and past traumatic events, such as child sexual abuse and parental death in childhood are considered the most difficult (Department of Health and Human Services, 1999). When an individual has a past traumatic history, he or she is more vulnerable to mental disorders. Child sexual abuse is one of the most common traumatic experiences that contribute to vulnerability in adulthood (Department of Health and Human Services, 1999).

It is estimated that a minimum of 3.6% of the population between the ages of 18 and 54 have post-traumatic stress disorder (PTSD) (US Department of Health and Human Services, 1999). Adult women are more likely than men to be diagnosed with PTSD (Breslau et al., 1998). CSA has been a main risk factor for depression in adulthood (Weiss, Longhurst, & Mazure, 1999). Following CSA, the risk of developing PTSD symptoms increases 143%, and the risk of developing depression and suicide increases

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150% in the general population (Putnam, 2003). Thus, female adults with CSA history are at high risk for PTSD, anxiety, and depression (Peleikis, Mykletun, & Dahl, 2004).

The Influence of Child Sexual Abuse on Adulthood

Research done in the past decade has revealed that the prevalence of child sexual abuse was between 14.5% to 16.8% for females, and 7.2% to 7.9% for males (Corey & Leslie, 1997; Putnam, 2003). There were approximately 88,000 sexual assault victims reported to law enforcement offices in 2000 (Putnam, 2003). Among these sexual assault victims, 33% of them were aged between 12 and 17, and 34% were under age 12 (Snyder, 2000). That is, more than half of sexual assault victims are under the age of 17 years.

Trauma during youth influences a child's normal development. Although CSA is often undetected and untreated in youth, it affects subsequent development. CSA can influence adult survivors' mental health and individual functioning (Briggs & Joyce, 1997; Neumann, Houskamp, Pollock, & Briere, 1996; Polusny & Follette, 1995), interpersonal relationships (Wilson & James, 1992), couple relationships (DiLillo & Long, 1999; Nelson & Wampler, 2000), and parenting abilities (Banyard, 1997; DiLillo, Tremblay, & Peterson, 2000; Schuetze & Eiden, 2005). For CSA survivors, adulthood presents many challenges, however interpersonal relationships can help survivors meet

their responsibilities by providing stability and safety (Alexander, Teti, & Anderson, 2000).

Statement of the Problem

Generally, treatment with CSA survivors is individually-oriented and focused on the survivors' psychiatric disorder, i.e. depression, anxiety, or interpersonal adjustment (Price, Hilsenroth, Petretic-Jackson, & Bonge, 2001). Previous research exploring treatment effectiveness of individual psychotherapy with CSA adult survivors is limited, but it has been found to be effective in decreasing depression and anxiety symptoms, and the effectiveness was maintained for 3-12 months (please see review by Price et al, 2001). Positive therapeutic alliance with the therapists early on in the treatment process was found to be associated with the treatment outcome (Price et al., 2001). Even though the need to include the partners of female CSA survivors in therapy has begun to get attention in the mental health community (Hughes, 1995; Johnson, 1989; Johnson & Williams-Keeler, 1998; Miehl, 1997), current psychotherapy models still urge the clinician to focus on the survivor's individual process first (Oz, 2001; Reid, Taylor, & Wampler, 1995), or to use couple therapy to deal with interpersonal issues only (Johnson, 2002).

Focusing on the individual adult CSA survivor in treatment limits the recovery process. Focusing on the individual overlooks the possible life transitions that influence couple relationships, denies the strength/resiliency in the individual partners, and stigmatizes the survivors as the cause of problems in their current relationships. In addition, ignoring the partner's individual issues might also cause difficulties for the survivor's treatment process as the partners are in the survivors' current system. As the review done by Price and colleagues notes (2001), alliance with therapists has been important for success treatment outcome. Attachment researchers also suggest that the therapist could be an important new attachment figure for the CSA adult survivor in the treatment process (Alexander, 2003). Including partners in the therapy process can continue the support that both survivors and partners need even after the therapy is terminated.

Purpose of the Research

Due to the importance of the interpersonal relationship, especially the intimate relationship in adulthood for CSA survivors, this qualitative research explored the interaction of adult attachment and childhood attachment style in the couple relationship when the female partner was the survivor of child sexual abuse. The central focus of this research has been attachment style. This research explored the attachment style that each

individual partner brought into the relationship (referred to as childhood attachment style), the attachment style he/she formed in the relationship (referred to as adulthood attachment style), and the interaction between those two attachment styles.

Background of the Problem

A history of trauma can influence vulnerability in adulthood, especially during stressful times. Support can help buffer the stress (Stull, Bowman, & Smerglia, 1994; Ward & Spitze, 1998). Thus, trauma history and systemic aspects are two important factors for adult mental health.

The normal developmental tasks and needs in adulthood require adults to function well in their relationships in order to accomplish their developmental tasks. Support systems and good interpersonal relationships can be protective factors for adults under stressful life events (Stull, Bowman, & Virginia, 1994; Ward & Spitze, 1998), especially for adults who have a trauma history (Feinauer, Callahan, & Hiltom, 1996; Whiffen, Judd, & Aube, 1999). Intimate relationships are one of the important systems for adults because developing and maintaining intimate relationships are key developmental goals in adulthood (Erickson, 1964). Therefore, understanding the interaction in an intimate relationship in adulthood is important for adult mental health issues. One approach to understanding the adult intimate relationship is through Attachment Theory.

Attachment Theory was developed by John Bowlby (1982). According to Bowlby, attachment is the connection between the infant and his/her primary caregiver, or the attachment figure. The infant will seek to be close to his/her attachment figure (proximity maintenance), protest when the attachment figure is not around (separation protest), use the attachment figure as a base to explore the environment (secure base), and turn to the attachment figure for comfort when under stress (safe haven) (Feeney, 1999). According to Attachment Theory, attachment is based on two important mechanisms: the individual's trust with his/her attachment figure (model of other), and the individual's evaluation about his/her worthiness (model of self) (Bartholomew & Shaver, 1998). Research has shown that secure infants display such behaviors as being able to explore their environment freely, confidently, and securely (Ainsworth, Blehar, Waters, & Wall, 1978). Research findings also suggest that there are similarities between adult attachment and childhood attachment (see review from Feeney, 1999). Findings in adult attachment research suggest that individuals seem to find partners who can validate their attachment style learned from childhood (Collins & Read, 1990; Kirkpatrick & Davis, 1994; Treboux, Crowell, & Waters, 2004).

Erickson's Psychosocial Development Theory emphasized the importance of accomplishing developmental tasks in each stage from infant to death (Erickson, 1964).

The failure to accomplish a developmental task from a previous stage might result in developmental difficulties in the next stage. In the infant and toddler stage, the important task here is to establish trust between the infant and his/her primary caregiver, which is similar to Attachment Theory. Failure to establish this trust with the primary caregiver will influence their development in the following stages. In essence, both Psychosocial Development Theory and Attachment Theory emphasize development as an interaction between the environment and the individual, but Erickson went further by specifying that developmental tasks needed to be accomplished throughout the entire lifetime.

Treatment with adult survivors of CSA needs to balance between facilitating normal adult development and healing past traumatic experiences. According to Ecological Theory, individuals are influenced by their many-layered environment as well as having an influence back on it as well. CSA adult survivors' experiences in treatment and outside treatment within this system influence each other (Bacon & Lein, 1996; Chauncey, 1994; Maltas & Shay, 1995; Miller & Sutherland, 1999; Reid et al., 1995; Wiersma, 2003). Therefore, there is a need to involve the survivors' significant others in the therapy process. In addition, Ecological Theory also informs us that human development is a historical process. That is, each individual has his/her own history.

Therefore, the treatment with female CSA survivors needs to be viewed as past influences (CSA sequelae) in the current context (current stressful life events).

Including partners in the therapy process to help deal with interpersonal issues that the survivors are facing is accepted by mental health professionals (Bacon & Lein, 1996; Chauncey, 1994; Firth, 1997; Hughes, 1995; Maltas & Shay, 1995; Miller & Sutherland, 1999; Reid et al., 1995; Wiersma, 2003). Individual therapy with the CSA survivor only has its merits, but is contrary to developmental needs in adulthood. Moreover, research has shown that partners of CSA adult survivors also experience difficulties when CSA adult survivors go through treatment (Bacon & Lein, 1996; Miller & Sutherland, 1999; Nelson & Wampler, 2000; Reid, Wampler, & Taylor, 1996). The partners seem to feel confused about the adult survivors' reactions after therapy, do not know how to provide support to the CSA adult survivors, and feel guilty when they need to request support from the CSA adult survivors.

Since CSA adult survivors' past and current ecology are taken into consideration when they undergo therapy, the partners' past and current ecology also needs to be taken into consideration because the partner who brought his history into the relationship is in the survivors' current system. As Ecological Theory suggests, the relationship is

bi-directional. The survivors and their partners influence each other in their daily life and the therapy process, both individually and as a couple.

Previous research and treatment models primarily place the partner in the auxiliary role when the female partner is the survivor of CSA. This research intends to put both partners in an equal place to explore their contribution to the current adult attachment interaction and its relationship to their past individual experiences. Analyzing how the individual attachment style is maintained in the couple interaction will not only help the treatment of adult CSA survivors but also aid in further understanding adult mental health issues from developmental and ecological perspectives.

Theoretical Framework for this Research

Ecological Theory

Bronfenbrenner's Ecological Theory (1979) provides a framework for understanding the relationship between an individual and his/her systems. The model places the developing person in the center of a five-structure context: the microsystem, the mesosystem, the exosystem, the macrosystem, and the chronosystem (which will be defined in the next section). Primary to this theory is the concept of interaction within and between the structures, where the individual is influenced and influences these systems as he or she moves through the developmental process (Bronfenbrenner, 1979).

The microsystem is a person's immediate environment. Family, work, and school are examples of the microsystems in which a person lives. The mesosystem is the interaction and interrelations between different microsystems. The exosystem defines the larger social system. The person does not function in this context directly, but will still be influenced by it. The macrosystem is the larger society/cultural system in which a person lives. Even though there is no specific framework, the principles in the macrosystem define the interaction in the other three contexts. These four systems influence each other and have direct or indirect influence on the developing individual. The chronosystem is the interaction between temporal and environmental factors, reflecting the patterns of certain beliefs or values at certain periods of time in the individual's history. In other words, the chronosystem reflects the sociocultural contexts in which a person lives (Bronfenbrenner, 1979).

Attachment Theory

Bowlby's Attachment Theory (1982) provides the framework for understanding the individual's relationship with his/her significant others in the developmental process. According to Attachment Theory, human beings have biological reasons for becoming attached to others. Through the interaction with his/her attachment figure, especially under stressful situations, an individual develops his/her sense of self from the attachment

figure's responses. If the attachment figure is responsive and attending to the needs of the individual, the individual may gradually come to believe that he/she is a lovable and worthy person. This individual may also come to believe that the attachment figure will be there when needed. This belief about him/herself and the attachment figure becomes the "internal working model" for the individual in his/her interpersonal relationships with other people (Bowlby, 1982).

Adult attachment research has evolved tremendously in the past decades. There are two approaches to measure adult attachment (Bartholomew & Shaver, 1998): One focuses on the adult's attachment style in its representations of childhood attachment (Main, Kaplan, & Cassidy, 1985), while the other approach focuses on adult romantic attachment (Hazan & Shaver, 1987). According to Bartholomew (1990), there are differences in these two approaches due to their research focus and measurement perspective. However, the common characteristic they share is that both theories assess an adult individual's perspective regarding the importance of him/her to the attachment figure, referring to the "model of self" and "model of other." The "model of self" assesses how the individual views him/herself under stressful situations, i.e. whether the individual believes he/she is worthy enough to request help (Bartholomew, 1990). The "model of other" assesses the individual's belief about his/her attachment figure, i.e.

whether the individual believes his/her attachment figure will be there when needed. The “Adult Attachment Interview” developed by Main and her colleagues (Main et al., 1985) assesses the adult individual’s “model of self” and “model of other” with his/her childhood attachment figure. That is, they assessed the adults' mental representations of their own childhood attachment with their attachment figures. Hazen and Shaver (1987) have assessed the adult individual’s “model of self” and “model of other” with his/her current intimate partner using self-report methods. Bartholomew (1990) further suggested that there are four attachment styles based on the interaction of negative and positive “model of self” and “model of other.” These styles are the secure, dismissing-avoidant, fearful avoidant, and preoccupied.

Research done on adult attachment has shown that adult and childhood attachment are similar (Cozzarelli, Karafa, Collins, & Tagler, 2003; Fraley & Brumbaugh, 2004; Klohnen & Bera, 1998), and individuals appear to find partners to validate their own attachment styles (Collins & Read, 1990; Kirkpatrick & Davis, 1994; Treboux et al., 2004). For CSA adult survivors, research results have suggested that they tend to have fearful avoidant attachment style (Alexander et al., 1998), which means they have both a negative view about themselves and a negative view about their attachment figures.

The influence from CSA on adult survivors' intimate relationships and the research results on CSA survivors' attachment styles correspond with each other. The influences of childhood sexual abuse trauma on the couple's relationship increases issues of trust, boundary, and effect on the sexual relationship (Cole & Putnam, 1992). Mainly, the survivor feels betrayed/ abandoned by her family of origin and by the perpetrator. The feeling of betrayal/abandonment makes her seek assurance from her partner. However, lacking feelings of trust also stops her from seeking this necessary assurance and causes a sense of ambiguity in the couple's intimacy and communication (Johnson, 1989; Johnson & Williams-Keeler, 1998). This can also influence the survivor's emotional involvement with her partner (Serafin, 1996). Survivors often show a negative view of themselves and other people in adult romantic relationships.

Evidence suggests that adult attachment is a mediator between CSA experiences and later psychological adjustment (Roche, Runtz, & Hunter, 1999). A few research studies have shown that good partner relationships can serve as a buffer for decreasing female CSA survivors' depression (Feinauer et al., 1996; Whiffen et al., 1999). These research results all suggest the importance of adult intimate relationships for CSA survivors' mental health and individual function in adulthood. They also correspond to the perspectives offered by Ecological Theory and Psychosocial Development Theory on

adult development, emphasizing the importance of relationship and support in the system to an individual's mental health. The relationship between CSA adult survivors and their attachment style as well as their adult intimate relationship will be discussed more in the literature review section.

Psychosocial Development

According to Erickson's Psychosocial Development Theory (1964), at each developmental stage there are certain tasks to accomplish. Failure to accomplish these tasks at each stage will cause a crisis for the individual and success in accomplishing them will provide a foundation for the next stage. These important tasks are: 1) to establish intimate relationships; 2) begin/establish a family; 3) have a career; and 4) pass on personal experiences to the next generation. Incomplete tasks in any of the previous stages might affect development in adulthood and might also influence the development of the next stage.

Several researchers have suggested using a developmental perspective as a theoretical framework in research and treatment with CSA survivors (Anderson & Alexander, 2005; Cole & Putnam, 1992). CSA is viewed as a stressful life event in the developmental process (Anderson & Alexander, 2005; Cole & Putnam, 1992). How a child responds to the incest (stressful life event) and whether or not she successfully

achieves subsequent developmental tasks, may decide the child's psychological vulnerability. The occurrence of CSA at different ages would influence the victims differently due to different developmental needs at different stages (Anderson & Alexander, 2005; Cole & Putnam, 1992). Even though research has not yet established the direct cause and effect relationship due to complex contextual factors in CSA issues (Anderson & Alexander, 2005), different CSA sequelae would have different effects at different developmental stages. On the other hand, current developmental tasks might also evoke unresolved CSA sequelae (Gagnon & Hersen, 2000).

As Psychosocial Developmental Theory suggests, different developmental stages have different tasks, and failure to achieve developmental tasks at certain stages will influence subsequent development. Past CSA sequelae might have different effects depending on the survivors' developmental stages at the time that CSA happened, and current adult stages might also evoke different CSA sequelae from the past. Therefore, in terms of assessment and treatment, clinicians need to take individual developmental history with CSA onset age into consideration. Knowledge of unfinished tasks from previous stages, due to CSA, provides therapists with a chance to assess the survivors' "sense of self, competence in the intellectual and social domain, self-regulatory and coping capacities, and the quality of interpersonal relationships" (Cole & Putnam, 1992,

p. 180). During the developmental stage when adult CSA survivors seek help also provides therapists clues for assessing unresolved CSA sequelae (Gagnon & Hersen, 2000).

The nature of CSA is that the perpetrator uses his/her power to violate the child's physical and emotional boundaries. The coerced sexual relationship with the perpetrator also can keep or push the victim into the wrong developmental stage. Children may be confused and overwhelmed regarding boundaries and their relationship with other people (Cole & Putnam, 1992), causing isolation from their peers and difficulties with attachment and trust. However, forming trust and attachment, self-identity, and interpersonal relationships are important tasks in childhood. Therefore, CSA experiences might take the children off their normal developmental trajectories, causing difficulties in later development. The influences of CSA on child and adult development will be discussed in detail in the literature review section.

Adult attachment research has shown that it is rare for secure individuals to form relationships with insecure partners (Kirkpatrick & Davis, 1994). However, the partner's developmental history and how it might influence the relationship is not explored in the literature. Whether or not the partner suffered emotional injuries or obstacles in the developmental process is unknown as most of the research focuses on the female CSA

survivor. Thus, it is important to understand the partners of female CSA survivors' developmental histories.

Theoretical Map and Conceptual Model

This research investigation was based on psychosocial development occurring within an ecological framework for exploring the attachment relationship. A theoretical map outlines the structure and relationships of the guiding theories. The conceptual model provides the research focus.

Theoretical Map

The theoretical map on page 25 specifies the relationship of CSA issues within Bronfenbrenner's Ecological Theory System. The past and current ecosystems reflect the concepts of chronosystem from Ecology Theory. The two past ecosystems on the left side represent a female CSA adult survivor and her partner's childhood ecology. The current ecosystem on the right side represents this CSA survivor and her partner's joint system. In the center of the three ecosystems are the individual's developmental tasks and needs at different developmental stages. The guiding theory is Erickson's Psychosocial Development Theory. In the center of each of the child victim's ecosystem, due to child sexual abuse trauma, the child victim carries her own trauma experiences with her, and these experiences interact with her developmental tasks/needs. For the partner's

childhood ecosystem, he might carry emotional injuries from his interaction with his attachment figure and environment. However, the research has not explored the developmental history of the survivors' partners.

Moving outward, the second structure of the three ecosystems is the family system, which specifies the individual's interaction with his/her primary attachment figure. The guiding theory is the Attachment Theory. In this ecosystem, even though each individual is surrounded by different relationships, the research focuses on the attachment between the female CSA adult survivor and her partner. In the past ecosystem, it would be the child victim and child partner's relationship with his/her primary attachment figure.

The third structure, which is environmental support and stress, is the extra-familial level of influences to the family system and individual development, which corresponds to the Exosystem in Bronfenbrenner's Ecological Theory. In the child victim's ecosystem, child sexual abuse is specified in this level. Whether child sexual abuse was discovered or not, and how the child victim's family and other extra-familial systems handled the issues would have an influence on the child victim's development.

The fourth layer or structure is the macrosystem influence. This represents the expectations from the individual and family's culture or environment. The individual is living in the ecological system, and his/her healthy development is based on the

interaction of different systems directly or indirectly. The individual will influence and also be influenced by his/her ecology in the past or present.

The CSA survivor and her partner's childhood ecology will decide whether they successfully finish their developmental tasks and influence their attachment style. The past ecology will influence the present ecology because the CSA survivor and her partner will bring their attachment style and fulfilled/unfulfilled developmental tasks into the shared ecological system. Their interactions and the support they receive from each other and other microsystems will influence their individual developmental needs, interactions, and mental health.

The support and stress from extra-familial systems and macrosystems has also shaped CSA survivors and their partners' individual and attachment development. Although the attachment is formed with the primary attachment figure in the family system, this research investigation focused on the individual and family level of influence on CSA survivors and their partners to explore both individual partners' perspectives regarding their attachment relationship with attachment figures in their past and current family system. The detailed explanation regarding the conceptual model of this research investigation will be described in the following section.

Conceptual Model

The conceptual model on page 26 outlines the research interests corresponding with research questions listed on page 24. As we already know, Ecological Theory, Attachment Theory, and Psychosocial Development Theory guided the formation of this research project, and the primary research focus is to understand how the couple's daily interaction is influenced and validated by the individual partners' childhood attachment styles, and how that further influences the individual partners' view about themselves and each other. In other words, the purpose of this research has been to explore how the past attachment style and view about self is validated by the current adult attachment interaction. The attachment style has been explored from the ecological and developmental perspectives because individual developmental outcome and current attachment style is the continuous interaction between the individual and his/her ecology (Sroufe, Carlson, Levy, & Egeland, 1999).

The female CSA adult survivor and her partner both bring their childhood attachment style into the relationship. The childhood attachment style is the result of a web of interconnected factors from this individual's ecology and developmental needs (Sroufe et al., 1999), including the individual's interaction with his/her attachment figure, experiences from possible stressful life events in the family of origin, the individual's fulfillment of his/her developmental tasks, and individual emotional injuries/CSA trauma

experiences. The female CSA adult survivor and her partner's interaction will be influenced by the attachment styles learned in childhood. Along with their current individual developmental needs, the couple creates their adult attachment. Their experiences in this adult attachment relationship either create a new "model of self" and "model of other," or validate their childhood "model of self" and "model of other." The self concepts involve the model of self and the model of others, which is the individual partner's view about self and his/her partner.

This research compared the adult attachment style learned from childhood and adult attachment style between partners, which are two different concepts as described earlier (Bartholomew & Shaver, 1998). In order to be consistent, instead of using four categories of attachment styles, this research will use the "model of self" and "model of other" as proposed by Bartholomew (1990) and described in the guiding theory section.

Research Questions

The focus of this research was on couples in which the female partner is a CSA survivor. The two primary research questions are:

1. How does adult attachment in the couple relationship influence the couple relationship?

2. How does childhood attachment with the primary caregiver influence the couple relationship?

The research focused on the following areas of inquiry:

1. Important developmental events and milestones for each partner
2. The influence of childhood attachment styles on individual partners' views about themselves (model of self) and each other (model of other)
3. The influence of adult attachment styles on the female CSA survivor and her partner's view about themselves (model of self) and each other (model of other)
4. The influence of childhood attachment styles on the interaction between a female adult CSA survivor and her partner, especially during unresolved conflicts

The following chapter reviews the literature related to the theoretical and conceptual maps, with a specific focus on the areas of inquiry raised in the above research questions.

Figure 1-1. Theoretical Map

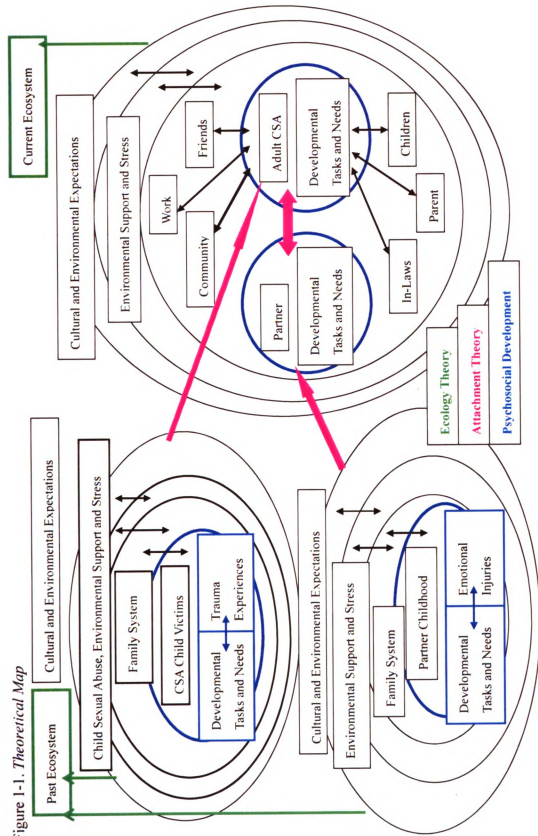
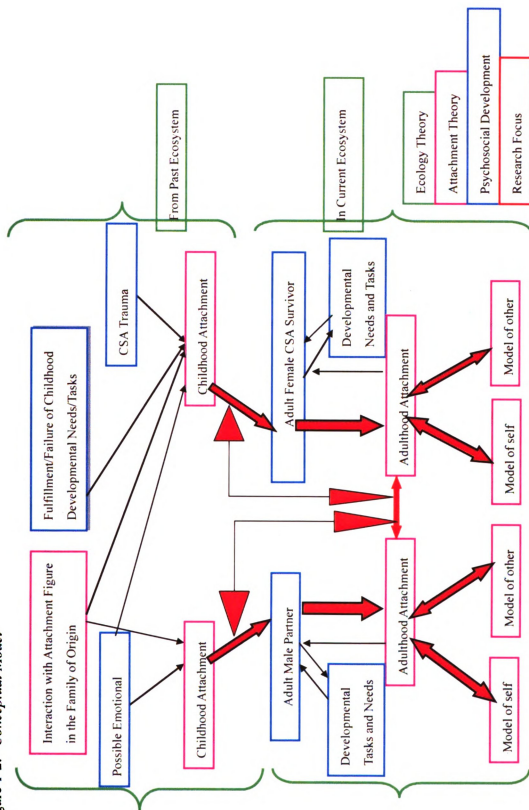


Figure 1-2. *Conceptual Model*



Chapter 2

Literature Review

Introduction

This research investigation applied the theory of human ecology (Bronfenbrenner, 1979) to adult development to understand how an adult's current relationship is influenced by the attachment with his/her parents. Erickson's Psychosocial Development Theory (Erickson, 1964) was applied in this study to understand individual development from childhood, and how the developmental process is influenced by the individual's ecology from childhood. The family system in childhood and adulthood provides the foundation for an individuals' growth. Bowlby's Attachment Theory (Bowlby, 1982) was applied in this study to understand the individual's relationship with a primary attachment figure in both childhood and adulthood.

Women with CSA history are seen as more prone to mental health disorders (Department of Health and Human Services, 1999). When women with CSA history are under stress, they are more vulnerable to mental disorders, which, in turn, cause difficulties for their system, unless they have other supports in their ecology to buffer the stress (Stull et al., 1994; Ward & Spitze, 1998). Treatment for CSA female survivors is generally on an individual or systems-oriented basis. (Maddock & Larson, 2004). On the

one hand, treating CSA female survivors with individual therapy provides survivors time and space to heal on their own terms. It also protects their partners from secondary trauma. On the other hand, it might fail to include the influences from survivors' other systems in the treatment process. A systemic therapy approach focuses on the interaction between survivors and their partners. It provides the survivors an opportunity to work on their interpersonal issues and focus on present problems. However, the survivors might not have time or space to deal with past traumatic experiences.

This research investigation bridged the differences between individual and system-oriented approaches. According to Maddock and Larson (2004), doing therapy on an ecological basis means being “morally responsible for the survival and well-being of all parts of an ecosystem” (p.369). By understanding past and current attachment styles between survivors and their partners, this research investigation intended to pay close attention to the well-being of both partners in the relationship.

Research studies using Attachment Theory as a foundation to understand human development and its implication are numerous, and the literature review is not all inclusive. Due to the nature of this particular study, the literature review here focuses on attachment and CSA from developmental perspectives, reviewing attachment development from childhood to adulthood, and the influences of CSA on individual and

attachment development, on adult attachment, and on adult couple relationships.

Overview of Attachment Theory

Attachment Theory in Childhood: Bowlby and Ainsworth

Attachment Theory was developed by British Psychiatrist John Bowlby, who later collaborated with Mary Ainsworth. Ainsworth's "Strange Situation" experiment contributed to the development of this theory (Ainsworth, et al, 1978).

Both Bowlby and Ainsworth focused on the relationship between an infant and his/her primary caregiver, or attachment figure. According to Bowlby (1982), attachment between infant and his/her attachment figure is a "biological imprint" due to the need for survival. Infants are fragile, and only when adults can provide protection and care can they survive. The three core concepts in Attachment Theory are: proximity maintenance, secure base, and safe haven (Feeney, 1999).

Proximity maintenance means that an infant prefers to be close to his/her attachment figure. When his/her attachment figure leaves, the infant will protest and display behaviors like crying, which is called separation protest. The attachment figure serves the function of secure base." The infant will use the attachment figure as a base for exploring the environment and engaging in nonattachment behaviors. When infants encounter distress, they will look for the attachment figure for comfort, which is called

“safe haven.”

The attachment bond and behaviors are shown when an infant is under stressful situations. If the attachment figure is able to be sensitive to the infant’s needs, and maintain proximity with the infant to provide a secure base and comfort to which the infant can return, he/she will develop a secure attachment with the attachment figure. The infant will believe that the attachment figure will be available when he/she is needed, and he/she is a lovable person for the attachment figure. The infant develops his/her “internal working model” based on the interaction with the attachment figure, and will use this internal working model in other relationships. That is, the attachment relationship that an infant develops with his/her attachment figure will influence his/her later interpersonal relationships (Bowlby, 1982).

Mary Ainsworth’s “Strange Situation” experiment in the laboratory and home observations regarding the mother-child interaction further clarified the infants’ behavior and attachment bond with their mothers. The “Strange Situation” observed the infants and their mothers in eight different episodes (Ainsworth et al., 1978). First, the mother and the child were introduced to the experiment room and left alone there (Episode 1). The mother did not participate in any of the infant’s exploration at this time (Episode 2). Then, the first separation episode occurred when a stranger entered the room, conversed with

the mother, approached the infant, and the mother left (Episode 3). The infant and the stranger were left in the room and the stranger accommodated his/her behaviors to the infant's (Episode 4). The mother came in to reunite with the infant, comforted the infant, and left again (Episode 5). The infant was left alone in the room for a period of time (Episode 6). The stranger came into the room again. He/she approached and accommodated his/her behaviors to the infant's (Episode 7). The mother came back to reunite with the infant and the stranger left. Three different attachment styles were found in the infant: the secure, anxious-avoidance, and anxious-ambivalence, based on the infants' responses in the eight episodes in the Strange Situation experiment (Ainsworth et al., 1978).

Adult Attachment Theory

Based on Ainsworth's three attachment types, researchers have continued to explore the attachment style beyond infancy. There are two research programs evaluating adult attachment. Main and her colleagues (1985) investigated adults' "states of mind," the representation of their childhood attachment with attachment figures. The mothers were interviewed by using the Adult Attachment Style Interview (George, Kaplan, & Main, 1985; Main & Goldwyn, 1994) to determine the attachment styles they had formed in childhood. The researchers also observed these mothers' babies and found that those

children demonstrated similar attachment styles as their mothers. They categorized the adult attachment styles into three different types which were similar to Ainsworth's three attachment types: secure, preoccupied (corresponding to childhood ambivalent group), and dismissing (corresponding to childhood avoidant group) (Hessen, 1999).

Hazen and Shaver (1987) investigated the adult attachment style in romantic relationships. They found that in romantic relationships, adults demonstrated similar patterns to those of an infant, i.e. seeking to be close to the romantic partners (proximity maintenance) or to be comforted by romantic partners when under stress (secure base). Their self-report questionnaire was developed based on Ainsworth's description of three infant's attachment styles, which are: secure, avoidant (corresponding to childhood avoidant group), and anxious-ambivalent (corresponding to childhood ambivalent group). They found a similar percentage distribution in adult population (Hazen & Shaver, 1987) as the child population.

Bartholomew (1990) proposed a four category attachment style for understanding adult attachment. According to Bartholomew (1990), Main and her colleagues' three attachment styles and Hazen and Shaver's three attachment styles were different from each other due to their measurement methods and target population. The former group of researchers used interview and observation measurements to understand adult attachment

formed from family of origin. The latter group of researchers used self-report measurements for understanding adult romantic attachment style.

Even though the two groups of researchers divided adult attachment into three different categories based on Ainsworth's infant attachment style, there were differences among these two different programs in their definition on avoidant attachment. While those participants categorized as avoidant attachment in Main's group, denied subjective distress and the needs for attachment, the participants in Hazen and Shaver's group reported high levels of stress and the fear of attachment.

According to Bartholomew (1990), Attachment Theory is based on the interaction of individuals' views about self and the attachment figure. The individual viewed whether he/she was a lovable person (model of self) based on the responses from the attachment figure (model of other). The individual's attachment style was based on the interaction between this individual's positive/negative views about him/herself to his/her attachment figure's positive/negative responses to him/her when this individual was under stress.

Based on this two-dimensional model, Bartholomew (1990) proposed that attachment can be categorized into four different types: 1) individuals with secure attachment styles have positive views about themselves and believe that their attachment figures will provide a secure base and safe haven when they are under stress; 2)

individuals with a preoccupied attachment style have a positive model of others but a negative model of self. Because of the negative view about self, individuals with preoccupied attachment styles will seek validation and acceptance from other people; 3) individuals with a dismissing attachment style have a negative model of other but a positive model of self. They will rely on themselves to provide a sense of security and, thus, maintain a sense of self-worth. They also have a negative view about others and do not trust other people's ability to fulfill their expectations in order to maintain their own sense of self-worth; 4) individuals with fearful attachment styles have a negative view about both self and others. They seek validation and acceptance from other people but also avoid close relationships because their fear of rejection validates their sense of worthlessness. Further studies (Bartholomew & Horowitz, 1991; Griffin & Bartholomew, 1994) confirmed validity and reliability of this two-dimensional four-category attachment style model (see review from Bartholomew & Shaver, 1998).

Attachment and Development

Attachment Development and Psychosocial Development Theory

Attachment Theory emphasizes the importance of maternal sensitivity in infancy as it is the foundation of the internal working model in children's later development. Development is the outcome of early attachment interacting with later

environment (Sroufe et al., 1999).

Erickson's Theory of Psychosocial Development divided human development into eight stages. Each stage had its own developmental tasks. Successful achievement of a developmental task in one stage became the foundation for the next stage. Failure to accomplish the developmental tasks in the previous stage might result in unhealthy development or difficulties in development in the following stages.

Attachment Theory and Psychosocial Development Theory both emphasize the importance of early relationship with the primary caregiver, the influences of early relationship with the primary caregiver on development, and the interaction of development and environment on the developmental outcome.

Early Childhood

Psychosocial development in early childhood. In early childhood, from birth to six, children go through three different stages: trust vs. mistrust, autonomy vs. shame and doubt, and initiative vs. guilt (Erickson, 1964). The development of trust with the primary caregiver provides infants a foundation for autonomy development and initiation to explore the world from various stages. Based on Psychosocial Developmental Theory, failure to develop trust in infancy results in mistrust of the self and world, and might further influence children's ability to develop autonomy from the primary caregiver and

the family. Failure to develop autonomy might influence children's ability to initiate exploration in a new environment, such as school.

Erickson's Psychosocial Development Theory corresponds with Attachment Theory in early childhood in its emphasis on building trust/attachment between infants and primary caregivers. Trust/secure attachment between infants and primary caregivers provides infants with a sense of worthiness about self in relation to other people and the environment. With the assistance of physical development, the infant with enough trust in self and/or secure attachment can assert independency and autonomy by exploring the environment. Even though children's primary social setting is still the family, they start to extend their relationship into school with peers and other adults.

Attachment development in early childhood. In early childhood, the family environment is children's primary social setting. Secure attachment formed with a primary caregiver serves as a foundation to later development. Interaction between the child and his/her mother in infancy and early childhood has been the focus of previous attachment research to understand the influence of maternal caregiving on attachment development (Greensberg, 1999). Empirical evidence suggests that secure attachment with the mother in infancy and early childhood is related to better interpersonal function with other adults and children, better self emotional regulation, and more behavioral

compliance with parents. On the other hand, insecure attachment in infancy and early childhood is related to lower interpersonal function, poor self-control behaviors, and symptoms of anger (see reviews from Greenberg, 1999).

Insecure attachment with mothers is associated with behavior problems in early childhood (Anan & Barnett, 1999; Marchand & Hock, 1998; McCartney et al., 2004).

However, previous studies on which insecure attachment style predicts which developmental outcome yield inconsistent results (Burgess et al., 2003; Lyons-Ruth et al., 1997). The inconclusive results of attachment style and externalizing/internalizing problems might be the result of the researchers' target population (clinical vs. nonclinical or high risk vs. low-risk), data collection methods (self-report vs. observational), and/or research method (cross-sectional vs. longitudinal). However, there is a consensus that early insecure attachment style predicting later developmental outcome is only found in high risk populations (please see review from McCartney et al. 2004, and Belsky and Fearon, 2002b).

The internal working model is a foundation for later social and emotional development, but is also subject to change based on the interaction of the children, caregiver, and social context (Sroufe et al., 1999). The caregiver sensitivity to the needs of infants/toddlers is also influenced by the context, such as maternal depression or social

support (Belsky & Fearon, 2002b). Attachment with a primary caregiver and attachment style might change due to the changes of the context. However, as Belsky and Fearon (2002b) pointed out, secure attachments function as a protective factor when children go through stressful life events. Avoidant attached children are at most risk related to contextual changes, which results in adverse developmental outcome in later life such as poor social-emotional and language development. As children go into later stages of development, childhood attachment, interaction with parents, and interaction with other people outside the family setting continue to influence attachment development and children's socio-emotional development.

Middle Childhood

Psychosocial development in middle childhood. Erickson believed that the developmental task for elementary school aged children was industry vs. inferiority. At this stage, as children start school, their ecology generally expands. The interpersonal relationships in middle childhood also are more complicated. The school environment gradually becomes as important as the family environment as children spend more time in school. Children learn to relate to peers, teachers, and other adults in the school and to function outside family settings. As children gradually spend more time in the settings outside the family, they have to utilize developmental tasks they learned in previous

stages to achieve the developmental tasks of the stage they are on. For example, children have to explore new environments and new interpersonal relationships by themselves without parents around. Or, they have to initiate homework or how to master new knowledge. Children, who are trusting and autonomous, and possess initiative, can master the new tasks in order to move on to the stage of industrious.

Attachment development in middle childhood. Attachment research on the internal working model is expanded after children's physical, cognitive, and emotional development is more mature, and after children enter more complex social contexts. Attachment relationships and the internal working model developed in infancy are under examination in peer relationships, in school settings, and in mental health in middle and late childhood and adolescence. In middle and late childhood, parents' availability and willingness to communicate with children, encouragement of children's development of autonomy, and warm attitude in their involvement in their children's life are keys for secure attachment development (Allen & Land, 1999; Karavasilis, Doyle, & Markiewicz, 2003; Kerns et al., 2001). The quality of children's peer relationships is directly related to their relationship with their parents. Children with secure attachments have better quality peer relationships and select their peers according to their attachment styles (Hodges, Finnegan, & Perry, 1999; Lieberman et al., 1999). They also have better interpersonal

relationships with adults and peers, and fewer internalized or externalized difficulties in schools (Bohlin et al., 2000; Hodges et al., 1999; Lieberman et al., 1999; Rubin et al., 2004). Better adjustment in school settings will help them to achieve an industry development task at this stage.

Moss and colleagues (1998, 2004) found that parent-child interaction at age six predicted children's development at age eight. Maternal self-rated low competence, as related to depression and health problems was found related to children with ambivalence attachment style (Moss et al., 1998). Difficult family climates, such as marital discord, death in the family, parental hospitalization, were related to disorganized attachment style in children (Moss, Cyr, & Dubois-Comtois, 2004).

These research findings showed the interaction of different ecologies in children's development in middle childhood. Even though children gradually have more contacts outside the family, the secure attachment with parents still provides a protective factor for children under stressful life events (Graham & Easterbrooks, 2000). Insecure attachment with mothers was related to stressful life events in the family (Moss et al., 2004; Moss et al., 1998). Similar to early childhood, attachment and developmental outcome is the interaction of different ecologies in children's lives.

Adolescence

Psychosocial development in adolescence. According to Erickson, the important task in adolescence is identity development. Adolescents explore the question of “Who Am I?” Compared to middle childhood, adolescents move out of family settings and spend more time outside families with peers and other adults. Through more interaction with people outside the family, they explore their place in the world before entering the adulthood.

Adolescence attachment development. Research studies done in middle and late childhood have focused more on comparing children’s peer relationships and behavioral presentation in school settings with their relationships with an attachment figure at home. In the adolescent stage, peer and school aspects were still the focus, but mental health issues and the relationship between attachment and mental health issues were also explored. Gender, ethnic/minority background, and family social economic status have significant influences on the development of mental disorders (Adam, Sheldon-Keller, & West, 1996; Allen, Hauser, & Borman-Spurrell, 1996; Allen, Moore, Kuperminc, & Bell, 1998; Rosenstein & Horowitz, 1996; Sund & Wichstrom, 2002). Children’s and adolescents’ psychosocial functions are related to attachment security, family function, children’s individual characteristics, and parenting. As Greensberg (1999) suggested, attachment itself cannot predict children’s maladaptation. Insecure attachment, ineffective

parenting, high family adversity, and atypical child characteristics are all important factors contributing to the results of children or adolescents' maladaptation.

Childhood Attachment Continuity vs. Discontinuity

According to Attachment Theory, the internal working model is the basis for individuals' interpersonal relationships with other people throughout the life course. Based on Ainsworth's Strange Situation design, researchers explored whether and for how long the attachment style would last. Results showed that the attachment style seems to be very stable up to the age of six (Fraley 2002; Scharefe, 2003). Fraley's meta-analysis regarding attachment stability from infancy to early adulthood showed moderate correlation between infant and early adulthood attachment styles. Other research studies that examined attachment style from infant to adolescence (Hamilton, 2000) or adulthood (Waters, Merrick, Treboux, Crowell, & Albersheim, 2000), found similar results.

If the attachment style in infancy and early adulthood is moderately correlated (mean correlation of .35 from Fraley's meta-analysis in 2002), there are other variables influencing attachment style change. Parental sensitivity, especially maternal sensitivity and responses, is considered the most important variable for developing secure attachment between the mother and the infant (Atkinson et al., 2000; Belsky & Fearon, 2002b). Stressful life events is also identified as the main reason for attachment style

change from secure to insecure attachment (Belsky & Fearon, 2002b). Stressful life events could be normal family life transitions such as new born siblings, or experiences such as child sexual abuse. Stressful life events that have been identified as influencing infant attachment security change are loss of parents in childhood (Klohn & Bera, 1998; Waters et al., 2000), marital discord (including parental divorce) (Fraley 2002; Lewis, Feiring, & Rosenthal, 2000; Moss et al., 2004), child abuse (including physical, sexual, and emotional abuse) (Fraley 2002; Waters et al., 2000; Weinfield, Sroufe, & Egeland, 2000), parental psychiatric disorder (including maternal depression or parental substance abuse) (Hamilton, 2000; McCartney et al., 2004; Waters et al., 2000), and prolonged separation of the parent and child (Hamilton, 2000).

Family and environmental factors are also important factors in influencing attachment style (Belsky, 1996; Graham & Easterbrooks, 2000; Lewis et al., 2000; Moss et al., 2004). These factors may include financial resources (Belsky & Fearon, 2002b; Graham & Easterbrooks, 2000; Moss et al., 2004) and family climates ((Moss et al., 2004). Belsky (Belsky, 1996, 1999) suggested that parental personality traits, maternal care/sensitivity (Allen et al., 2004; Belsky & Fearon, 2002b), infant temperament (Bohlin et al., 2005; Burgess et al., 2003), parental marital relationship (Moss et al., 2004), and family support (Belsky & Fearon, 2002b) are all important factors contributing to secure

attachment development. The more resources a family has, the more likely children develop secure attachments.

These research studies suggest that the change of secure attachment style in infancy to insecure attachment style in adolescence or early adulthood resulted from stressful events in childhood and adolescence. However, they also found that children with insecure attachment styles in infancy were unlikely to change their attachment style to secure type in adulthood (Hamilton, 2000; Waters et al., 2000). Two important factors in understanding the changes of attachment style are the consistency in attachment figure's behaviors and how the infant experienced the attachment figure's behaviors (Hamilton, 2000; Waters et al., 2000). Infants who experienced negative interaction with the attachment figures formed an insecure attachment style. The more negative life events they experienced, the more unlikely they changed their attachment style as their family environments reinforced their attachment styles over time. In the meantime, babies with secure attachment style also were more likely to change into insecure attachment style if they experienced more negative stressful life events in childhood and adolescence. However, secure attachment formed in earlier stages secured protective factors for children in later development (Graham & Easterbrooks, 2000; Gullone et al., 2006; Volling et al., 2002)

Adulthood Attachment Continuity vs. Discontinuity

Attachment style in adulthood is more stable than attachment patterns in childhood and adolescence. Several studies and meta-analysis show that the estimated stability coefficient of adult attachment patterns ranged from .54 to .58 (Cozzarelli, Karafa, Collins, & Tagler, 2003; Fraley & Brumbaugh, 2004; Klohnen & Bera, 1998), higher than the stability coefficient in childhood. Klohnen & Bera's (1998) 31-year longitudinal study followed the changes of attachment style in 100 women and compared the differences between women with secure and avoidant attachment style, starting from age 21. Compared to the women with secure attachment style at the age of 21, women with avoidant attachment style showed less commitment to getting married and starting a family. At 27, they were less likely to be married (68% were married compared to 86% of secured women were married). At 43, less than 75% were married, and 50% were divorced. Data collected at age 21 showed that, compared to women with secure attachment style, women with avoidant attachment style were more likely to experience loss of parents and scored higher in the parent-child conflict index in childhood.

In childhood, stressful life events influence attachment style changes, especially for children who are in the secure attachment group originally. In adulthood, empirical evidence suggests that attachment styles do change throughout life. However, individuals

with secure attachment styles usually stay secure even when they undergo stressful life transition or events (Davila, Burge, & Hammen, 1997). Individuals who stay insecure or change attachment styles between secure and insecure were more likely to have personal or family history of mental illness, parental discord, or history of abuse (Cozzarelli et al., 2003; Davila et al., 1997; Davila & Cobb, 2003; Davila, Karney, & Bradbury, 1999). Even though current stressful life events might cause attachment style change, the previous histories were better predictors of adult attachment style changes (Davila et al., 1997). Attachment style may change based on current life situation, but there is a “baseline” attachment behavior (Cozzarelli et al., 2003). Individuals who are more easily to change their attachment styles may have personal or family history making them return to previous attachment baseline (Cozzarelli et al., 2003; Davila et al., 1997; Davila & Cobb, 2003; Davila, Karney, & Bradbury, 1999; Treboux et al., 2004). Davila and Cobb (2003) suggested that previous individual and family histories might hinder individuals in developing clear model of self and other, causing their attachment style to fluctuate when they were under current stressful life events, especially when they interpreted these events associated with interpersonal loss (Davila & Sargent, 2003).

Adult Attachment and the Couple Relationship

Psychosocial development in adulthood. Intimacy and generativity (defined as a

concern for establishing and guiding the next generation) are important developmental tasks of adulthood. As discussed previously, securely attached adolescents can balance autonomy and a sense of relatedness (Allen et al., 2007) with parents (Allen et al., 2004; Allen et al., 2007; Seiffge-Krenke, 2006), peers (Allen et al., 2004; Allen et al., 2007; Seiffge-Krenke, 2006), and romantic partners (Seiffge-Krenke, 2006). According to Erickson, young adults learn to form true intimate relationships with nonfamily members such as friends and romantic partners. As young adults leave their families of origin, they can apply this newly gained autonomy and a sense of relatedness outside the family setting and change the relationship with their parents to the adult-to-adult level. Successfully achieving intimacy leads to possible marriage and enduring friendship, but failure to achieve this task leads to isolation. In middle adulthood, adults who have achieved intimacy will shift focus on nurturing the next generation to that of being a productive member in society. Successful achievement of generativity will lead to a sense of accomplishment. In early adulthood, successfully establishing an intimate relationship with a romantic partner becomes an important task for achieving developmental tasks and leads to generativity.

Attachment Development in Adulthood. The difference between adult attachment and childhood attachment is that adults who are in a couple relationship are equals, and they

supposedly provide a secure base and safe haven for each other mutually (Feeney, 1999; Schachner, Shaver, & Mikulincer, 2003). As mentioned before, there are two main programs assessing adult attachment style: Main and her colleagues (1985) and Hazen and Shaffer (1987). Most of the literature review used Hazen and Shaffer's attachment category, as it focuses on adult romantic attachment.

Adult attachment styles and reactions to stress. According to Schachner et al. (2003), adult attachment involves three important behaviors: attachment, caregiving, and sex (see review from Feeney, 1999, and (Mikulincer & Shaver, 2007). In couple relationships, the attachment system will be activated when individuals face stressful social or physical conditions, threats that possibly endanger future attachment, and individual conditions such as illness (Feeney, 1999). Individuals with secure attachment styles have a positive model of self and other, and they will be able to regulate their emotions and request support or help from others if needed. Individuals with avoidant attachment styles have a positive model of self but a negative model of others. They keep themselves safe by avoiding the experience of negative emotions and by avoiding support/help seeking. Individuals with ambivalent attachment styles have a negative model of self but a positive model of others. They have a strong awareness and reaction to negative emotions. However, they seek support from attachment figures that might not be reliable to them

(see review from Feeney, 1999 and Mikulincer & Shaver, 2007).

Attachment style and couple interaction. Mikulincer & Shaver (2007) provided a comprehensive review of the relationship between attachment and adult interpersonal relationship, and romantic relationships from dating to break up, caregiving, and sex. The highlights from their review, as well as other research studies, are presented here.

According to Feeney (1999), openness, closeness, dependence, commitment, and affection are five salient factors in the attachment relationship in intimate relationships. Individuals with secure attachment styles prefer mutual support and balanced dependency between partners. Individuals with avoidant attachment styles prefer the limits in dependency, closeness, and affection display. Individuals with ambivalent attachment styles prefer more closeness, commitment, and affection display (Collins & Read, 1990; Pietromonaco & Carnelley, 1994; Simpsons, 1990). Kirkpatrick and Hazen (1994) found that individuals with secure attachment styles in the beginning of the research were more likely to be married four years later. They also were least likely to be separated or divorced. People with avoidant attachment styles in the beginning were mostly alone with no partner and no action in seeking a partner four years later. People with ambivalent attachment styles in the beginning of the research were likely to report dissatisfaction in interpersonal closeness, and to have stayed in the same difficult relationships or were

searching for partners (Kirkpatrick & Hazan, 1994; also see review from Schachner et al., 2003).

Empirical evidence suggested that individuals usually selected environment or people to confirm their attachment styles, approached environment or people with their attachment style, or processed the information with their attachment style lenses on (Collins & Read, 1990; Kirkpatrick & Davis, 1994; Treboux et al., 2004). Individuals with secure attachment styles tend to pair with other people with secure attachment styles (Collins & Read, 1990; Feeney, 1994). Individuals with ambivalent attachment styles would pair with individuals with avoidant attachment styles (Collins & Read, 1994; Kirkpatrick & Davis, 1994). Individuals with ambivalent attachment styles need closeness and dependency because of their negative model about self and positive model about others. They tended to be clingy and idolized their partners to confirm their attachment style. People with avoidant attachment styles limited closeness and dependency. When paired with people with avoidant attachment styles who had difficulties with closeness and dependency, their partners' behaviors confirmed the fear in people who had ambivalent attachment style regarding not getting enough closeness and dependency. People with ambivalent attachment style also provided confirmation to people with avoidant attachment regarding their fear about closeness and dependency.

Therefore, it is rare for people with the same insecure attachment styles to pair together, e.g., avoidant pair with avoidant (Collins & Read, 1994; Kirkpatrick & Davis, 1994).

Treboux et al. (2004) compared childhood attachment and current relationship styles in adult romantic relationships. They assessed participants' attachment styles with their parents and with current partners. Participants who had secure attachment styles in both childhood and present attachment relationships had high satisfaction and low conflicts in their relationships, high confidence about self, and low impact from negative events on their relationship and themselves. Participants who had insecure attachment style in both childhood and present relationships had the most conflicts and the greatest avoidance of closeness in their relationships among all the groups. Participants with insecure childhood attachment but secure current attachment had positive feelings about self and relationships when under no stress. However, their positive feelings dropped when under stress. Participants with secure childhood attachment style and insecure adult attachment style had the most relationship distress and were most likely to be separated or divorced, but their feelings about self were not affected by negative events. Their research findings suggested that people with both insecure attachment styles in childhood and present relationship seemed to stay in the same relationship to confirm their childhood attachment style. People with insecure attachment styles in childhood were

easily affected by negative events and would influence their views about self and relationships. People with secure childhood attachment style were able to maintain positive views about self, but current insecure attachment style disconfirmed their childhood attachment style. This was the reason they were most likely to be divorced or separated.

Attachment style and relationship satisfaction. Whether gender is an important factor influencing attachment style and couple relationships is in debate. Some researchers found that gender was a mediating variable with cultural meaning (Collins & Read, 1994; Kirkpatrick & Davis, 1994) in attachment style and couple relationships, but others did not (see review from Mikulincer & Shaver, 2007). However, in exploring relationship satisfaction in couple relationships, different male and female behaviors and their attachment styles were found to be associated (Schachner et al., 2003; Mikulincer & Shaver, 2007).

Most research results showed that individuals with secure attachment reported high satisfaction in their relationships, better communication, more commitment, less difficulty in displaying affection, more comfort in closeness and dependency, and less fear of abandonment. Attachment security and marital satisfaction are associated with each other (Davila et al., 1999; Feeney, 1999). When considering influences from

childhood attachment relationships, Davila et al. (1999) found that one spouse's level of marital satisfaction will influence both partner's attachment security and further influence both of their attachment security. In addition, one of the partners' secure attachment styles predicted husband's marital satisfaction, especially in couples when husbands whose childhood attachment relationship had individual and/or family mental health history. For wives with individual and/or family mental health history, when husbands are more secure, the wives became less satisfied with their marital relationships (Davila et al., 1999).

When attachment styles are used as predictors, few research studies found that attachment styles and marital quality is mediated by the level of comfort in closeness and anxiety (Feeney, 1999; Schachner et al., 2003). Difficulties with problem negotiation and conflict resolution were found in people with high level of attachment anxiety or high level of attachment avoidance (Feeney, 1994; Lussier, Sabourin, & Turgeon, 1997; Marchand, 2004). Individuals with high level of attachment anxiety (usually associated with ambivalent attachment style) also had negative views about self and partners' behaviors (Gallo & Smith, 2001; Sumer & Cozzarelli, 2004), and displayed more negative affection, which further influenced marital satisfaction (Davila et al., 1999).

Individuals with high level of avoidance behaviors (feeling uncomfortable being close to

their partner, usually associated with avoidant attachment style) also had difficulties in sensing their partners' needs (Feeney, 1996), difficulties in expressing emotions (Feeney, 1999), and negative perceptions about their partners' supports (Berant, Mikulincer, & Florian, 2003; Cobb, Davila, & Bradbury, 2001; Meyers & Landsberger, 2002).

Husbands with avoidant attachment and wives with ambivalent attachment have lower marital satisfaction than other attachment styles (see review from Mikulincer & Shaver, 2007). When avoidant husbands and anxious wives coupled, wives' level of anxiety predicted the marital satisfaction of both partners (Feeney, 1994). Communication is also a mediating factor between attachment style and marital satisfaction, especially when wives have secure attachment style. Secure wives' effective communication, low level of anxiety, and comfort with closeness were associated with relationship quality and marital satisfaction (Feeney, 1994; Feeney, Noller, & Callan, 1994).

Summary. In adulthood, attachment style is more stable than childhood but does fluctuate with contextual issues such as divorce. However, adult attachment research suggests that childhood individual and family factors such as previous individual/family mental health history or abuse history are important in influencing attachment relationship change in adulthood (Cozzarelli et al., 2003; Davila et al., 1997; Davila & Cobb, 2003; Davila et al., 1999). In addition, individuals found partners and

environments to confirm their attachment styles and might choose to stay in distressful relationships for the attachment needs (Collins & Read, 1994; Feeney, 1994; Kirkpatrick & Davis, 1994; Treboux et al., 2004) Secure attachment style formed in childhood becomes a protective factor for better adjustment in intimate relationships, positive behaviors to facilitate secure intimate relationships, and positive view about self when experiencing negative life events (Cozzarelli et al., 2003; Davila et al., 1997; Davila & Cobb, 2003; Davila et al., 1999).

Attachment style influences adult romantic relationships. Individuals with secure attachment styles were more committed to their relationships, more open in their emotional expression, and more comfortable in closeness and dependency (see review from Mikulincer & Shaver, 2007). Their abilities to provide and receive the support to their partners and effectiveness in problem negotiation and conflict resolution facilitate marital satisfaction. Females with secure attachment style predicted marital satisfaction with communication skills as a mediating factor (Feeney, 1994). Individuals with insecure attachment style might not leave the relationship, especially for individuals with insecure attachment style in both childhood and adulthood or in the couples with avoidant husbands and ambivalent wives. They would rather stay in a distressful relationship because it confirmed their attachment styles (Collins & Read, 1994; Cozzarelli et al.,

2003; Kirkpatrick & Davis, 1994).

Influences of Child Sexual Abuse

Influences of CSA on Individual Development

Theoretical Reviews on Child Sexual Abuse Sequelae

Based on empirical evidence, several researchers proposed different theoretical models to explain the effect of CSA on adult survivors.

Developmental model. According to Psychosocial Development Theory, development provides individuals tasks to learn and to grow (Erickson, 1964). Success to accomplish these tasks provides a foundation for the next stage. These tasks are related to the physical, cognitive, emotional, and social growth in different stages. A Developmental Model conceptualizes the influences of childhood trauma from this perspective.

According to Finkelhor and Kendall-Tackett (1997), “developmental differences can affect our relatively distinct dimensions that have bearing on how victimization impacts children” (Finkelhor & Kendall-Tackett, 1997). They proposed four dimensions to consider: appraisal of the victimization and its implications, task application, coping strategies, and environmental buffer. Traumatized children will interpret their trauma experiences differently based on their cognitive development at different developmental stages. They also face different developmental tasks in life at a different age. Their

success in finishing the task from the previous stage and the onset of the trauma influence their abilities to cope with trauma experiences, and also influence their later development. Environmental support in coping with trauma experiences also influences their success in achieving developmental tasks at this stage. In adulthood, the developmental tasks and stressful life events might bring up the unfinished tasks or the ineffective CSA coping strategies (Gagnon & Hersen, 2000).

Cole and Putnam (1992) proposed a model to understand CSA influences from a developmental psychopathology perspective. The onset of CSA is an important factor to understand self and social relationship development. In the infant and toddler stage, developing a sense of self and the relationship with the external world, and coordinating physical, emotional, and cognitive development are important tasks. When incest happens at this stage, victims might not comprehend the experience, but their sense of control over their body is violated. In the preschool years (age 2-5), the important task is for children to integrate themselves, to place themselves in social context, and to accept the limit/expectations from their environments. At this stage, children are limited in language and cognitive abilities, and they are dependent upon caregivers. If CSA happened at this stage, victims might use denial and dissociation to cope with traumatic experiences. As children mature, their cognitive and emotional development increases, allowing them to

learn to reflect on their experiences. Establishing peer relationships also is an important task. CSA might bring overwhelming emotions and cause irrational cognitive rationales about self, and might hinder children to build equal relationships with their peers. In adolescence, puberty and sexuality are two significant developmental changes. Adolescents need to balance/adjust their physical changes and the changes in interpersonal relationships due to physical changes, mainly, relationships with different-sex peers. The other important task at this stage is identity formation (Banyard, 2007). Adolescents find out who they are through the interaction with peers, parents, and other adults. CSA happening at this stage would influence the victims' relationship with opposite-sex peers as well as their own identity formation (Banyard, 2007; Cole & Putnam, 1992).

Attachment model. Attachment Theory is often used to explain CSA sequelae and developmental outcomes. Alexander and her colleagues proposed using attachment style to understand the relationship of CSA and its long-term sequelae on individual, couple, and parenting relationships (Alexander, 1992, 1993, 2003; Alexander & Anderson, 1997; Alexander et al., 1998; Anderson & Alexander, 2005; Aspelmeier, Elliott, & Smith, 2007; Liang, Williams, & Siegel, 2006). She suggested that CSA or failure to prevent CSA from happening by parents led to attachment insecurities in child victims. She found that CSA

characteristics, especially the onset of CSA, predicted PTSD symptoms, and adult attachment style predicted personality structure. Fearful attachment style (Alexander et al., 1998; Muller, Sicoli, & Lemieux, 2000), and negative view about self (Muller & Lemieux, 2000; Muller, Lemieux, & Sicoli, 2001; Muller et al., 2000) found in most of CSA adult survivors, and associated with PTSD (Muller et al., 2000) and overall psychopathology (Muller & Lemieux, 2000; Muller et al., 2001), avoidant and self-defeating personality disorders (Alexander, 1993; Alexander et al., 1998), borderline tendencies (Alexander, 1993; Alexander et al., 1998), and dissociation (Anderson & Alexander, 1996). Preoccupied attachment style was associated with highly dependent behaviors (Alexander, 1993; Alexander & Anderson, 1997; Alexander et al., 1998). In addition, model of self had stronger association than model of other in predicting psychological adjustment of adult survivor of child abuse (Muller & Lemieux, 2000; Muller et al., 2001; Roche et al., 1999).

Coping process model. Spaccarelli (1994) proposed expanding the view of CSA influence from CSA to the environment. He proposed that CSA victims faced many stressors in their environments, including environments in which CSA is allowed to happen or children are not allowed to disclose. The more stressors the children face, the more severe the CSA influences. In addition, victim s' cognitive development, their

interpretation of traumatic experiences, and their coping strategies such as avoidant coping (Bal, Van Oost, De Bourdeaudhuij, & Crombez, 2003), also were important factors influencing long-term CSA sequelae (Spaccarelli, 1994).

Child Sexual Abuse Sequelae

Past research on long-term psychological effects of CSA suggest that CSA adult survivors have higher rates of psychological distress and dysfunction compared to the non-sexually-abused group. Table 2-1 on page 61 displays the summary of past researches on CSA influence. Emotionally, compared to the non-abused group, CSA survivors are more anxious, depressed, and angry. Cognitively, they have lower self-esteem, lower self-efficacy(Diehl & Prout, 2002), and self-defeating tendencies. Behaviorally, they present higher rates of behavioral problems in alcohol and substance abuse, eating-disorders, inappropriate sexual behaviors, re-victimization, self-mutilation, suicidal behaviors, and sexual dysfunction. Physically, they present issues with dissociation (Neumann et al., 1996) and somatization.

Table 2-1. *Childhood sexual abuse influence on development*

Dimension	Symptoms	Studies
Emotional	Anxiety	Browne & Finkelhor, 1986; Neumann, Houskamp, Pollock, & Briere, 1996; Polusny & Follette, 1995
	Depression	Alexander et al., 1998; Beitchman et al., 1992; Browne & Finkelhor, 1986; Jumpar, 1995; Meyerson, Long, Miranda, & Marx, 2002; Neumann, Houskamp, Pollock, & Briere, 1996; Paolucci, Genuis, & Violato, 2001; Polusny & Follette, 1995; Schilling, Aseltine Jr., & Gore, 2007; Weiss, Longhurst, & Mazure, 1999
	Anger	DiLillo, Tremblay, & Peterson, 2000
Cognitive	Lower self-esteem	Jumpar, 1995; Neumann et al., 1996
	Lower self efficacy	Diehl & Prout, 2002
	Self-defeating tendencies	Alexander et al., 1998
Behavioral	Alcohol and substance	Neumann et al., 1996; Polusny & Follette, 1995
	Eating-disorder	Polusny & Follette, 1995
	Inappropriate sexual behaviors	Paolucci et al., 2001; Polusny & Follette, 1995
	Re-victimization	Banyard, Arnold, & Smith, 2000; Banyard, Williams, & Siegel, 2001, 2002; Neumann et al., 1996; Peleikis, Mykletun, & Dahl, 2004
	Self-mutilation	(Peleikis et al., 2004)
	Suicidal behaviors	Beitchman et al., 1992; Dube et al., 2001; Neumann et al., 1996; Paolucci et al., 2001; Polusny & Follette, 1995
	Sexual dysfunction	DiLillo, 2001; Neumann et al., 1996; Polusny & Follette, 1995; Rellini, 2008
Physical	Dissociation	Neumann et al., 1996
	Somatization	Neumann et al., 1996; Polusny & Follette, 1995

Posttraumatic stress disorder (PTSD) is a common diagnosis seen in the adult

survivors of CSA (Briggs & Joyce, 1997; Hetzel & McCanne, 2005; Huang, Zhang, Momartin, Huang, & Zhao, 2008; Neumann et al., 1996; Paolucci, Genuis, & Violato, 2001; Peleikis et al., 2004; Polusny & Follette, 1995). Survivors may experience flashbacks/intrusive memories about trauma, numbing or avoidant responses to cope with the trauma related stimuli, and anxiety (American Psychiatric Association, 2000). These symptoms combine physical, emotional, and behavioral responses in adult survivors of CSA coping with psychological distress from CSA influences.

Childhood sexual abuse experiences did have an effect on adulthood in terms of psychological distress (Paolucci et al., 2001), interpersonal relationships (DiLillo, 2001), intimate relationships (Liang et al., 2006), and parenting skills (DiLillo & Damashek, 2003). The causal relationships between CSA and adult psychological adjustment were inconclusive. Several researchers have used Bronfenbrenner's ecological model (1979) to explain the influence the childhood trauma on adult psychological adjustment (Banyard & Williams, 2007; Harvey, 1996; Zielinski & Bradshaw, 2006). Based on the empirical evidence and theoretical outline discussed in the previous section, CSA effects can be outlined as follows.

At the individual level, the age of the child at the onset of CSA (Alexander, 1993; Finkelhor & Kendall-Tackett, 1997), individual coping strategies (Bal et al., 2003;

Spaccarelli, 1994), the duration and the type of abuse (Banyard & Williams, 1996), and attachment with the parents (Alexander et al., 1998; Liang et al., 2006; Muller & Lemieux, 2000; Muller et al., 2001; Schreiber & Lyddon, 1998) were found or suggested to be important factors influencing adult survivors' psychological distress.

At the family level, research finds that the characteristics of CSA survivors' families of origin shows less cohesion (Meyerson, Long, Miranda, & Marx, 2002), less adaptability, more traditional values in parent-child and male-female relationships, more controlling behaviors, lower family autonomy and intimacy, and more parental conflicts (Draucker, 1996; Meyerson et al., 2002; Whiffen & MacIntosh, 2005). Some researchers argue that the long-term effects of CSA are mediated by the victim's family of origin. That is, the victim's relationship with her parents and her family structure cause the long-term psychological effects, not the CSA incidents (Alexander et al., 1998; Draucker, 1996; Meyerson et al., 2002; Nash, Neimeyer, Husley, & Lamber, 1998; Rind, Tromovitch, & Bauserman, 1998).

If the perpetrator is a family member, the relationship with the perpetrator also is found to be a significant predictor of survivors' psychological outcome (Banyard & Williams, 1996). At the same time, the reaction from the non-offending parents or other adults in the family before and after disclosure (Bal, De Bourdeaudhuij, Crombez, & Van

Oost, 2005) also were important factors influencing survivors' coping and their decision regarding whether to disclose, which would influence their psychological adjustment (Banyard & Williams, 2007).

Whether CSA incidents have direct influences on adult mental health is still in debate. Some researchers argue that the long-term effect of CSA is mediated by the victim's family of origin. That is, the victim's relationship with her parents and her family structure influence the long-term psychological effects, not the CSA incidents (Alexander et al., 1998; Draucker, 1996; Nash et al., 1998; Peleikis et al., 2004; Rind et al., 1998).

Some researchers argue that the CSA itself has a strong influence on child development without other mediating variables (Briere & Runtz, 1988; Draucker, 1996; Jumpar, 1995).

Depending on different sampling processes, the results can be different (Jumpar, 1995; Neumann et al., 1996). However, it does show that a female CSA survivor's adjustment involves many different factors. Lack of safety and protection in the family of origin environment is associated with CSA happening (Banyard, 1997; Zuravin & Fontanella, 1999). The characteristics of the victim's family of origin, the responses from the members in the family of origin, the victim's relationship with the family of origin, the type and the duration of the CSA, and the relationship between the child victim and the perpetrator all play important roles in determining the adult survivor's psychological

adjustment.

At the community level, schools and neighborhood characteristics are important factors (please see review from Banyard, 2007 and Zielinski & Bradshaw, 2006).

Banyard and Williams suggested that community can influence the CSA survivors' development of psychological distress, but can also be a protective factor. In terms of school settings, supportive and caring teachers, positive peer relationships, and afterschool curricula are important factors for resiliency in children with CSA history. In the community, low cohesive and unsupportive neighborhood, and low medical, mental health and social service resources were found to be significantly related to characteristics of child maltreatment families (please see review from Zielinski & Bradshaw, 2006).

Influences of CSA on Adult Attachment

Adult attachment style may be a mediating variable between CSA/other childhood abuse and long-term CSA sequelae. Attachment mediated CSA influences and avoidant coping strategies (Shapiro & Levendosky, 1999). Attachment also mediated CSA and its influence on the CSA adult survivors' ability to form securely attached relationships in adulthood (Styron & Janoff-Bulman, 1997; Twaite & Rodriguez-Srednicki, 2004) in peer relationships (Aspelmeier et al., 2007), intimate relationships, and parent-child

relationships (Aspelmeier et al., 2007). Attachment also mediates CSA and the severity of adult survivors' mental health symptoms, such as post-traumatic stress symptoms (Roche et al., 1999; Twaite & Rodriguez-Srednicki, 2004), and depression (Liem & Boudewyn, 1999; Roche et al., 1999; Styron & Janoff-Bulman, 1997). Attachment also mediated CSA and adult survivors' coping strategies in interpersonal relationships, such as destructive behaviors in conflict situation with partners (Styron & Janoff-Bulman, 1997), destructive behaviors toward self (Liem & Boudewyn, 1999), and self-esteem (Liem & Boudewyn, 1999).

Influences of CSA on Couple Relationships

Female survivors of CSA and their partners showed greater difficulties in intimate relationships, including lower satisfaction in the intimate relationship (DiLillo & Long, 1999; Godbout, Sabourin, & Lussier, 2008; Liang et al., 2006; Nelson & Wampler, 2000), poorer communication (DiLillo, 2001), lower levels of trust in their partners (DiLillo & Long, 1999; Nelson & Wampler, 2000), higher individual stress symptoms (DiLillo, 2001) and lower family cohesion (DiLillo & Long, 1999; Nelson & Wampler, 2000).

Some research suggests that a good partner relationship can serve as a buffer to decrease the female CSA survivors' depression (Feinauer et al., 1996; Schilling, Aseltine Jr., & Gore, 2007; Whiffen et al., 1999). The research on partners' reaction to the CSA

survivors' therapy also revealed that partners and the couple relationships benefit from the survivors' recovery process (Firth, 1997; Miller & Sutherland, 1999; Reid, Taylor, & Wampler, 1995; Reid, Wampler, & Taylor, 1996). The clinical example provided by Maltas (1996) demonstrated that therapy with the male partner and female survivor individually might not provide the full picture of the couple's interaction with each of their therapists.

Johnson and Williams-Keeler (1998) used adult attachment theory to explain the interaction difficulty of the couple. She suggested that the survivor's childhood traumatic experiences make her seek protection. In the meantime, the broken trust and attachment make it hard for her to get close to her partner. Because of these influences, neither the survivors nor the partners can get comfort from each other. Neither can they soothe themselves. Therefore, the couple is stuck in the pursue/withdraw, and attack/defend cycle. The couple interaction and their attachment maintained the CSA survivors' psychological symptoms and interpersonal difficulties. By changing insecure attachment to secure attachment, the CSA survivors would be able to improve their interpersonal functions (Johnson, 2002).

In sum, the previous research results suggest several interaction patterns between a CSA female adult survivor and her partner. Due to lack of safety and protection in the

family of origin environment (Barcus, 1997; Zuravin & Fontanella, 1999), the survivor reacts to the relationship with distrust and insecure attachment, but they also seek protection from partners. On the other hand, the male partner also brings influences from his family of origin and the responses to the survivor's therapy process—this aspect is unexplored in the literature. In their interaction, they react to each other with pursue/withdrawal or defend/attack behaviors, which causes lower satisfaction in the relationship, poorer communication, lower levels of trust in each other, and lower family cohesion. Secure attachment and social support from the survivors' current partners (Schilling et al., 2007) were found to buffer the psychological distress and provided better adjustment for the survivors.

From Literature Review to Conceptual Map

Summary of the Literature Review

The literature review section provided an overview of attachment development from infancy to adulthood, and CSA influences on development, adult attachment, and couple relationships. Several important characteristics in attachment and CSA research appeared in this review.

Attachment development. Secure attachment has been consistently associated with better adjustment from infancy to adulthood. However, insecure attachment and its

influences are relevant to this research.

First, in terms of the continuity of attachment, adulthood is more stable than childhood (Mikulincer & Shaver, 2007). Individuals with secure infant attachment but insecure attachment in adolescence or early adulthood were often more likely to experience instable family environment, poverty, and stressful life events, especially parental marital discord and abuse (Fraley 2002; Hamilton, 2000; Klohnen & Bera, 1998; Lewis et al., 2000; Waters et al., 2000; Weinfield et al., 2000). Findings from these studies provide evidence that infants with insecure attachment style often had insecure attachment style in adolescence and early adulthood (see review from Mikulincer & Shaver, 2007). History of unresolved trauma such as losing parents in childhood, or abuse was often associated with insecure attachment in adolescence (Adam et al., 1996; Allen et al., 1996). In adulthood, individuals who experienced attachment style change (from insecure to secure or secure to insecure) or stayed insecure from early adulthood to middle adulthood were more likely to have individual or family mental health issues or abuse history (Davila et al., 1997; Treboux et al., 2004). Adults with insecure attachment history but secure attachment in the couple relationship were still more likely to regress to the insecure attachment when under stress (Cozzarelli et al., 2003).

Second, individuals seek environments, friends, and partners to reinforce their own

attachment styles. In childhood, children's attachment styles with parents were associated with their attachment styles with their close friends, especially in avoidant attachment style (Hodges et al., 1999). In adulthood, individuals also seek partners to reinforce their attachment styles (Kirkpatrick & Hazan, 1994). Children/adults with secure attachment style often find mates with secure attachment style (Greensberg, 1999). Avoidant male and ambivalent female often pair together and have the most stable relationship, even though they reported low marital satisfaction (Kirkpatrick & Hazan, 1994).

To sum up, these attachment research studies suggest that insecure attachment in childhood has an effect on attachment style in adulthood. Stressful life events, such as instable family environment, lost parents in early age, abuse, and parental marital discord (Cozzarelli et al., 2003) are often related to children staying in insecure attachment style from infant to adulthood or changing their attachment style from secure to insecure. When these individuals enter adulthood, their attachment style often fluctuated more when they are under stressful life events.

Attachment research. Discontinuity was apparent from infancy to adulthood. Most research on childhood used Ainsworth's Strange Situation attachment categories, which are secure, anxious-avoidant, and anxious-ambivalent. Adolescent research used Main's Adult Attachment Interview attachment categories, which are secure, pre-occupied, and

dismissing. Main's, Hazen and Shaver's, or Bartholomew's attachment categories all appeared in different adulthood research studies depending on research goals. Also, there were many studies across the life span using the dichotomous category, secure vs. insecure. As mentioned before, even though Main's and Hazen and Shaver's attachment style both corresponded to Ainsworth's Strange Situation, there are differences between them. In addition, when used only dichotomous categories, those studies are different than the studies using 3-category or 4-category systems in terms of their precision.

When exploring the continuity of attachment, the longitudinal studies usually explored attachment style from infant to adolescence/early adulthood (for example, Waters et al., 2000) or early adulthood (for example, Fraley 2002), or early adulthood to middle adulthood (for example, Klohnen & Bera, 1998). There are no meta-analyses or longitudinal studies that explore the continuity of attachment from infant to middle adulthood. When exploring attachment with a life span perspective, it is hard to compare the differences or similarities in different studies even though there are patterns from infancy to adulthood.

CSA research using attachment perspectives. Attachment is consistently found as a mediator between child abuse and adult adjustment. As mentioned before, abuse is one of the important stressful life events influencing attachment security in childhood. However,

most of the research studies combined different types of child abuse into one category to compare with a non-abuse group (Muller & Lemieux, 2000; Styron & Janoff-Bulman, 1997; Twaite & Rodriguez-Srednicki, 2004). Or, they combined different types of sexual abused (Liem & Boudewyn, 1999; Roche et al., 1999). The disadvantage of combining different abuse types or sexual abuse types is the difficulty in understanding the within-group differences. In addition, when the researchers used different category systems with all the abuse types combined, it is even harder to understand the relationship between attachment and abuse outcomes on different populations.

Attachment also is an important variable mediating adult couple relationships, and few research results found good couple relationships mediate CSA female survivors' adjustment (Feinauer et al., 1996; Schilling et al., 2007; Whiffen et al., 1999). Couple relationship and interaction in couples with insecure attachment and in couples with female partner as a survivor of CSA are similar. Therefore, it is important to understand within-group differences in CSA survivors and their partners' attachment interaction.

Gaps in Literature Review

When children live at high levels of stress and instability with low positive social environment families, their adult attachment styles are predominantly insecure, and are particularly high in dismissing attachment styles (Alexander et al., 1998; Weinfield,

Sroufe, & Egeland, 2000). Individuals with insecure infant attachment and insecure adulthood attachment are more likely to experience maltreatment in childhood (Cozzarelli et al., 2003; Davila & Sargent, 2003). Individuals with secure infant attachment but insecure adult attachment are more likely to have mothers with clinically depressive symptoms. Individuals with insecure infant attachment but secure adult attachment are more likely to have better family function at age thirteen. Family functions, relationship with parents, and abuse are important factors influencing secure attachment development in high risk population (Weinfield et al., 2000). These findings are consistent with other findings summarized before, making understanding sexual abuse and stressful life events important variables to explore.

Attachment research is often debated as to whether the internal working model is stable or not. A Revision Perspective (Lewis, 1997) suggests that the internal working model formed in infancy with attachment figures changes based on their interaction with the environment. A Prototype perspective (Sroufe, Egeland, & Kreutzer, 1990) suggests that the internal working model formed with attachment figures in infancy becomes a core model and is not subject to change, but individuals later develop other attachment relationships (see the review from Fraley, 2002). Fraley (2002) found that the prototype model was a better model than the revisionist model in predicting attachment stability.

That is, the attachment style does change but fluctuates around certain baseline that formed with attachment figure in infancy (Cozzarelli et al., 2003; Fraley 2002).

Individuals might form different attachment relationships throughout the years with different relationships. However, the core/baseline attachment still has influence on other attachment relationships formed later. The fluctuation or attachment style change in adulthood is related to the insecure attachment and stressful life experiences in childhood (Cozzarelli et al., 2003; Davila et al., 1999).

In addition, research studies also found that individuals choose partner/environment to reinforce their attachment styles from childhood peer relationships to adulthood couple relationships. This core/baseline attachment is even more stabilized in adulthood than in childhood, and influences adult adjustment and couple relationships when under stress (Cozzarelli et al., 2003; Davila et al., 1999). Therefore, there is a need to understand the interaction of the core/baseline attachment formed with the attachment figure and adult attachment relationships, mainly, the romantic partners.

There is only one research study exploring the interaction of past and current attachment styles (Treboux et al., 2004), but this study did not focus on a sexual abuse population. Nor did this study explore the influences of past stressful life events on attachment change with their parents in childhood development and on adult attachment

relationships. Instead, the study focused on the influences of current stress on couple relationships.

If the individuals find their partners to reinforce their attachment styles, the survivors' partners also find survivors to reinforce their attachment styles. Currently, research studies only focused on the difficulties that partners' experienced when the survivors went through therapy. There are many research studies exploring adult survivors' families of origin contexts and childhood experiences (Peleikis et al., 2004), but not for their partners.

Current Research

Therefore, the focus of this qualitative research is to explore the interaction of previous attachment style and current attachment style in couples with a female partner who is a CSA adult survivor. The goal is to understand how past attachment styles are maintained or changed in current relationships.

A qualitative research method was chosen to understand the participants' in-depth experiences. The CSA population is chosen because this is one of the stressful life events in childhood resulting in vulnerability to mental disorder in adulthood (Department of Health and Human Services, 1999). Female partners as survivors were chosen due to the higher prevalence of women as victims of abuse (Polusny & Follette, 1995). They also

are under more stress in adulthood (Department of Health and Human Services, 1999). In order to avoid the confusion in attachment research with different category systems, this research goes back to the origins of Attachment Theory by focusing on the interaction of model of self and model of other in childhood and adulthood (Bartholomew, 1990). By understanding each partner's childhood attachment style, stressful life events in childhood, and current attachment style, this research intends to bridge the gaps of current attachment and development research in sexual abuse population.

Chapter 3

Methodology

Research Objectives and Research Questions

The overall purpose of this phenomenological qualitative study was to investigate how past childhood attachment style is maintained by a current intimate relationship, in particular, the adult attachment relationship, in couples with a female partner as the survivor of child sexual abuse. Specifically, this research study explored CSA female adult survivors' and their partners' attachment experiences looking at the interface of attachment figures in families of origin and in current relationships. The following research objectives guided this research:

- 1) To identify whether and how CSA female survivor's and partner's childhood attachment experiences are associated with their current individual attachment style.
- 2) To identify the potential strengths and weaknesses in each individual partner and in past and current attachment relationships.
- 3) To identify how each partner's childhood attachment experiences were maintained or changed in the interaction of current relationship.

- 4) To identify possible strategies in which couple therapy may be helpful to intimate couple relationships when the female partner is a CSA adult survivor.

The research questions evolved through reviewed literature along with the research objectives stated above to reflect the conceptual map described in the Introduction section.

Specific research questions are as follows:

- 1) What are the important developmental events and milestones for each partner?
- 2) How do childhood attachment styles influence the individual partner's views about themselves (model of self) and each other (model of other)?
- 3) How do adult attachment styles influence the female CSA survivor and her partner's view about themselves (model of self) and each other (model of other)?
- 4) How do childhood attachment styles influence the interaction between female adult CSA survivor and her partner, especially during unresolved conflicts?

Phenomenological Research

Brief Introduction of Phenomenological Research

Phenomenological qualitative research will guide the design of this study. Rooted and evolved from Husserl's phenomenology, phenomenological qualitative research focuses on human beings' experiences and how they make sense of these experiences in

certain phenomenon (Creswell, 2007; Giorgi & Giorgi, 2003b; Patton, 2002; Polkinghorne, 1989). The participant's experiences of certain phenomena and the meaning of those experiences to them were the primary research focus. Therefore, it was important to purposefully sample a homogenous group to fulfill the criteria of the phenomenon explored. A sample of 5 to 25 individual interviews are suggested as a good research foundation (Polkinghorne, 1989), but the number of participants should be decided based on the nature of the research (Wertz, 2005). A semi-structured, open-ended, and in-depth interview was the primary data collection method (Creswell, 2007; Giorgi & Giorgi, 2003b; Polkinghorne, 1989; Wertz, 2005). Creswell (2007) also suggests that researchers can use other methods in order to gather rich data from the participants. For example, the researcher's reflection from field notes or participants' diaries may be used.

This research will follow the phenomenological method provided by Moustakas (1994) and Giorgi and Giorgi (2003b). According to Moustakas (1994), epoché (or bracketing), phenomenological reduction, imaginative variation, and synthesis are important strategies for conducting phenomenological research. Epoché is the essence of phenomenological research, meaning that researchers "set aside our prejudgments, biases, and preconceived ideas about things" (Moustakas, 1994, p. 85; Creswell, 2007; Giorgi & Giorgi, 2003a; Patton, 2002; Polkinghorne, 1989; Wertz, 2005). Phenomenological

reduction, according to Moustakas (1994) means “describing in textual language just what one sees, not only in terms of the external object but also the internal act of consciousness, the experience as such, the rhythm and relationship between phenomenon and self” (p.90). Using this basis, researchers consider all different aspects of the phenomenon and use the participants’ own language to describe the essence of different meaningful units (Giorgi & Giorgi, 2003b). Imaginative variation is to “seek possible meanings through the utilization of imagination, varying the frames of reference, employing polarities and reversals, and approaching the phenomenon from divergent perspectives, different positions, roles, or functions” (p. 97-98). Through this process, the researchers “arrive at a structural description of an experience” (p. 98). Synthesis stage is when the researcher integrates “the fundamental structure” (from phenomenological reduction) and “structural descriptions” (from imaginative variation) into “a unified statement of the essences of the experience of the phenomenon as a whole” (p. 101).

Therefore, the process of phenomenological research is as follows: 1) start from the researcher’s determination of phenomenon to explore; 2) review the literature in the areas of the phenomenon; 3) search for participants who experience this phenomenon; 4) interview the participants to get rich data; and 5) analyze the data.

The data analysis includes the following four steps: 1) reading for a sense of the

whole; 2) establishing meaning units; 3) transforming the units into psychologically sensitive expressions; and 4) determining the structure. In the first step, the researcher reads the transcripts from the interviews several times. In the second step, the researcher highlights significant parts of the transcript to “establish meaning units” (Giorgi & Giorgi, 2003a; Smith, Jarman, & Osborn, 1999; Smith & Osborn, 2003). This step corresponds to phenomenological reduction. In the third step, the researcher reflects on the meaning units from the previous step in order to understand what those units reveal about the phenomenon (Wertz, 2005), and “transform meaning units into psychologically sensitive expressions” (Giorgi & Giorgi, 2003a). This step corresponds to imaginative variation. In the last step, the researcher analyzes and synthesizes the findings from the previous two steps.

The researcher, as an instrument, is an important factor in qualitative research. Phenomenological research emphasizes the researcher’s insight and reflection in order to set aside their own biases or prejudgment to the phenomenon, which is the bracketing process. In the meantime, the researcher also builds a trust relationship with the participants in order to get deep meaning and experiences from the participants (called prolonged engagement and persistent observation by Creswell, 2007). The bracketing process starts with the forming of research questions and proceeds through the research

process. The researcher continuously checks his/hers own biases from their own previous experiences, literature reviews, and different participants (Creswell, 2007; Giorgi & Giorgi, 2003a; Patton, 2002; Polkinghorne, 1989; Wertz, 2005). Field notes become an important data collection method for helping the researcher reflect on his/her biases and to triangulate with data collected from the participants for validation (Polkinghorne, 1989).

From Phenomenology to Current Research

This research study focused on adult CSA female survivors and their partners' attachment experiences with their own parents and each other, and how they perceived their own values in these experiences. Specifically, as outlined in the research questions, the phenomenon under examination is adult CSA female survivors and their partners' model of self and model of other in the past and present, as well as their interaction.

Research Design

This study followed a phenomenological qualitative research design to understand the interaction of past and current attachment relationships in couples with the female partner as CSA adult survivor. Information was gathered through semi-structured interviews with each partner individually and with the couple together, and participants' individual diaries about their personal reflection regarding their own developmental

process, trauma influences, and couple interaction. Specific research design is presented as follows.

Participants

The original proposal was to recruit six to ten couples, with each member over 21 years of age, and with a female partner as a survivor of CSA. Six couples were recruited to participate in the study. The couple relationship is defined as married, cohabitating, or dating heterosexual couples with at least a two-year relationship. According to Bowlby (1982), it takes two to three years for attachment formation in infancy. Adult attachment research indicates that two years is a cutoff point separating attachment quality in adult romantic relationships (Hazen & Zeifman, 1999). Therefore, “two years in the relationship” is chosen as the criteria.

As mentioned in the literature review section, the definition of child sexual abuse (CSA) is different from study to study. In this study, CSA is defined as follows:

- 1) A sexual act between the victim and the perpetrator defined as direct sexual contact such as fondling, masturbation, oral-genital contact, or intercourse.
- 2) Sexual abuse happened before the victim was 12 years old and the perpetrator was at least five years older, or when the victim was between 13 and 16 years old and the perpetrator was at least 10 years older (Finkelhor, 1979).

- 3) The victim felt that the perpetrator held power and authority and she was forced, either physically or psychologically, to participate in sexual activities (Knight, 1997).

Past research studies have adopted a broader CSA definition to include indirect sexual contact such as forcing children to take nude pictures. Guided by the phenomenological research orientation, this study limited the sexual act definition to direct sexual contact in order to maintain a homogeneous sample. However, the definition of the perpetrator-victim relationship is defined in a broader perspective. Child sexual abuse victims have usually known the perpetrator, with 34.2% of the perpetrators of juvenile sexual assault as family members and 58.7% as acquaintances (Snyder, 2000). As the American family structure has become more diverse in the past forty years due to divorce and single mothering, (Bianchi, 1995; Ooms & Wilson, 2004), the relationship between victim and the perpetrator also has become complicated. Therefore, the perpetrator is defined as a person known to the child and is older and has power.

Recruitment

The participants were recruited from private and public mental health clinics in the community, as well as flyers on campus and agencies in the community.

Data Collection Procedure

Stage 1: Telephone screening. The participants were screened by phone in order to be sure they fulfilled the criteria (Appendix 1). The age of the participants, the length of the couple relationship, and the sexual abuse history are important criteria. The callers also were informed that both of the partners needed to participate in this process. Their partner's inclusion criteria were also screened by phone via the callers.

There were 11 phone calls received at this stage. Among them, three callers identified themselves as female survivors of child sexual abuse and did fulfill the inclusion criteria mentioned above. However, their partners were unwilling to participate. Two of the couples fulfilled the criteria, and both of the partners were willing to participate. However, because one of the partners in both couples did not speak English, and I do not speak their native language, I was not able to conduct interviews with them. One of the couples did not fulfill the criteria, because it was the male partner who was the survivor of child sexual abuse, not the female partner. Six couples participated in the study.

Stage 2: Individual interviews. Individual interviews were held in the same week with each individual partner but at different times. A video-taped, face-to-face, and semi-structured interview lasted 60 – 90 minutes. The individual interview aimed to understand the individual partner's childhood relationship with his/her attachment figure,

and current relationship, and to gain information from detailed experiences about common conflicts in the couple relationships (Appendix 2).

Stage 3: Reflection diary. The couple interview was held two weeks after the second partner's individual interview. In between, the couple kept journals regarding their reflections about the individual interview session and their detailed experiences, if the conflict they mentioned in the individual interview appeared between the two week intervals. They kept this journal and their reflections private and were asked to wait to discuss their thoughts in the couple interview session (Appendix 3). All but one participant finished the individual diary. This participant did not write any entries, but provided an oral statement after the couple interview was completed. His oral explanation was taken into analysis as well.

Stage 4: Couple interview. The video-taped couple interview lasted 30 - 60 minutes. In the couple interview, the topic of their conflict was summarized and the couple was asked to discuss this topic in the session for 15-20 minutes. After the planned time, the researcher and the couple were de-briefed about their experiences in the discussion and de-briefed about their experiences participating in this research study (Appendix 4).

The researcher kept the field notes regarding her impressions of the interviews, experiences of interacting with the participants, thoughts regarding the participants'

stories after the individual and couple interview sessions, and the reactions during and/or after coding. The field notes recording continued throughout data analysis as an instrument to “bracket” the researcher’s biases.

Incentives

Incentives were offered to show appreciation. The participants were offered a \$10 gift card at the end of each stage. That is, the gift card was offered to each individual after participating in the individual and couple interview, and for completing their individual journal.

Data Analysis

Data Analysis Steps

Data were analyzed based on phenomenological qualitative research standards as described previously on pages 80-81. Interview data were transcribed in detail. The data analysis focused on each individual’s experiences in his/her relationship with childhood attachment figures and with each other. Specifically, the analysis focused on their experiences about themselves in the relationship (model of self) and their interpretation about their own worthiness through their interaction with attachment figures and each other (model of other).

After transcribing the interviews from the audio recorder and diary data from

participants' journals, each transcript was compared to the interview taped on the video recorder for accuracy before analysis. Following the analysis steps described above, the first step of the analysis was to read the transcript several times to get a holistic sense of the participant's experiences (Giorgi & Giorgi, 2003a; Smith et al., 1999; Smith & Osborn, 2003). In the next step, the transcript was coded for each individual participant (Giorgi & Giorgi, 2003a; Smith et al., 1999; Smith & Osborn, 2003) by using NVIVO 8.0 (QSR International, 2008).

Page 95 and 96 outline the process of coding and analyzing. First, each participant's individual interview was coded and grouped based on its developmental stage. Second, if mentioned in the interview, any significant events which occurred at each developmental stage and any experiences which happened in the couple relationship were coded. Third, if mentioned in the interview, the responses from the participants and their parents, teachers, friends, siblings were coded as self (participants) and other (people involved in the significant events). Sometimes, the participants described memories about their parents or significant people but not a specific incident. The participants' reactions/responses were coded as self and things/behaviors from that person were coded as significant events.

In the third step, transcripts from the individual diary and/or couple interview were

coded into individual participant's individual interview codes. Therefore, a total of 30 transcripts from individual interviews (12 total), individual diaries (12 total), and couple interviews (6 total) were coded into 12 main codes which were 12 individual participants' experiences.

In the fourth step, six transcripts from the couple interviews were coded for their interaction process, which become six main codes for each couple.

In the fifth step, each individual partner was compared with his/her own partner on his/her developmental experiences and the changes with his/her parents throughout the developmental process. In the sixth step, the six couples were compared from each other to seek for the patterns (Figure 3-1 on page 95).

The seventh step compared the individual participants' developmental experiences with the couple interaction on the never-resolved conflict during the couple interview. Then, each individual partner was compared with his/her own partner. In the last step, each individual couple was compared with other couples on their communication patterns on resolving never-resolved conflicts (Figure 3-2 on page 96).

Trustworthiness

According to Patton (2001), triangulation to ensure the trustworthiness of the data and analysis can be done through triangulation of different data sources and with multiple

analysts, a review by inquiry participants, an audience review (specifically for program evaluation), an expert audit review, a theory triangulation, and a thoughtful and systemic triangulation. Creswell (2007) suggests that building trust with the participants, learning the participants' culture, and checking misinformation coming from the researcher's bias are important strategies for validity assurance strategies. In terms of reliability, he suggested that the researchers take detailed field notes and use good quality recording devices to enhance reliability.

For validity checking, the researcher used prolonging engagement and persistent observation, multiple and different sources, and methods for triangulation. The researcher strove to continuously clarify objective bias from the onset of the study by recording detailed reflection in order to provide rich and thick descriptions in the final report, and to use external auditing with the advisor. For reliability checking, the researcher recorded detailed field notes and used both video and audio devices for recording. The interviewed transcripts were transcribed in detail through watching videotapes, and confirmed again through audiotapes. Computer programs, such as NVivo (QSR International, 2008), were applied to ensure the reliability in the data analysis process.

The primary data collection method in phenomenological research is the semi-structured, in-depth interview. To ensure that the interview transcript was correct

and transcribed in detail was the most important criteria for trustworthiness (Creswell, 2007; Polkinghorne, 1989). According to Polkinghorne (1989), the most important criteria for validity is whether an idea is grounded and supported well by the examples that the researcher provides from participants' description.

Both individual and couple interviews were recorded on audio and video recorder. Interview data were transcribed first using data recorded by audio recorder and then compared to data recorded by video recorder for accuracy.

As mentioned before, the nature of CSA lies in power and authority (Knight, 1997). Data and methods of data collection took this into consideration to ensure the trustworthiness of the data. Participants' experiences were collected through interviews and their own journals. These information sources provided an opportunity for the participants to express/share their experiences both in the presence and in the absence of the researcher. If the participants hesitated to express their experience directly in front of the researcher or their partners, they still had an opportunity to express it through their diary.

Data were triangulated from different sources, including the interview, background information, participant's diary, and researcher's field notes. Data triangulation also provided the researcher channels for exploring the phenomenon in depth and to validate

the data.

Human Subjects Research

The participants were recruited from community agencies and public and private clinics providing mental health services. To protect the participants from further psychological stress due to the interview, the researcher provided contact information from clinics that provide mental health services. If the participant was in therapy at the time of the interview, the researcher provided the contact information for the participant's therapist if the participants required the researcher to do so. At the end of each couple interview, which was the last step of the research process, a short debriefing was provided. This step was included to provide the researcher an opportunity to debrief the participants about the research process and to check in with the participants regarding any follow-up services needed due to psychological stress from the research.

Reflexivity/Bracketing

The researcher as an instrument is an important aspect in qualitative research. In phenomenological research, the researcher needs to continuously bracket her own biases, judgment, and preconceived ideas about the phenomenon (Moutstakas, 1994). Mainly, the researcher needs to keep a fresh eye and be aware of his/her own process in every step, from forming the research question to the final report.

This research project began 12 years ago when I was a student in a master's program. I chose to work with CSA survivors as my career goal at that time. Throughout the years, I became a trained individual therapist and worked with the survivors individually. During that process, I struggled to balance the survivor's needs with her family's needs. Many times, I wondered how the survivors' husbands and children coped with their wives'/mothers' depression and flashbacks that were possibly stimulated from the individual sessions. Many times, the survivors told me that their husbands did not know how to react to their situation and their children were scared when they went through emotional roller coasters. I struggled and worried as to whether my work helped a survivor or destroyed a family.

This was the most important reason I came back to a marriage and family therapy program. Throughout my training to become a systems therapist, I gradually realized two things: 1) the environment influences the individual, but the individual chooses how to respond to the environment; and 2) the past has an influence on a present relationship, but the individual can decide how to be influenced by the past. Bridging the individual and the environment is the expected outcome from this research project, as well as bridging the past to influence a current relationship. Attachment is chosen as the central variable to bridge past and present with the individual and the context in which he/she lives. This

was one of my own biases. Coming from my own culture (Eastern) into the Western culture, I see that human beings have different behaviors and different thinking, but we all have the same emotions.

Even though attachment researchers operationalize attachment to the internal working model, and the internal working model is tied with cognition, the origins of attachment are the emotional connection between mother and child. This attachment tie is important for survival. By building the attachment between adult female survivors and their partners, the third expected outcome is to find an effective treatment model for this particular population by engaging them with their current environment so that they can live their lives to the fullest. I truly believe that these victims did not have a chance in childhood to heal because of their environments and because of their inability to seek help. In adulthood, they deserve to have a chance of happiness and to give their children different lives from what they had.

Figure 3-1. Data Analysis Process. Evolution of Attachment and Individual Developmental Experience Analysis

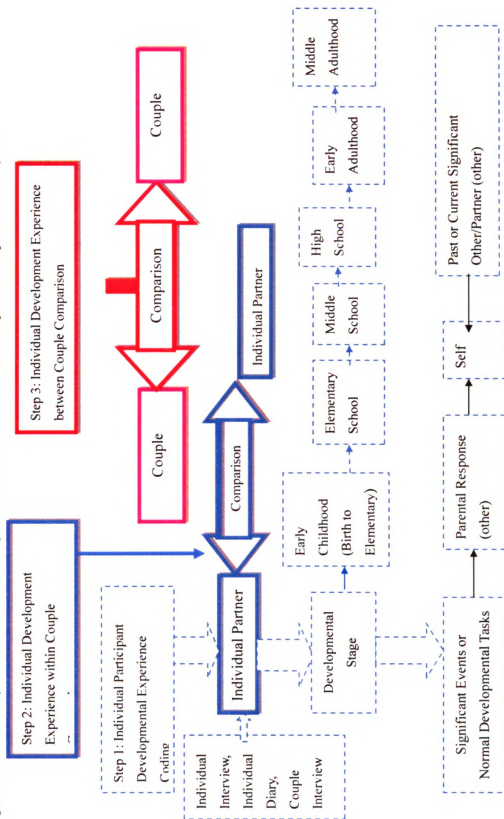
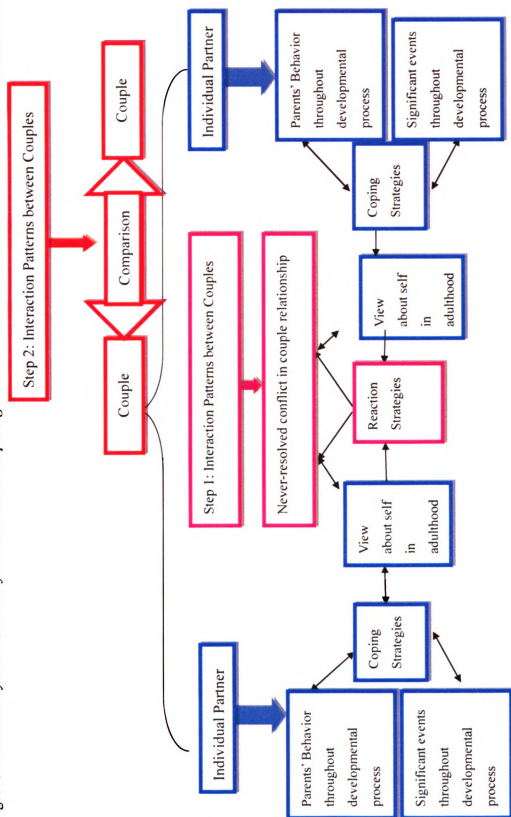


Figure 3-2. Data Analysis Process. Conflict Resolution: Comparing Past Attachment with Parents and Current Resolution with Partners



Chapter 4

Findings

Introduction

As outlined in Figure 3-1 and 3-2 on the above pages, the coding was organized by the participants. These were generated from their individual interviews, couple interviews, and individual diaries, and were coded based on the developmental stage and the changes of self and other. These corresponded with significant events that occurred in that developmental stage. Then, individuals were compared to their own partner's codes and their couple interview codes. Finally, couples were compared with one another. That is, each individual was compared within the couple relationship, and all couples were compared between couple relationships.

This chapter is organized based on the triangulation of research questions and within- and between-couple relationships. The first section is the presentation of the demographic data of each individual partner. Research questions 1 and 2 explored individual participants' significant developmental events and the influence on attachment development. The second and third sections are related to these two questions, and present the within-couple (section 2) and between-couple (section 3) comparison results. Research questions 3 and 4 explored the couple's experiences in the current relationship

and how past attachment development maintained/changed in current relationship. The fourth and fifth sections are related to these two questions, and present the within-couple (section 4) and between-couple (section 5) comparison results.

Demographic Data

The six couples that participated in this study included three African American participants, two Hispanic participants, and seven Caucasian participants. The mean age of the participants was 36, ranging from 25 to 55 years old. The length of couples' relationship ranged from 2 to 32 years, with a mean of 10.42 years. Four couples were married, and two couples were cohabitating. One of the participants was pursuing a GED at the time of the interview, four of the participants had a high school diploma or GED, seven of the participants had more than a high school education. Most of the participants had experienced some form of therapy in their lifetime, primarily individual therapy. More detailed demographic information is presented in Table 4-1 on page 188-189.

Eight of the participants had CSA experiences, including two couples in which both partners were CSA adult survivors. Five of the participants were sexually abused by family members, and three of them were abused by perpetrators who were not family members. Five of the participants experienced some form of physical or emotional abuse in their childhood, and five had substance abuse history. Four of the participants had

witnessed domestic violence (DV) in their family of origin. Two of the female survivors stated that their mothers were also CSA female survivors, and three participants shared information that their perpetrators had also molested other family members. Only two participants reported no forms of abuse (physical, emotional, sexual, substance, witnessing DV). A detailed history of different forms of abuse is presented in Table 4-2 on page 190-191.

Developmental Experiences: Within Couple Comparison

A comparison of individual development within couples found that the partners had similar developmental experiences. To demonstrate this finding, one couple was chosen to show how this looked in NVivo. The quotes from the rest of the couples are incorporated into the between-couple comparisons in the next section. Appendix 6 (Table 4-7) presents within-couple comparisons of the developmental experiences of the six couples stage by stage. These strategies were employed to reduce the amount of pages in this chapter, and still precisely demonstrate the findings.

Couple 1: Brad and Angie

Brad and Angie were in their mid-20s. Brad worked full-time and attended school part-time. Angie was a full-time student. At the time of the interview, they had been together for 4 years, had married for a year, and had a son in toddlerhood stage.

Similarities of Developmental Experiences

The first similarity in their developmental experiences was the primary early childhood memory of their parents' fighting.

Angie:

.....when I think about my childhood, I think about, hm, my parents' relationship, hm, because it was like a constant fight, basically (laugh),

Brad

.....the one memory I specifically have is, hm, like, they were fighting quite a bit, and, I made like this little, like cards, like, just saying basically that I loved them. I think I was maybe, maybe, in kindergarten or something like that, so, I mean it is probably mostly scribbles but, that was like the one time that I got them both to kind of stop

Second, they both had closer relationships with their fathers than with their mothers.

The close relationship with their fathers lasted up to mid-teenage years. Angie recalled that her father was more attentive to her needs than her mother was.

..... my brothers would torment me with that, like they would tell me like, oh, the spooky man is going to get you or whatever, so I would have like nightmares a lot, him coming in my bedroom, and it would always my dad that would come in, and you know, hold me, and told me, it's OK, you know, there is nobody is going to get you, and things like that, so, anyway, yeah, it always my dad that would come in,

She felt her mother was not sensitive to her needs and pain. She remembered her mother used her when her parents were fighting, being the youngest and the only girl,

... ..my mom sort of used me as a weapon, I guess, against my dad, hm, like they would fight and she would take me out of the house, like if you are going to leave me, I am going to take her,

(when she had nightmares) *my mom would come in when her and my dad were fighting, and she, almost she needed the consoling but she would hold me, everything.*

Brad described his father as being the “*steady force*” of his life after his parents’ divorce. His mother went through different relationships, and some of them were violent. Brad’s dad re-married when he was in second grade. His biggest fear as a child was that his parents would ask him to choose who he wanted to live with.

you could always tell that my interests was more with my dad, so that we (Brad and his mom) didn’t have a strong relationship, and my mom had a tendency to just like blown up, to just like pretty much melt down, hm, and it actually kind of force me to like shut down,

... ..I was like scared that they always would want me to actually pick one parent, that was my biggest fear. I couldn’t do it. I knew I couldn’t. I mean like, there was point where I would really, I couldn’t do it, there is no way. I mean, there was always kind of like talks about me maybe living with my grandparents, but I definitely remember that pressure was there that if they get toward to the point to where they didn’t get along, that subjects would come up again, and that was probably my biggest fears,

Third, both of their child sexual abuse incidents happened during their elementary school years. Angie was sexually abused by her two older brothers when she was in elementary school. At the time of the interview, she was in counseling and working on confronting her perpetrators. Brad was sexually abused by a female cousin of his own age and also was abused in his elementary school years. Brad has

very mixed feelings about this. He had difficulty processing the meaning and the influence of CSA on his life.

Angie

.....like, the way I remembered is more like, hm, he, XXX (older brother's name), the older brother, hm, was the first one, and then, I don't know if there is like a time lapse, but that sort of died out and started with the second one, I don't know if there is any sort of the connection between that,

Brad

.....it was a girl, (he identified it was one of his cousins in previous conversation) pretty close to the same age as me, hm, like, she was like my buddy girls like, probably 5 until about my teen years, hm, I mean, I think I was maybe 6, and, she said to me, she's like, "I was watching a movie, I don't remember she said who she was watching with, and there was this stuff that came out from guy's penis, and it was hot", and I am like, "I don't know, is it pee?" (laugh), (describing CSA)it, hm, it happened for a long time, I don't know if that's me, being abused, I don't, I don't know,I didn't know any of this, so, honestly, I, (sigh) I said up until probably approaching adolescence, and then, its stopped, but, I mean, like, (sigh). I don't know, I mean, like, it's like, I just like, stores away, I mean, I just, I don't, I don't know what to do with it myself,

Fourth, their relationship with their fathers started to change in the middle school and deteriorated in high school. For Brad, his father was unsupportive of his decision to play football and refused to communicate with him. He started to manipulate both parents to get what he wanted, and started to use drugs in high school.

... ..my dad didn't want me playing football at the time,, and I wanted to do it. So, I did it anyway, hm, and he wouldn't come to any of my games ever, so, hm. and he actually made me also get paper route, I guess, trying to

like sabotage so I wouldn't be able to pull off both, so, that's one thing I can definitely remember,

... ..his way with dealing with me at that time was, essentially, if I did something that wasn't what he wanted or disappointed him, it was pretty much like locked down, I mean, like I would lose everything, that's really what it was the breakdown of the communication between us happened, it's like, I did, I felt like kind of abandoned, I mean, it wasn't even the punishment so much, it's the fact like, this is, this guy is my hero, you know,

... ..I am like, this is something more than what's going on here so I am just going to leave, so that's actually the point where I started to at points I would like go and stayed with one parents for a long time because I get tired of one ways tries to deal with me, so. Then, it started to become more an issue because I kind of pick the strength and weakness of each one against the other and I became manipulative of them because I was ultimately trying to get what I wanted rather than dealing with them or the issues.

Brad described how the point when his relationship with his father broke down was when he tried to communicate with him. His father took away all his privileges and took out his anger on Brad's sister by telling Brad's sister that he was not her biological father. It was a family secret at the time.

.....I was 16 or 17, I think I was 16, and I actually went through, and I told him all the things that's going on with me, you know, like, I smoked marijuana, dadadadadah, you know, just coming through with stuff, because I wanted to reach out and maybe cut this stuff off, you know, like, I was really looking for, hm, some sort of understanding, I couldn't believe how upfront and honest I really was about everything, like I told him everything about me, like, and, that was the time, that's definitely the point where he completely cut off, that was when like, he took everything away from me, like, he took my guitars, like, you couldn't do anything, you go to school, you go to work, you come home, and that was pretty much the end of my relationship for the rest

of my teen years..... at that moment, when I told him all the stuff about myself, that same night, hm, he got me, my sister, my youngest, my brother, my next youngest sister I don't think she was born yet, my stepmom, and I all at the table, hm, and instead of dealing with going on with me, he decided that it was appropriate at that time, to, in front of everybody, tell my sister that he wasn't her dada. And I lost it, (laugh), like, I throw the chairs, I slam the doors, I actually tried to rip the doors off the hinges, he didn't, he never even like told my mom that he was going to tell my sister this, and he just, I don't know if it was some really fucked up way of punish me?

For Angie, she felt that she was not as worthy as her brothers because her parents always paid more attention to her brothers.

... ..like, growing up, hm, I always felt I was being shunned for being a girl, ham, because she (meant her mom) would always like praise my brothers for anything, and she still does this, hm, you know, like sports and academics or whatever, and for me, it's more like, your brothers did this kind of thing, hm, so, yeah
... ..no, my dad, my dad didn't either,I don't think they ever came to any of my games, and in high school, I was in track, they came to one track game, sort of, I felt like I was on the outside because I was the only girl, and sort of made me feel like insignificant, I guess, like for my brother who is a year older than me, my dad took him to every single soccer event and things like that, and then, you know, if I wanted to do this or whatever, it was sort of like "OK, whatever," you know what I mean (laugh), so, yeah.

The most significant event for Angie in high school years was her parents' divorce starting at the end of her middle school years. Her mother left, but would often call and yell at her and her brother. Her father started a new relationship and was usually out of town during weekends.

....my mom actually moved when more like when I was like 13 or so,

separated when I was 14, at that point, the divorce thing was going on, and the contact would be, hm, you know, screaming at XXXXX (her brother's name) and I, because we were the only two left at that point, "you are brats", hm, swearing at us, whatever, to the point we were just unplug the phone because it's like what's the point with this you cannot even rationalize with this women, you know.

Midway through high school, probably sophomore year for me, junior year for XXXXX (her brother's name), my oldest two brothers are moved out, my dad has started this relationship with who he didn't want anybody to know about her, like he would just say, I am going out of the town, here is 100 dollars each, you know, have a good weekend, basically to 15-year-olds, so, what I was doing was buying drugs, my dad was, his way of parenting was, you'll figure out sort of things, like there was never really like real guidance from him, you know, I mean, I understand at that point, his life was changing as well, but to me, a 15-, 16-year needs a little more than your 40-year old girlfriend or whatever (laugh),

She described her high school years as "crappy". She started to use drugs, got pregnant, and had an abortion.

.....hm, high school was, hm, pretty crappy for me (laugh), hm, I started drinking and drug use and things like that about 14, hm, I was actually kicked out my high school and had to finish through hm, like a home schooling sort of thing, hm, because I was not going to school,hm, in high school, I hm, got pregnant with my crappy boyfriend, and actually had an abortion, and hm, I didn't tell my parents, hm, I didn't really tell anybody,

The fifth similarity between Angie and Brad, as described above, was the history of substance abuse, including alcohol and illegal drugs, in high school. The sixth similarity between Angie and Brad's developmental experiences was the fact that they got suspended or dropped out from high school.

Angie:

I was actually kicked out my high school and had to finish through hm, like a home schooling sort of thing,

Brad

Along with the fall out of at various point with my parents, I also decided I was lot cool for school and dropped out. At this time, I thought I was one of the greatest musicians in the world and I need no one or any institution to stand in my way.

The last similarity between them was getting help from someone in early adulthood and moving away from town. They were able to re-construct their lives from that point. Angie described how she lived randomly with different people after high school. Finally, she was helped by her brother who molested her. Because of this experience, Angie had very mixed feelings about confronting her brother.

I was living randomly with people, hm, I lived with my mom, maybe for, I don't know, maybe 6 months, but we got kicked out the apartment because she wasn't paying the rent on time, when we got kicked out, I was sort of like, hm, where do I go, hm, and, it was just, I don't know, that was hard, so, then I lived with my aunt and uncle for a while but they were selling their house, so they bought the new house and they moved out and I was left in their house by myself, which I could move in with my dad but I was really resistant to that, hm,I felt like, yeah, I couldn't like depend on him because he was doing this new thing with his new wife (laugh), and sort of feel like he was leaving us behind, I guess (crying), so, that's really crappy situation, hanging out with crappy people, (laugh), you know, so, hm, that's when XXX (her brother) got me to here.

I mean, I am like forever like grateful that he did that for me, because I don't know if he hadn't, nobody was stepping in and helping, hm, if he hadn't done it, I don't know where I would be, you know (crying), and now my life is really good, I am really happy at where I am at, so, hm, you know

Brad left his hometown to get away from drugs. He was helped by one of his friends and his friend's family.

... ..it was getting pretty intense, so I left, came with a group of friends, that wanted to get away with these things, so, it's actually one of the friend that I really kind of screwed over I guess that actually have me come up with, this XXX (his friend), the one man who is my best man, he just, even though I really kind of betrayed him, I guess, he has always been like that, positive figure, as far as friends, you know, so, he still is willing to help me, yeah, take on the risk of having me around, just kind of give me a shot, hm, and he was actually my best man, and that would probably be I think of a my big part for me, not necessary like a mature factor, but just the fact like I had a family... ..

Influence of Family of Origin on the Development of Self and Other

Angie felt that, because of her parents' lack of support in her afterschool activities and academic progress, and her parents viewing her brothers as more important than she, made her feel insignificant and like an outsider in her family of origin. She felt that the conflicts between her parents caused them to overlook the signs of CSA, and allowed CSA to go on for years. Now, as an adult, she felt that all those factors influenced her view about herself.

.....my self confidence and self-esteem I guess, are, hm, lower than I think they should be, hm, I don't know, I sort of felt almost like, hm invisible in front of people who should see me the most, hm, like, and at certain point, I always would, I would think about, you know, if I could be a boy instead of girl kind of thing, because the boys are being treated well and getting the attention, and I am over here not being as much as attention of being abused (laugh), so, you know, so, yeah,

It seemed that Angie's way of seeking help or expressing her feelings to other people was to be angry or to push people away. She also noted that her reaction when she was uncomfortable about something was to push people away. She expressed that her behaviors were similar to her mother when her mother was angry in her diary.

.... her [mother] telling me that she was abused clarified a lot of things though. I understand her craziness now because that is exactly how I act when I get mad.

I am getting better now, but, for a long time, probably after our son is born, up until last year I guess, hm, he would come home, and I would be, before he would be get home, I would be happy that he was coming home because it is almost time, and then, he would get home, and I would be angry with him, hm, (when asked her explanation about this) I think more that fact that, I am afraid to let him know how I felt about him and let him know that I am happy for him to be home, so, instead, I just yell at him (laugh). If I am like uncomfortable about anything, that's usually what I do is get mad, you know, try to push people away.

Brad's current view about himself and his relationship with significant people in his life was influenced by his fears that he had to choose between his parents, feeling a sense of abandonment by his father, and, later, his father's angry outburst at his sister, and his mother's anger. He mentioned "failed" several times in his interview.

..... there was a lot of hostility on my part towards my dad, especially. I mean, it wasn't until actually, until my son was born, I kind of went back and just like, a lot of it was undeserved. I don't, the only thing that I can actually come up with was that somehow I felt they fail me or something.

(when talking about the beginning of their dating) *I actually kind little bit of a jerk the last time I saw Angie because I felt like I failed, I wasn't going to let her happy and apprehend things whatever.*

(when talking about their current relationship) *I just, I mean a lot of stuff that I wasn't prepare for that I am trying to get better, like, I just, I want to do what I can do to help, I mean, I just at points I feel like I am failing her, like,*

In childhood, when his father was angry, Brad would leave and go to his mom.

When his mother was angry, Brad would shut down and wait for things to be over.

I just, I remembered the point that I just like, sitting there like in the kitchen table, she was like screaming, and I wouldn't talk, I wouldn't do anything and wait for it to be over. So, I mean, that's a lot of what I remember about my mom honestly, just like, I was always nervous that there was going to be some sort of like, anger, so, I don't know.

The feeling of abandonment by his father and his father's rejection after he opened up to his father and coping with shutting down from his mother's anger seemed to influence how he sought help in his current relationship.

I mean, that's a big part for me, it's like, I don't want to like, throw mine on somebody else, if I haven't been able to deal with it, I mean, I don't know

I think, it, honestly, it takes me a while to work up to even getting a little pieces out, it's not like I don't want to, I don't think, its necessarily always feeling safe, but, I just, it does take me a while to get myself together, to, to do, like I just, even if just like telling you finally my dad telling my sister, like something that's been so overwhelming to me, like, it's taking me, I don't know, years to tell anybody, like, I just, it's just always been easier to forget it (laugh), put it outside of my mind, I guess, I mean, it's not gone, the stuff is there, but, it's just always been easier just to pretend like, it rolls off my back, or something like, it can't hurt me.

I don't, I don't even think like it's a safe factor, as much as like I don't want to appear like weak to you(meant Angie), I guess

Brad's sister moved in with them a few years ago. Brad and Angie wanted to provide his sister a chance to get out of her environment, just as they were helped by someone else. However, it did not go as well as they hoped. The couple's relationship with Brad's sister was one of the "never-resolved conflicts" in their relationship. Similar to his fear in childhood that he had to choose between his mom and dad, he felt that he had to choose between his wife and sister. Brad described how he felt in his diary:

I kind of feel like Germany. I have one side of course loyal to my wife and understanding her thought so I also share sort of the sour feelings. But then, another side is of course in a different situation as my sister is my sister and I don't want to continue to carry anger on resentment forever. Meanwhile, it is directly impacting my family in indirect means.

The way Brad's parents handled their couple relationship and their relationship with Brad continued to have an effect on his view about himself and his behaviors in his current relationship. He worried that he failed people (mainly his sister and Angie). He was easily triangulated in the relationship (between Angie and his sister). He was afraid of seeking help, and it was easy for him to shut down as a coping mechanism for his emotions. The way Angie's parents handled their own personal issues and their parenting attitude also influenced Angie. She felt insignificant, especially in front of people who

were important to her. She showed her needs with anger, which was similar to her mother's behavior.

Couple 2: Don and Rosie

Don and Rosie were in their late 20s and early 30s. They had been together since adolescence. They went through breakups and decided to get married when Rosie decided to leave her home country to study abroad. At the time of the interview, they had known each other for 14 years, dated for 9 years, and had been married for two years. Rosie was a full-time student attending graduate school, and Don self-studied to pursue a professional license, as well as to maintain his company in their home country. Rosie was sexually abused by her neighbor's male nanny when she was in preschool. She was abused at the same time as her neighbor's son who was of similar age as Rosie.

Similarities of Developmental Experiences

Don and Rosie both described how they were opposite from each other in many areas. Don described himself as a rebellious child from a poor family who attended bad schools, while Rosie was a good girl from a rich family and attended good schools. Rosie also described the difference between her and Don by saying she was a "*little nice girl*" and he was a "*long hair guy who listened to heavy metal music.*" Even though there were many differences in their backgrounds, Don and Rosie both came from a family where

their mothers were primary caregivers/decision makers with active roles towards the children. Don described his mother as a strong figure in the family who made decisions about parenting, discipline, and school-related issues. In his memory, his father was always in the background smoking, and had no voice.

Rosie remembered being very close to her mother, and her mother was always there to provide what she needed. She also remembered telling her parents that she was bullied in school and her mother went to the school to solve the problem for her. Also, they both had one parent who had the stronger power in the family. Don said that his mother was a stronger figure in the household, and his father was usually in the background. In contrast, Rosie said that her father was stronger in the household, and her mother was supportive of her father's decision.

They both found their career path in adolescence. One of the most significant memories Don had about his childhood was wood-working classes. It seemed that he was a person who discovered himself by doing. He discovered his passion in working with computer programming through work and built his company by learning it through work, not academic training. Rosie also set her career goals through hands-on volunteer work in the adolescent stage and later in her college internship.

Because their relationship dated back to their teenage years, their developmental

processes were connected. The major development of identity was experienced together.

When Don went through what he called “*the age to discover self*” in the teenage stage,

Rosie also went through a stage where she felt “*very insecure and desperate for*

affection.” As teenagers, sex became an issue in their relationship, and Rosie revealed

CSA to Don. He encouraged her to talk to her parents. She felt that that became a

significant event in her recovery process. It seemed that respect and acceptance in that

process played an important part and influenced their current relationship and

communication. Rosie also emphasized how revealing CSA to her parents was the most

difficult thing she had done in her life. She could not have done it without Don’s support

and encouragement. At the same time, Don, who went through his “discovery of life”,

was also accepted and encouraged by Rosie and his parents at that stage. He found his

career path through a nontraditional manner. Don explained that he would “*try to make*

her feel like she could tell me everything, because I want to feel the same way, trust her,

so I can tell her anything.”

Influence of Family of Origin on the Development of Self and Other

Rosie noted that she always had a very close relationship with her parents, especially

her mother. As her father was the authority figure in the family, Rosie said that she was

close to her father but was also afraid of him in her childhood. Her close relationship with

her mother had influence on the development of intimate relationships with others. In her diary, she described one incident regarding how she was triangulated into her parents' relationship. Her father was mad at her mother for being late and left home in the only car. Her mother had to walk miles to catch the bus in order to get to an event. After Rosie found out, she was very mad at her father. She was also mad at her mother for triangulating her into her parents' relationship.

In early adulthood, she broke up with Don, and part of the reason was that she was under her mother's influence. In those few years without Don, she was triangulated into another relationship with her ex-boyfriend at that time and suffered from emotional abuse and psychosomatic symptoms. After re-connecting with Don, Rosie found the strength to break up that violent relationship.

Overall, the positive relationship with her parents from childhood seemed to have a positive influence on her view about herself and interpersonal relationships. On two occasions during Rosie's interview (when she talked about being bullied in school and when she revealed CSA to her parents), she expressed the feeling that she always had confidence that her parents would support and help her when needed. It seemed that she felt accepted and supported by her parents, and, in turn, was able to provide the same support to other people. Rosie described how she was very good in interpersonal

relationships since childhood as “*people used to come and talk to me about their things, so somehow people would, hm, perceive me as this person they can trust.*” In her relationship with Don, especially during their teenage years, she had also received that from Don as described above. In return, she was able to ask for help and provide support in her relationship.

Don said that his current relationship with his parents was “like friends.” Don described himself as “having a problem with authority” since he was little. He wondered why he had to do certain things. He would challenge his parents by not doing what he was told to do. He also challenged teachers in school and got expelled from school. The turning point in his relationship with his parents was when he was expelled from school. When asked why this incident caused the change, he replied that his parents did not punish him, which made him realize that “*they actually were more worried than mad.*” This realization made him understand that his parents telling him to do certain things were their way of guiding him and of showing love. After that, he went through a few years of trying to find his identity by experimenting with alcohol, smoking, and other rebellious behaviors. At the same time, his parents respected his choices and let him experiment. Finally, he found his passion in his current career and started his company in early adulthood.

Don described his relationship with Rosie by saying that she “*could have changed me in some way, but she didn’t actually try to force me into doing stuff.*” This was exactly what Don needed, as he did not like people telling him what to do. It seemed that Don was able to be who he was and provided support and respect to Rosie at the same time. The major difference between this couple and the rest of the other couples was that Don said that he did not think CSA had any influence on their relationship.

Don said:

.....hm, (sigh), how could I explain this, we all have different kind of abuse, we all have things we don’t want to do, things we don’t want to do, as long as you respect other person, other partner, you shouldn’t have any problem with this. So, if Rosie didn’t feel comfortable with something, she told me, she told me, and, I, if I didn’t feel comfortable about something, I told her,

Ron’s statement summarized how this couple had taken took elements from their families of origin and worked them into their relationship ever since adolescence. That is, they respected and accepted the differences in each other, and, at the same time, they provided a secure base for each other when needed.

Couple 3: Ned and Elsa

Ned and Elsa are in their 50s, and is an inter-racial couple. At the time of the interview, they had been married for 32 years. Their children were grown and had moved away from home. Ned had a full-time job and Elsa had been a stay-at-home mother since

the beginning of their marriage. After their children grew up, Elsa went back to school, but was not able to finish it because of severe anxiety and depression. Elsa and Ned both were survivors of abuse. Elsa was sexually, physically, and emotionally abused by her father since around 4 or 5 years old, and the sexual abuse only stopped when she was around 11. Ned was the adult survivor of physical and alcohol abuse. His father abused alcohol and physically and emotionally abused his family, including his mother and siblings. Ned's father passed away in his early teens.

Similarities of Developmental Experiences

From an early age, both Ned and Elsa suffered physical and emotional abuse from their fathers. Elsa's father was also the perpetrator of her CSA. Both of their abuse experiences were severe and included threats. Both Ned and Elsa's mothers seemed to be powerless to protect them from the abuse. Ned had a positive relationship with his mother, remembering her as nurturing and loving. Witnessing his dad abusing his mom was really hard for Ned, and he begged her to take them and run away. However, his mother explained to him that his father provided for their family, and she chose to stay. When asked how he felt about his mother's response, he responded that he felt let down by his mom. Even so, he said that when his father was not around, his mother was able to provide happy times for the children.

Contrary to Ned's experiences with his mother, Elsa described her mother as very cold. Her mother was also powerless regarding her father's anger. Elsa also suspected that her mother knew about CSA but did not do anything about it. She described an incident when she was sick and was lying in bed between her parents. Her father started to touch her, and her mother did not have any response. Elsa felt that her mother was always afraid of other people's opinion about her, and Elsa thought that might be the reason her mother did not do anything about CSA. Elsa felt her mother valued her own reputation more than Elsa's safety. Elsa also felt that her mother sacrificed her to the wolf (Elsa's father).

Both partners started to develop mental health symptoms, especially psychosomatic symptoms, when they were very young, and those symptoms resurfaced in their middle adulthood. Ned described how he started to have somatic symptoms when Friday approached because his father usually abused alcohol and family members on weekends. He also started experiencing panic symptoms as early as 6 years old when he witnessed his father abusing his mother.

Elsa also experienced psychosomatic symptoms in her early adolescence. Contrary to Ned, her explanation about her somatic symptoms was to get attention from her mother. By middle school, she started to have suicidal ideation, and it continued through her high school years. Ned did not express that he had suicidal ideation, but in his diary, he wrote

that he did not think he would live very long because his “*life was sad and difficult*” in his middle school years.

In his middle school years, Ned joined a singing group, which brought him some joy in life. Elsa also mentioned that she had a chance to develop a different sense of identity through Girl Scouts.

Religion was a very important part of their life together. This dated back to their early adulthood. For Ned, his mother raised her family in the church. After his first marriage dissolved, he re-connected with religion to help him raise his son. For Elsa, she found religion through her friend’s family in high school. After high school, she joined a religious group where she met Ned. She called this group a “cult” and described the atmosphere there as similar to her family of origin. The reason they went to the religious group where they met was related to their family of origin. For Ned, it was connected to how his mother raised him. For Elsa, it was the similarities between that group and her family of origin that kept her attending.

Influence of Family of Origin on the Development of Self and Other

Elsa described the influence of her family of origin on how she viewed herself and other. She did not trust people easily, had very few friends, and had a lot of self-doubt.

Elsa described how she was very alone in elementary school, became a perfectionist, and

tried to be a “class clown” in middle school, but was filled with fear at the same time. She tried to be perfect so that her father would not abuse her. She tried to be funny and to have good grades so that people thought she was fine. She had very few friends since she was little, and thought something was wrong with her and that was why no one wanted to be her friend. At the same time, she also worried that people might hurt her. In her relationship, she described how she did not know how to make friends. When she met new people, she would try to do something to ruin the relationship.

Ned’s father passed away when Ned was 13 or 14 years of age. His older brother and sisters helped his mother to raise him. Even though his father had brought a lot of pain into his childhood, he also had experienced lots of nurturing from his mother and siblings. Ned expressed that he also had self-doubts about himself and often felt anger, sadness, and depression in childhood and continued to feel that way in adulthood. As an adult, he often belittled himself and felt angry just like his father. However, he felt very fortunate to have his family’s support, and he had therapy in adulthood to help stop dysfunctional family patterns. He said that he tried to use “gratitude” to live his life and believed that his religion would carry him through difficult times.

Ned said his father showed him what he did not want to be, and his mother showed him what he wanted to be. Since he was young, Ned wanted to find someone who would

be like his mother to be his wife, and he would not want to be like his father. In their relationship, Ned was able to provide Elsa with lots of nurturing and was always more positive about their lives together. On the other hand, Elsa was more negative and more rigid about the situation. During the interview and her personal diary, Elsa voiced many times that she wondered why she was so lucky to have Ned as her husband.

The couple had many similarities in their developmental process. However, because Ned had positive relationships with his mother and siblings, and Elsa did not have any positive relationships with any of her family members, it shaped their current views about self and other differently. Elsa's rigid and negative view and desire to control things was the influence from childhood CSA. Ned's self-doubt and anger was also an influence from his father's abuse. However, he also adopted positive attitudes, and approached his life with more freedom and a faith attitude, which was the influence from his mother.

Couple 4: Charlie and Tracy

Charlie and Tracy were in their late 20s and early 40s. At the time of the interview, they had dated for two and half years. They moved in together after they dated a while,. Tracy found out that she was pregnant. At the time of the interview, their son was almost a year old. Charlie had two sons from a previous marriage, who lived with the couple part-time. Tracy also was divorced, but did not have children from the previous

relationship. Charlie worked part-time and was planning to go back to school at the time of the interview. Tracy was a full-time student pursuing her graduate degree. Tracy was the survivor of child sexual abuse. She identified her mother and one of her brother's older friends as sexual abusers from preschool age until late elementary school years.

Similarities of Developmental Experiences

Charlie and Tracy both mentioned that they grew up in a rural and natural environment. Being outdoors was still very important to them. It also influenced Tracy's career choice, as she was pursuing education in a related field.

Experiencing an angry parent was another similarity between the partners. For Tracy, that parent was her mother, and for Charlie, it was his father. When talking about his childhood, he explicitly talked about his father's anger several times in the interview and his diary. He did not think he was as an abusive person, but he expressed that he was afraid of his father's anger. For Tracy, her mother was emotionally and physically abusive to her. She also described how her mother's anger was unpredictable, which added fear in her life.

Charlie and Tracy both talked about how they were afraid of making mistakes in their childhood. Throughout his developmental process, Charlie only got into trouble once in school, and he explained that he did not want to "*deal with the hassle*," which

was his father's anger, that came with the mistakes. He also liked the feeling of being praised when he did something right. Tracy was also afraid of making mistakes. She was afraid of making her mother angry but felt that she was never able to please her mother.

At the same time, they both had good memories about the other non-angry parent. Charlie had many good memories about his mother, especially reading stories together. During the interview, he often described his mother's characteristics and things she did, and added, "*I definitely got that from my mom.*" He described how he was into reading, music and play, which was from his mother's influences. He also was a shy person, which was similar to his mother.

For Tracy, even though her feelings were mixed now, as a child, she really loved her father. She described her father as gentle and not yelling, unlike her mother. As an adult, after going through therapy, Tracy's feelings about her father were mixed. She still had good memories about her father from childhood, but felt negatively about her father making excuses for her mother and not believing her when she asked for help from him.

Influenced by his mother, Charlie liked to read, to play music, and engaged in other artistic activities. He described how he always liked to read. He felt that his father was disappointed because his father was more into physical activity and would tease him a lot for not being physical enough. Under her parents' encouragement, reading was also an

important part of Tracy's life when she was young. It provided some refuge for Tracy to get away from things happening at home. Through reading, she learned other people's experiences when going through abuse.

Music was very important for Charlie. As a matter of fact, after he started playing music in the band in high school, it took away his shyness and helped him to engage with people. Both his parents accepted and encouraged him to engage in music. Music also was important in Tracy's life in high school. She started to play flute in the band, and, more importantly, she met a group of friends who provided support for her outside the home. Tracy described the importance of her friends in her life, some of whom were from similar environments, and provided strength for her to get through rough times at home. Some of them were from different environments than hers and provided for her an opportunity to observe different family dynamics from hers.

The other similarity between Charlie and Tracy was their desire to "*want to see the world.*" For Charlie, he felt that he was constrained in the small town in which he grew up, and he "*always wanted to see what was out there.*" In high school, he would date girls from out of town and eventually left his home town for a college education. For Tracy, also in the high school stage, influenced by her uncle and aunt, she desired to travel and to see the world. In college, Tracy studied abroad, and after college, she settled in

England and lived there for many years. Charlie went to California. They both talked about how each did not plan to come back when they went away. However, for different reasons, they both came back to Michigan.

Influence of Family of Origin on the Development of Self and Other

Explicitly and implicitly, both partners talked about how they loved the outdoors, music, reading, travel, and how they both had vivid imaginations. These were the influences from the environments in which they grew up and the opportunities their parents had provided for them. However, when asked about the biggest influence from their families, they responded that they hoped they would not be like their angry parents. Charlie was afraid of being angry like his dad. However, he also identified that he saw his depression and low self-esteem pattern as similar to his father's. For Tracy, she was afraid of becoming angry and domineering like her mother. She expressed that she found her *"behaviors sometimes wrap around not wanting to be her."*

Tracy had a long history in therapy dealing with her eating disorder (anorexia in adolescence and bulimia in early adulthood) and sexual abuse. Through therapy, she learned to manage and express her anger. After several years of therapy, Tracy described her current view about herself as divided. One part of her did value her ability to survive in her family of origin (current model of self). However, the other part of her continued to

feel that *“I just inherently provoke other people’s anger, and no matter how good I tried to be, there is always going to be somebody close to me who is angry at me”* (childhood model of self).

Similar to Tracy, Charlie also described two aspects of himself. On one hand, he was shy like his mother; on the other hand, influenced by his mother and accepted by his father, through music and performance, he broke through his shyness. It seemed that Charlie did want to be seen and accepted, but was afraid to show it. As he said in his diary, music was the only thing his father encouraged him in, because his father teased him a lot for not being physical enough. It seemed that he had to watch out what he wanted to show in order to be accepted by his father. In his diary, he also expressed that he adopted his father’s low self-esteem and depression pattern. For example, he did not think himself capable of doing office type jobs.

Couple 5: Larry and Mary

Larry and Mary are in their early 30s and late 20s. At the time of the interview, they had been in the relationship for eight years, and had been married for six years. Larry had a full-time job, and Mary was a stay-at-home mom. They had three children living in the household. One was from Mary’s previous relationship, and two were their biological children. Both Larry and Mary were CSA survivors. Mary was sexually abused by her

mother and mother's boyfriend since her preschool years until she was a teenager. She described it as "*a hit and miss situation.*" Larry was abused by an older male friend several times.

Similarities of Developmental Experiences

Both Larry and Mary were from divorced families. Their parents were divorced when they were toddlers. Larry said he was probably 3 years old when his parents were divorced. Mary said her parents were divorced when she was around 2 years old. Both described their relationship with their father as distant. When they were asked about memories of their fathers in childhood, Mary replied that she did not know her father at all, and Larry replied that his memory about his father was sketchy and distant throughout his childhood.

After their parents' divorces, Larry still saw his dad irregularly through visitation. However, according to him, it was a distant relationship, and this still bothered him. As an adult, he was able to understand that his father loved him by working hard. However, as a child, he wondered all the time whether his father loved him. Mary did not have any contact with her father until she was in high school.

Larry and Mary had very different experiences in their relationships with their mothers. Larry described his relationship with his mother as good, and she was very

attentive to his needs and caring. On the other hand, Mary did not have good relationship with her mother. She said her mother abused illegal drugs and was unstable emotionally.

The other significant similarity between Larry and Mary was that both of them spent most of their childhood moving around with their mothers. Larry reported that he was in seven different school districts between kindergarten and 5th grade. Mary also moved around with her mother three times before middle school.

The most significant influence from moving around with their mothers was the difficulty in their interpersonal relationships. Larry described how by the 3rd grade, he did not want to make friends anymore because it was too hard to make friends and lose them. Also, he experienced bullying by other children in the schools. He learned to keep everything to himself. Mary also experienced losing friends in each school and it was harder and harder to make new friends as she moved around with her mother.

Both Larry and Mary started to have a more stable life by the end of their elementary school years. Larry moved in with his father in the 5th grade and was stabilized until his father sold the business and moved away in his 10th grade year. Mary's mother got a permanent job when Mary was in the 6th grade and moved them to another city permanently.

After Larry's father sold his business, Larry moved in with his mother again for a year.

However, he did not like that school district and decided to become emancipated from his parents and move back to the school district where his father formerly lived. Mary started to act out sexually in high school. During high school, she moved in and out of her mother's place to live with a boyfriend who was more than 10 years older than her. She wanted to emancipate from her mother, but failed to do so and moved back in with her mother again.

Larry moved out of the state and went to college. After getting her high school diploma, Mary also moved out of the state with her first child's father for a while. It turned out to be an abusive relationship, and she moved back with her mother. Larry moved back to Michigan after finishing his college education.

Influence of Family of Origin on the Development of Self and Other

Moving around from childhood and adulthood had significant influences on both partners' development. When asked about the influence of families of origin, their mothers' moving around was one of the important events they both brought up. They also mentioned that they hoped to provide more stability for their children.

Moving frequently in childhood not only negatively influenced Larry's interpersonal relationships, but also his view about himself. Specifically, he was afraid of being hurt and rejected. He tended to wait for people to reach out to him instead of reaching out to them.

However, he also believed that everyone had a good heart, and he learned from his mother to appreciate people and to give them a chance. Interestingly, his description about himself was similar to his childhood memory of his father. He described his father as a private person who was not very social and always kept to himself. His memory about his mother was also very similar to his view about other people. He described his mother as being very caring to children and always looking for the best in people even when she was taken advantage of by the world. It seemed that Larry was willing to give people a chance to prove they were trustworthy. At the same time, he feared that he would not be accepted by other people.

The influence of her father's absence was unknown to Mary. Her mother influenced how she viewed herself and other people. She tried to see the best in people (to be unlike her mother she said), except when that person was irrational (which was how she described her mother). She said that she often heard her own internal voices criticizing herself, and she put herself down just like her mother did when she was little. In her diary, she described how she felt "*useless*" just like her mother had told her. After receiving therapy, she had some awareness about her internal voice and learned to shut it down.

In Mary's interview, she mentioned several times that she would confront her mother's inconsistent behaviors to her or other adults in her childhood. For example, her

mother sent her to the church's youth group, and she came back home and confronted her mother's relationship with her boyfriend as adultery. (Mary's mother's boyfriend was married while dating Mary's mother throughout Mary's childhood.) Mary's mother would reply to Mary that the Bible also taught her to respect parents. Mary's response in a situation like that was to, in her mind, talk back and criticize her mother or the adults she encountered. She might have developed the pattern that she alternated between devaluing her mother and idealizing herself through confronting her mother/other adults verbally, shutting down verbally, and then confronting her mother/ other adults mentally. Also, this alternating between two extreme patterns might have helped her to cope with her mother's inconsistent behaviors.

Mary presented similar behaviors in her interview. According to her, she was diagnosed with Borderline Personality Traits by her therapist. Her Borderline Personality traits appeared in the interview. For example, she was scattered and not able to focus on the topics. She often showed the pattern of alternating between devaluing other people and idealizing herself. Her pattern was that she would describe her reactions in the situation, and then, comment on other people's (usually her mother) behaviors as inappropriate, and/or found a way to blame it on her mother or someone else.

Couple 6: Bill and Adele

Bill and Adele are in their mid-30s and early 20s. At the time of the interview, they were engaged and had been together for 2 years. Bill was going through training to get his GED and his license for truck driving. Adele was a stay-at-home mom. They had three children living in their household. Two of them were from Adele's previous relationships and one was their biological child. Adele and Bill were both survivors. Adele was sexually abused by her step-grandfather when she was around the age of five until the end of her elementary school years. Bill was abused by his father physically and emotionally until he was going into middle school. He also witnessed his father physically abuse his step-mother when he was young.

Similarities of Developmental Experiences

Bill and Adele both grew up in families with a controlling father. Bill described his father as a womanizer who needed to have control over women to make him feel good about himself. Adele described her father as "*the king of the house*," and her mother, as usually going along with her father's decision.

In their homes, both of their fathers were in charge of discipline and their mothers were more lenient. Adele remembered that her father was very involved in her school and was also the "*reinforcer*" at home. For Bill, his father's discipline often was physically and verbally abusive. He remembered being called "*dummy*" and being physically

punished frequently. He realized his limitation in academic work and tried to gain approval from his father in other areas. After he moved back with his mother at around age 13, he worked hard at his work as if he was still trying to gain approval from his father.

Adele had a very close relationship with her family and extended family since early childhood. Her childhood memories were all about her family gatherings and parental participation in her school activities. In high school, she revealed CSA to her parents because her younger sister was raped, and she wanted to encourage her younger sister to talk by sharing her own stories. After she revealed CSA to her parents, her father asked her to leave home as requested by her step-grandfather and grandmother. They accused her of lying to the family and extended family. Adele emancipated from her family at age 16 and lived in different independent living programs until she turned 18.

Bill also emancipated from his family in his high school years. His father and stepmother divorced when Bill was in middle school. Bill moved in with his mother again. His mother did not force him to go to school. By the first year in high school, he went to school less and less, and ended up dropping out. Bill started to work when he was 13 years old. After he dropped out of the school, he emancipated from his family, too.

Both Adele and Bill became parents at age 19. Adele did finish high school. She got

pregnant with her first child at age 18 and moved in with her son's father's family. Bill's ex-wife was pregnant when Bill was 18, and they married.

Influence of Family of Origin on the Development of Self and Other

For Adele, CSA and her parents' reaction to her revelation were the two most important incidents in her developmental process. According to Adele, CSA made her fear older males. She did not trust males older than she, and chose males younger than her to date. Her step-grandfather threatened her not to tell about the abuse and told her that no one would believe her anyway. When she finally told her parents and they did not believe her, she felt that her perpetrator was right that no one would believe her.

Because of CSA and the betrayal from her father after revealing CSA, Adele said that she had difficulties trusting people and speaking her mind. She had fears that speaking would ruin her relationship with other people and people would treat her as her father had. In intimate relationships, she was afraid of being controlled by men. She felt that by "*not letting my guard down,*" her partner would have the chance to control her. However, she was proud of herself for never using drugs or participating in any illegal activities. Her explanation was that she wanted to provide her son with a positive relationship, which was the motivation for her to do things "*right.*"

For Bill, his family of origin also influenced his trust of people and himself. Bill

described his mother as being the oldest and only girl in her family of origin. She took care of her younger siblings because their mother died when all the siblings were young. In Bill's childhood, even though his mother tried to provide him with as much as she could, he often felt that he had to compete with his uncles for his mother's attention. When Bill was around 18, he found out his girlfriend was pregnant and decided to marry her. However, while preparing for the wedding, he found out that his girlfriend also cheated on him with his uncle, his mother's brother. The cheating continued throughout their marriage. The frustration in his marriage influenced him. He said that he "*became bitter,*" just like his father.

Bill said that he idolized his father, and tried to please him. However, in elementary school, his father's harsh discipline made him feel betrayed. In order to gain his father's approval, he worked very hard in other areas of his life, mainly his work. He gained recognition from people outside his family, and expressed that he was happy about himself as an adult.

When asked how his family of origin influenced him, he responded that he got bitter, mean, and angry at times when Adele did not put him as her priority. He recognized his accomplishment in his work, but felt insecure and was afraid of losing Adele in his intimate relationship.

Developmental Experiences: Between Couple Comparison

A few patterns emerged when comparing the six couples in their developmental process. First, comparing background information within couples found that the partners had similar background experiences. (Please refer to Table 4-1 on page 188-189.) Parental marital status exhibited in the bottom of Table 4-1 (page 189) showed that other than couple 5 and couple 6, the rest of the couples' biological parents had the same marital status. Even when their biological parents had different marital status, such as couple 5 and 6, it was still similar. Both partners in couple 5 were from families where their parents were divorced, except that Larry's biological parents were remarried and Mary's were not. Both partners in couple 6 were from families where their fathers had had previous relationships and cohabitated with their mothers until the children were born. The similarity of the partners' biological parents' marital status seemed to have direct and significant influences on the participants' developmental experiences. For example, the partners in couple 1 experienced their parents' conflicts since early childhood. Their parents' conflicts resulted in divorce later on. The parental conflict and divorce both had influences on their development. Their similar developmental experiences were related to their own biological parents' marital status. The partners in couple 5 both experienced frequent moving in childhood. Their mothers moving around was for job opportunities,

which was the result of their divorces.

Second, five out of the six couples (except couple 6) had similar experiences in their early childhoods. Four couples went through similar experiences in the elementary school stage (couple 1, 3, 5, and 6). Five couples had similar developmental experiences in the high school stage (couple 1, 2, 3, 4, and 5). Partners in couples 1 and 3 went through similar experiences throughout their developmental stages from early childhood until early adulthood before they met. (Please see Table 4-3 on page 192)

Third, at least one partner in each couple had a good relationship with his/her parents in childhood. (Please see Table 4-4 on page 193.) In couple 1, Angie and Bred both had a steady positive relationship with their fathers until the middle school years. In couple 2, Rosie still has a positive and close relationship with both her parents. All male partners in couples 3, 4, and 5 continue to have positive relationships with their mothers. In couple 6, Adele had a positive relationship with both her parents until high school and continued to have a positive relationship with her mother until her mother passed away. In addition, other than couple 1, the participants who had positive relationships with their parents, including Rosie (couple 2), Ned (couple 3), Charlie (couple 4), Larry (couple 5), and Adele (couple 6), identified their mothers as the one they were close to in childhood. The close relationships with their mothers continued to adulthood. Participants who identified

their father as the close parent in childhood, including Angie (couple 1), Brad (couple 1), and Adele (couple 6), had positive relationships with their fathers until adolescence.

(Please see Angie's and Brad's quotes in the previous section on page 101-103.)

Rosie

... ..my mother, she was always like, (laugh), taking care of me, taking care of that's nothing would, hm, you know, I don't need anything, she was always there, too. Hm, she gives it to me, she would also, sometimes, punish me, but not that often as my father, hm, I used to go with her, everywhere, we used to have that close relationship since I was a little girl (laugh), a baby, because I was the only woman, hm, you know, we connected very much, and the connection is still there today, yeah, she was a very, a wonderful mother.

Ned

.....my, my mom was a nurturer, she brought hugs, and kisses, she kisses my face, and she let me kisses her faces, and she is that kind of person she would let me touch her face, her face was soft, and, and, I felt nurturing and care for by her,

Charlie

.....when I was little, hm, I think, I, would usually just go to my mom, if I needed something, or wanted something, because I felt more comfortable asking, and I think I still even, I've always felt more comfortable asking my mom on things,

Larry

I always love my mom, cause she was, cause it seems she's always there when I needed her, hm, you know, something happened, I got hurt or anything, mom was the person I went to, and mom was the one that make sure I was taking care of,

Adele

.....my mom, she was really a loving person, and she loved children,she had, hm, the everybody always looked up to her, everybody, you know, all my cousin, she was always the favorite aunt, you know, and, hm, she is a really, really caring

person, I learned a lot from my mom,

Table 4-4 on page 193 compares each individual participant's relationship with his/her father and mother in childhood and adulthood. All the participants' relationships with their mothers stayed the same except Don, whose relationship with his father and mother went through the same positive change during the adolescent stage. Seven of the participants went through a relationship change with their fathers. Within these seven participants, four changed because of significant events in adolescence. Brad, Angie, and Adele all had positive relationships with their fathers until adolescence. The significant events in their adolescent stage changed their relationship with their fathers. At the time of the interview, their relationships with their fathers were not close.

Adele

.....it's hard for me to just dislike people, you know even though my dad put me through a lot of hurt and my feeling bad, I still love my dad and I want to feel close to him, but, it's just so hard for him (her fiancée) to know that this is the person (her father) that as a child I was always with, and I love my daddy so much that he would allow something like that to go on, even though he didn't know personally, but when I told him, I felt that he would trust me than anybody in the world that he would believe me,

Don had positive change with his father (and mother) in adolescence.

Actually they didn't punish me, they actually more worried than mad, that's when I started to realize it's not the problem between someone that's, hm, bigger than you, or knows more than you, or has the hierarchy than you, but, they just wanted to do something good for the children, that's when I started to realize that, hm, when they didn't actually punish me, you know, it

would be better if they just punish me, because I knew "oh, I don't want to do that," but when you started, when I started to realize that, they guided me in their ways, it wasn't because of that, it was because they were trying to help me out, because they really love me, that's when I started to realize, it's not about, you shouldn't just hm, go up against them, just try to talk to them, that's when I started realize that, that, hm, at the moment, I was still trying to find my place, hm, know myself, to be able to do whatever I want, so, after that happened to me, they just really, really sad, yeah... .. really, really well, it's like, now I see them as my parents, concerned parents, not the authority figures, so, that's opens up a lot of doors of course, when they gave up, (laugh), when they gave up on trying to steer me into doing what's good for me, that's the real turning point. And, the other turning point was when I realized that no one can actually make me do what they want to do, hm, so, I realized that I did... then, I do what I do.

Tracy and Ned both went through therapy and changed their views about their fathers in middle adulthood.

Tracy

.....my feelings are mixed now, as a child, I really loved him because he wasn't the one that was violent, although, looking back, being in counseling and talking to other people, he didn't, he didn't stop what's going on, and he knew, so, in some ways, he is a, hm, collaborator

Ned

.....if it weren't for therapy, I, I, I would hate myself because I look like him, but because of therapy, I, understand him better, and, hm, now I love him, ... and because of therapy, I understand my own pain better, and hm, and it's help me, hm, practice on myself,

Bill had a relationship change with his father in adulthood after confronting his father.

.....and, hm, I remembered him talking to me one, one day, on the phone, and,

hm, he asked me, he said, "do you think I was a good father," I said, "yeah, you know, you made your mistakes, other than that, yeah," I said, "Dad, you know what," I said to him, " it hurt us the way you talked to us and do things, back at then," but I said, "I understand, I learned to understand that the reason why you react that way was because you were never taught how to be a parent, you know. I learn to forgive," and I said, "I loved you, I wouldn't change how much I love you, you know I wouldn't change that," and now, he talks, like, he would say, "hey, you stick with the school thing," you know, he didn't come at me crazy, because I, I got to the point to where I wouldn't talk to him, you know,

Last, comparing the six couples' current model of self and other (Table 4-5 on pages 194-195), there are two patterns that emerge. The first pattern is the copy-cope pattern between the partners. That is, one partner's current model of self/other was developed from his/her coping from childhood experiences while the other partner's current model of self/other was the same as his/her parents in childhood. The second pattern is the cope-cope pattern. That is, both partners adopted their coping strategies from childhood and continued to use them in current model of self/other.

In terms of current model of self, couples 1 and 6 displayed cope-cope patterns, and the rest of the couples displayed copy-cope patterns. For couple 1, Brad's fear of failing other people was the influence from coping with his parents' divorce, and Angie's low self-esteem was the influence from her parents' disregard of her performance academically and non-academically as well as not protecting her from sexual abuse. For couple 6, Bill's contentment about himself in his career was the influence of pleasing his

father. Adele felt abandoned by her family. Her coping was to protect herself and her son from being hurt by her own family again.

Couple 6

Cope - Bill

I've been working since I was 13 years old, when, I was buying my own stuff, my clothes in the summer, for the school years, and, you know, I mean, I've always, worked, worked, worked, I've always tried to do something, and I've always there to do better, no matter what I did, you know, so, now, as a grown man, I am, I am happy with who I am,

Cope - Adele

.....one thing that I can honestly say, I was never resolved it to use drugs, I never resulted it to, hm, you know, doing really bad things to really hurt myself,... I love my son and I need to be there for my son because I don't want them to wound up with my family, because I don't want nothing to ever happen to him,.....

Couples 2, 3, 4, and 5 presented copy-cope pattern. For couple 2, Don had confidence about his ability in his career. However, he experienced loss of his identity in this new country and the need to re-search his identity was similar to his search for his identity in adolescence stage (copying). Rosie's nurturing behaviors were similar to her mother's (copying). In Couple 3, Ned adopted his angry fathers' behaviors to view themselves (copying), and Elsa also continued to use the same coping strategies in her view about herself (coping). For couple 4, Charlie adopted his father's behaviors in his view about himself (copying) while Tracy learned that her ability to survive her mother's abuse was great (coping). For couple 5, Larry viewed himself not capable of expressing

himself and to reach out to people (coping) while Mary continued to play her mother's criticism in her head and feel powerless and useless as her childhood feelings (coping).

Couple 2

Copy - Rosie

At this point, I'm thinking and remembering my mother and how she had the very same conflict with my father. She was always late and he was always so punctual in his own time. It is sometimes frustrating for me to feel that I am replicating that pattern. At the same time, I'm thinking about couple dynamics and how, while Don was away for a month in January this year, and I was alone, I did not have any problem organizing my time and being punctual.

Copy - Don

.....smoking for me began when I was really young, and, hm, it was kind of for rebellious, hm, later on, I began to, how do you call this....(in Spanish) like, the social support thing, and I came to depend on when I was really stress, this became like an identity thing when I came here to the United State, because, hm, back in XXXXX (his home country), I can do whatever I wanted to do, whenever I wanted to do, I had a job, I had some money, I had a car, had my friends, but once I got here, the problem was such, that, I didn't have an identity, I couldn't even open a bank account, I didn't have any money, I couldn't smoke, then, I was trying to work, and I couldn't smoke any more, and, then it became to be, not much of trying to quit smoking, but trying to maintain a part of myself, as it was, and that's why I think, I couldn't, hm, or I haven't been able to completely leave it, because that's one of the things keeps me being me, here, so, I have identified with it, so, that's the problem, that's the main reason that keeps me smoking, actually, hm, I didn't feel that much the need for smoking as I used to,

Couple 3

Copy - Ned

I learned not to be, and I am still learning, not to be so tough, so critical of myself, because, of his self belittle himself, and, couldn't love himself, you know, you're kind inherit that, and so, try to practice being loving

myself, and then, try to understand, to try to knock out of that

Copy - Elsa

It's (CSA) changed the way I view myself with less worth and more shame. I figured it would not have happened if I was a better girl, a better daughter, more truthful, more pleasing to my parents.

I trust very few people, I trusted very, very few people, and I don't have many close friends, cause I don't trust people, hm, so that's one major thing, another is I doubt myself a lot,

Couple 4

Copy – Charlie

.....he just, he always thought himself as just not very smart, and not capable academically at all, which I don't think it's true, I think he is very smart, he runs his own business, but just don't give himself credits for it all, so I think he has kind of self-esteem issues, similar which I've been kind of dealing with it, too, ... It's strange that has feeling not good enough leads him to make me feel not-good-enough, too.

I can see how I have adapted some of the self depressing attitude + habits of my dad. But, he adopted them from an abusive childhood, they are really totally inappropriate for me.

Copy - Tracy

I described it as living in the war zone, because you never knew when she was going to blow up, and sometimes you tried to do something good, and she blew up, because she misunderstood you (laugh), or you did something bad, and she wouldn't notice because she was preoccupied with something else, so there is no predicting when things would happen there are two parts of me still I think, and hm, one part of me believes that, it was just luck of the draw, I was born to a mom who had terrible experiences, and to a dad who just hasn't had the tools to handle the situation, and I did the best I could to survive, and, hm, in fact, I survived emotionally, and relatively well (laugh) till now is a huge deal, there were still a lot of good things from the reading, and being outdoors, and that little girl must be strong enough to survive.....,

Couple 5

Copy - Mary

(after describing short of money to get her son to the dentist,) things like this make me feel like my mother was right whenever she called me useless, when she say that I shouldn't have kids because I'm too much of a fuck up....I think listening to her, like put me down and like that, it's something that's really hard for me to work out in my head,

Copy - Larry

.....hm, I think my experiences growing up, kind of, being a little bit sheltered to myself, hm, I am not as outgoing to, hm, just walk to the group of people and trying to make friends with them, cause I just, I personally as the child growing up, my moving so much, losing so many friends, that, made new friends became such a challenge, I am afraid of losing them, being hurt like, I rather just stick with the small group of friends I do know have, waited that person kind of waiting for that person to come

In terms of current model of other, most couples presented cope-cope patterns, which was opposite from current model of self. Couple 1 presented both cope-cope and copy-cope patterns. Couple 2 and couple 3 presented copy-cope patterns. Couples 4, 5, and 6 presented cope-cope patterns. For couple 1, Brad's fear of being weak and asking for help was the influence from his father's rejection and his mother's anger. Angie's feeling of being invisible was the influence of her parents' disregard of her performance, but her anger was the same behavior as her mother to cover up her true feelings.

Couples 2 and 3 showed a copy-cope pattern. Don learned from his parents' and Rosie's acceptance when he was acting out in adolescence that he could get support from them. Rosie displayed the same nurturing behaviors as her parents and knew that she was

accepted by them and Don in her developmental process. Ned learned from his mother to trust God and knew that he was loved and supported by his mother and his siblings. On the other hand, Elsa's wondering of why people liked her was the influence from CSA.

Copy - Ned

.....it hurt your life, the abuse, it hurt your life, I can't, yeah, I would have to say that, but I think, in a way, we've been fortunate, because we do have connections with her family and my family, and hm, without that, that love and support, even with the conflicts and challenges of the personalities, I don't think we would have done as well in our marriages, in our jobs,

Cope - Elsa

I thought, that I was really hateful, and (crying) there was something very bad about me, so, I just thought that why people didn't want to be friends with me, and hm, it scared me to have friends also because you never knew when they might hurt you, and still a problem now, I don't have many friends, I'll, I'll make a friend and I'll do something to ruin it, and so, I'll get a friend for maybe 3 to 9 months, and I'll ruin it somehow,

Couples 4, 5, and 6 presented cope-cope patterns. For couple 4, Tracy felt that there was something wrong about her to trigger other people's anger and that was from the influence of her mother's anger. Charlie's fear of being hurt and/or disapproved of by other people was his coping with his father's disapproval of his interests. For couple 5, Larry's fear of being hurt by other people was the influence from childhood moving around. Mary also learned from her experiences that people usually did not believe her story. Bill's insecurity was the trauma from his father's physical abuse and his ex-wife's betrayal. Adele's fear of being hurt was the influence from her family's betrayal and

CSA.

Couple 4

Tracy

.....but the other part is the part that's, that I am having hard time shaking, which, believed that, hm, I provoke people's anger, and there is something about me that just inherittently provoke other people's anger, and no matter how good I tried to be, there is always going to be somebody close to me who is angry at me,

Charlie

He has always been supportive of my music, but after then that I can't think of many nice or encourage things at all. He teased me a lot for not being strong --- sissy, kind of teasing --- mama's boy--- stuff, like that.

Couple 5

Larry (same quotes as on page 146)

Mary

I told people, they didn't care, or they didn't believe me, I told my youth pastor in church, his response was to forgive through counseling, that's not the right answer, he didn't go to the police, he didn't question my mother, nothing happened, beside, who counsel you?

Couple 6

Bill

.....it's like you could think of something as wrong way, or you can perceive something as wrong way but not that way, you know, like, I feel, I fear, like, I have fear of losing her, you know, and that could cause you to be somewhat jealous, you know what I mean,

Adele

... ..hm, between my dad and stepdad, my trust for men, I feel like, men, they would try to take advantage of me and control it, I can't let a man take control of my life,

.....it effects me so much even with people around me, it's like, I would be scared to speak up my mind for sometimes, because I feel like it would just shorten everything, like, you know, people would treated me the same way like my dad treated me if I told them how I feel, like if I feel people taken

advantage of me, if I said something, everybody would turn on me, saying like, she is just acting like crazy, you know.....

Interaction of Childhood and Adulthood Attachment: Within Couple Comparison

Research questions 3 and 4 explored the couples' experiences in their current relationship, and whether there were similarities or differences in the couples' interaction and their relationship with their parents. In this study, couples were asked to identify the issues that they were not able to resolve in their communication and to demonstrate them during the couple interviews. The couples' interactions were then compared with their perception about self and their relationship with their parents. In this section, only the quotes from couple 1 are presented to demonstrate the comparison process. The quotes from the rest of the couples will be presented in the between-couple comparisons in the next section.

Couple 1: Brad and Angie

Experiences in their Current Relationship

Angie described her relationship with Brad as “*supportive, fun, and helpful*,” and Brad described their relationship as “*a little bit funny, tough, and hope*.” Brad stated that Angie was like his “*reality check*” and he gradually felt safe enough to show his vulnerability in front of Angie. Angie stated that they knew how to support each other but they still needed to work on the communication.

Brad

.....she is definitely my reality check. At this point of my life, like, (sigh) maybe I don't take things serious enough anymore, like, I mean, I do, I do the work I needed to do, I didn't do the stupid stuff, and to make our life better, but, she definitely helps to kind of correct my ego a little bit, hm, it is kind of be the foundation for me, I guess, I mean, like, it's the only relationship I have ever had, it's been like there, it's something tangible to me,

I mean, I want someone who is going to be there for me, understands a little bit where I am coming from, and maybe has issues like I do, I think that is the biggest part of, like, I didn't have to hide those type of things from her, I don't have to like, necessary hide weakness unless I want to, I mean, the only reason I can't express something to her is because I am not expressing them, I mean, that's something I had other people did that with me, like in the past, like, where they felt like they could open up with stuff, and I wouldn't do it in return. With her, it's slow with some of the stuff, but I am coming out with some of the stuff the things that make me feel insecure and vulnerable.

Angie

Brad is one of the only people, probably aside from my brother, who I see really sees me and hm, supports me, like, I think like the two of us together, were really good at being a couple, I guess, we know how to support with each other when you know when things were difficult, like, I am having, I was really stressed out about school, and I was like " I can't do this, blah, blah, blah, " you know, and he is there saying "remember where you came from," you know (laugh), " this is where you are now, you can do this," you know, hm, so, I guess one of our strength would be, we are really good at being the supporting system, (laugh), hm, we are working on the communication, (laugh), so, I don't know, (laugh).

Interaction in Never-Resolved Conflicts

Angie and Brad identified parenting, methods to support each other during CSA recovery process, and the relationship with Brad's sister as the most significant topics

causing conflicts in their relationship. They ranked them by priority, but couldn't reach consensus and which was more important. They both ranked the relationship with Brad's sister as the second choice and decided to discuss this topic in the couple interview. In their personal diary, they had an argument because of this topic, which provided information on their personal feelings/reactions in private other than face-to-face interaction in the couple interview.

In their individual diary, Brad described how he opened up to Angie about the significant incident that had happened when he was in high school and that when he opened up to his father, his father took out his anger on his sister. They ended up having a fight. Brad ended up having a meltdown and expressed that he was not able to communicate this to Angie.

So today, I told Angie about how I'm opening up to my dad and how he then put me under lockdown and then proceeded to tell my sister that he wasn't her father. Because Angie has such a strained relationship with my sister, this whole moment really just turned into me getting upset because I was really crying to describe a horrible moment in my life and instead of supporting me, Angie went on the...accusing my sister. I basically went into a melt down with Alex accusing at me about how my sister is a piece of shit and she deserves whatever happens to her even when she was at about ten. This reallyI was no longer rational. I end up crying and then Angie wonders why I don't ever want to talk to her.

Angie also had three entries about this incident in her diary. She first expressed the

fact that Brad was not with her.

I can't help that I don't want my son around that! I don't care if she is family. I feel like he is joining her side now, too, just like the rest of his family.

Being left out and not being chosen was very similar to her feeling insignificant during her childhood with her family.

*.....like, growing up, hm, I always felt I was being shunned for being a girl,I felt like I was on the outside because I was the only girl, and sort of made me feel like insignificant.....
.....my dad has started this relationships with who he didn't want anybody know about her, like he would just say, I am going out of the town, here is 100 dollars each, you know, have a good weekend, basically to 15-year-olds,..... he was never there, hm, you know, if I want to hang out with him, he was "like we lived together, we don't need to hang out", so I lived there like 3 months,..... hm, I felt like yeah, I couldn't like depend on him because he was doing this new thing with his new wife (laugh), and sort of feel like he was leaving us behind, I guess (crying).....*

In another entry, as a result of this conflict, she expressed the difficulties she had communicating with Brad and how the frustration made her want to leave the relationship because they were at different levels of the healing process.

Brad and I got in an argument last night. He was talking to me about some crappy thing his dad did to him and then somehow XXXXX (Brad's sister's name) was incorporated into it and he was saying basically how we all should feel sorry for her for some bullshit his dad did to her. I responded with she deserves everything she gets because she does. She is the worst person I known of. In the end, he was all upset and crying, which today I said, I was sorry for (making him cry), but that I meant everything I said and I am not sorry for any of it. So, I guess we are still fighting. I tried to get him to talk about it and it's like pulling freaking teeth. So, I am done. If he doesn't

want to talk, fine, go cry in the corner. I am not asking anyone. God, so annoying, I seriously want to punch his face when he does that immature bullshit. Here is another instance where I wish it was just XXXXX (her son's name) and I. It would be so much simpler. I also think he needs to go to counseling for himself. I feel like he is trying to heal through my healing that just doesn't work. He acts like a freaking child while I am trying to talk through crap. We are in two completely different levels and I feel like if he doesn't do something for himself, then, maybe I should just move on.

It was obvious that the relationship with Brad's sister was a serious stressor in their relationship. In their interaction, the two turning points in that conversation appeared to relate to their family of origin. First, Brad talked about how he felt he did not want to choose between Angie and his sister, which was similar to his fear in childhood of having to choose between his parents.

I mean, like, it's like I said in the last interview, like, my worst fear with my parents, was when they would start to you know have their relationship fall apart, and they would start making threats of, "well you have to pick one parent over the other," and, it really, it messed with me bad, I mean, it still does, so like, I kind of feels like that types of situation, where like, I had to like pick her or you, and that's really not the situation is to me, because I can't do that, I cannot just cut her off completely, even though, like at points, I absolutely cannot stand her, I mean, like, it's not like I am happy with her at all, but at the same time, I cannot eliminate her

Then, Angie softened up and responded:

.....well, I mean, it's not like I don't care her either, I want the best for her, too, obviously she didn't come through like you and I went through, (A & B both laugh), but, I mean, there is so much of me and her that, like, I think I've said this many times, like, I just want to, take her and take care of her (laugh), you know, but how, how long am I supposed to, take her just being nasty to me

when all I am trying to do is just help,

Her response seemed to show that she wanted to provide her sister-in-law a chance just like her brother provided for him.

I mean, I am like forever like grateful that he did that for me, because I don't know if he hadn't, nobody was stepping in and helping, hm, if he hadn't done it, I don't know where I would be, you know (crying), and now my life is really good, I am really happy at where I am at, so, hm, you know

The second turning point was when Brad offered to “pretend” his sister was not there, which was his usual coping strategy when under stress as described before, and Angie disagreed. She did not think “pretending” could solve the problem because the problem existed even when his sister was physically not there. Brad started talking about how disappointed he was that his family seemed to make the situation worse by forgiving his sister, which made him look like a bad guy. The long conversation went on and they both realized how they were enmeshed in Brad’s dysfunctional family. Brad felt that he failed his sister by being sucked into his dysfunctional parents’ behavior.

B:so, that's makes it even more, I guess, harder for me, because it goes both ways, I mean, like, I feel like, she failed me, but I really feel like I got sucked into them trying to suck her back in, I guess... ..

A:well, and I completely agree with you, and I, I am mad at myself too for allowing that to happen, that is stupid on our part, we should just allow her to, move in, and see what happened

In the debriefing time about their interaction, Angie expressed that she felt their interaction was different than they usually did and the main reason was because they actually discussed it without anger.

.....usually it's finished in an argument, and we just never talked about it until it comes up again, and it's an argument, and this is much calm....

For Brad, he described how he usually had a meltdown and let the problem become bigger than it was, which made it hard on their communication process.

I mean, I don't think it's any bigger of the issue than we are talking right now, but I think like, I tend to get so overwhelmed by it, like, I just kind of shut down, I guess.

Brad's answer was similar to his responses when asked about his relationship with his mother in childhood during his individual interview.

.....my mom had a tendency to just like blow up, to just like pretty much melt down, hm, and it actually kind of force me to like shut down, I just, I remembered the point that I just like, sitting there like in the kitchen table, she was like screaming, and I wouldn't talk, I wouldn't do anything and wait for it to be over.

In one of Angie's diary entry, she talked about how she was like her mother when she was mad.

We did talk about how her telling me that she was abused clarified a lot of things though. I understand her craziness now because that is exactly how I act when I get mad.

It seemed that, because of their similar developmental experiences, they were prone

to the dysfunctional behaviors in their family of origin. As they tried to work through their past and to build a better relationship in their family of creation, Brad's coping mechanisms--shutting down when facing anger and fearing of showing his vulnerability--seemed to stop him from seeking help from Angie even though Angie was willing to offer the help. On the other hand, Angie's anger, similar to her mother's behavior, also impeded their interaction. Their responses about what they want to improve their communication further clarify their interaction. Angie expressed her frustration in the couple interview and her diary entry showed above. She wondered whether Brad did not feel safe around her and that was the reason he was not able to open up to her. She worried that in the long run, their communication was not going to work because *"if it's completely one sided when I am unloading things on him, if he is not doing that with me, how can it work?"*

Brad felt that Angie's anger was one of the reasons that he did not open up. However, his inability to trust people was another reason.

.....hm, I would like to be able to talk more, hm, sometimes I still like worry about like, your, your anger because it's when I experience that, it was like, always, a sign to me that I just need to be quiet, and I am not going to talk, like, I feel like, its, it's gone from being something that can communicate with rational now, and it's pointless to be, like, I feel, like, I am not going to (silence for 4 seconds) (sigh), being able to express things because like (silence for 4 seconds) (sigh), I never could, so, I mean, like, (silence for 8 seconds), I don't know, maybe I still feel like if I, hm, (sigh) I don't know, I really don't, I mean, it's just, I still feel, some sort of, hesitancy to like, just let things go, because, I usually can't trust anybody to do that, and not like, I

don't know.....

They went into a long conversation between themselves. In this conversation, Brad expressed that first, his biggest fear was that if he opened up to Angie, she wouldn't care, which would be similar to his father's response when Brad revealed his difficulties to him in high school. Second, he did not think fear or safety was the factor. An important reason that he could not open himself to Angie was because he did not know if anyone could help him if he could not help himself, similar to his father's response when Brad asked him for help during high school. Third, he did not want to throw himself at other people if he could not deal with it himself. Fourth, it was hard for him to open up to people, especially under a situation when it was his past history, which was overwhelming to him, and it was easier to pretend those things did not hurt him, which seemed to be the fear from opening up to his father and to cope with his mother's anger.

.....(sigh)she wouldn't care, I guess, I don't know, (laugh) I mean, like, it's not even like, I don't know, I don't even know if there is really a fear there, like, I just, I don't feel like I can, like, I just, I think there is, there is enough stuff that like, I just, maybe it's hard for me to deal with it myself, so I don't know how I could make somebody else deal with it?

I mean, that's a big part for me, it's like, I don't want to like, throw mine on somebody else, if I haven't been able to deal with it, I mean, I don't know I think, it, honestly, it takes me a while to work up to even getting a little pieces out, it's not like I don't want to, I don't think, its necessarily always feeling safe, but, I just, it does take me a while to get myself together, to, to do, like I just, even if just like telling you finally my dad telling my sister, like something that's been so overwhelming to me, like, it's taking me, I don't

know, years to tell anybody, like, I just, it's just always been easier to forget it (laugh), put it outside of my mind, I guess, I mean, it's not gone, the stuff is there, but, it's just always been easier just to pretend like, it rolls off my back, or something like, it can't hurt me.

While Brad was living in fear from the past, Angie was trying to solve the problem in the present. Angie felt that they should help each other and she appreciated Brad's help throughout his healing process. She felt confusion and frustration when she could not do that in return for Brad.

.....if you continue to do that, I don't know how we move forward, because I think as partners, that's, one of our main jobs is to sort of help each other work through things, and if you are not telling me what's going on, or what's your thinking, I can't help you.....

.....you know, I mean, I, I think that he does a good job of helping me, hm, work through things, but I can't do that if I don't know what's bothering you, or, whatever is going on, you know, I mean, even if it's like hm, he had a bad day at work, it takes forever for me to get that out of him, you know, it could be something really small, and it takes forever, and it's just, I don't know, I don't know how to, hm, how to deal with that, I guess, because I am so open to you, so,well, I think, like, in you thinking that way, and acting that way, it does make it harder for me because I feel like, you know, I am laying it all out there for you and I have to pry to get anything out of you, so it makes, I guess, it's kind of like a confusion for me because it makes it harder for me to understand like why it is so easy for me to do this, and give all this information to him when he can't do that in return, I guess, that's why like, I kind of feel like you think, that you are, you can't like trust me, or be safe with me or something like that.

In the end, Brad admitted that he did not want to appear weak in front of Angie and Angie replied to him that they had passed that point.

B: I don't, I don't even think like it's a safe factor, as much as like I don't want to appear like weak to you, I guess

A: (smile at B), I think we pass that (pat on his lap)

B: yeah?

A: (laugh) (nodding her head)

Their long conversation presented a few similarities as well as some differences from their relationship with their parents. First of all, as Angie said, she had tendency to use anger to show her emotions when she was uncomfortable. Second, this seemed to trigger Brad's coping strategy, developed when he was a child to his mother's angry outbursts. Then, it caused Angie to get angrier and made Brad feel that no one could help him and that he'd better not show his vulnerability again. Third, even when Angie tried to deal with here-and-now relationship issues and Brad did not respond, she became frustrated, which possibly showed as anger as described in Brad's diary, which further made Brad shut down.

Couple 2: Don and Rosie

Experiences in their Current Relationship

Rosie described their relationship as "*caring, very connected, trust and loving,*" and Don described their relationship as "*equilibrium.*" Rosie, in her individual diary, felt the strength in their relationship was that they trusted each other, they were able to balance each other, and they were able to transform negative experiences in their relationship into

something positive. Rosie recalled how she was able to take control of her life back and finished her thesis with the support of Don.

Don expressed how they tried to keep things balanced in their relationship and respected their differences. For example, Rosie was a social person and Don liked to work on things by himself. They tried to give each other individual time as well as couple time together. Don also expressed how there was a deep trust and good communication in their relationship for them to give each other space and respect to enjoy their differences.

Don recalled that he always had problems with religion but Rosie was very religious.

Throughout the years together, she never tried to change him. When he was facing difficulties in this new country, she was supportive. In his diary, Don said, *"Since I came to the US, Rosie has been a great support for me. She does not pressure me, but still, sometimes, I feel useless for not working."*

Interaction in Never-Resolved Conflicts

In their individual interview, Don and Rosie chose two different issues for their never-resolved conflict topics in their own individual interviews. Don chose Rosie's being late on most occasions, and Rosie chose Don's smoking. In the couple interview, they decided to talk about Don's smoking. They said that they had discussed Rosie's issue already. Through their individual diary, they recorded that they did have fights about

Rosie not being able to be punctual.

In Rosie's diary, she described how she managed to be on time when Don was not around, and her own behavior, being late, reminded her of her parents' relationship. Her mother was always late while her father was always on time. Rosie did not like the way her father treated her mother but also did not like how her mother triangulated her by telling her mean things her father did to her mother. She felt that she was put in the middle and, because she had always been close to her mother, she always felt her mother's pain and was angry at her father.

In the couple interview, they chose to discuss Don's smoking behavior. In the beginning of their interaction, Rosie stated her position about Don's smoking. She worried about health-related problems. Don understood Rosie's concern. The turning point in their conversation came when Don related his current smoking habit to his difficulties in finding his own identity in the United States. (Please see Don's statement on page 140). Rosie talked about how she was good with listening and helping her friends with their problems since their elementary school years. In the couple interview, after listening to Don's explanation about not being able to quit smoking, similar to her reaction to her mother's pain, Rosie said, *"I felt connected to what he was saying, and, I felt his sadness, and I felt sad as well, because it's hard, and I know it's hard for him,*

yeah."

As stated before, Don and Rosie's relationship had lasted since their adolescent years. They had a trusting relationship. At the time of the interview, Don struggled with the issue of losing and finding his own identity in this new country, and he used his old behaviors to cope with his stress and to help him find his new identity. For Rosie, because of her family dynamics, she developed the tendency to be sensitive and supportive to other people's needs, while duplicating some of her mother's behaviors at the same time. When Don showed his vulnerability in front of Rosie, Rosie also used her tendency, which was to be sensitive and supportive to other people's needs, to respond to Don.

Couple 3: Ned and Elsa

Experiences in their Current Relationship

Ned described Elsa as a very caring and loving person, just like his mother. He described their relationship as a "*very committed*" relationship. He felt that Elsa and he both comforted each other well, were committed to the relationship, were willing to get help when the marriage was in trouble, and to try to break the cycle from their families of origins. Elsa described their relationship as a very "*loving, caring, and together*" relationship. Elsa described how Ned was a very kind and loving person. As Elsa was facing her mental health issues such as panic attacks, anxiety and depression, Ned was

very supportive and took care of everything in the household.

Interaction in never-resolved conflict

Ned and Elsa mentioned different issues in their individual interview. Elsa identified that their biggest difference was their ways of approaching things. Elsa was rigid, planned, and organized, and Ned was relaxed and went with the flow. Ned identified that they usually fought about how to spend their money. In Elsa's individual diary, she identified that their finance situation worried her. During the couple interview, they identified finance as their never-resolved issue.

During their interaction, Elsa provided different suggestions for resolving their money problems such as planning a budget and/or going to see a financial counselor. Ned also suggested that they could make a buying list and put Elsa's needs as a priority on the list. Throughout their conversation, it seemed that Elsa was the one who talked about her frustration and worries while Ned provided his understanding and replied that he was open to her suggestions. However, Elsa would always check with Ned if he did not agree with a suggestion. Finally, Ned admitted that, in the past, when Elsa controlled the budget, he sometimes felt choked by her rigidity.

Elsa and Ned agreed that they approached finance very differently. Ned commented that Elsa seemed to have a lot of fear about it but he took everything day by day and went

with the flow. Elsa admitted that she worried all the time and commented that Ned did not have a plan. Ned agreed that he did not have a plan and he would trust God to provide, and would not worry himself except working hard and enjoying what he had day by day.

Ned had a long history and life with church starting when he was a child. He said that his mother raised him in church. After his divorce in early adulthood, he also relied on his church for raising his son. In addition, Ned had made a decision in childhood not to become restricted like his father, but instead wanted to have fun in life. .On the other hand, Elsa's fear was her learning from childhood. She seemed to continue using her coping strategies from childhood in her current relationship. In her individual interview, she said, in her childhood, she thought if she could have done everything right, she might have been able to prevent the abuse that happened to her. Even though she had the same religious belief as Ned, in her individual diary, she confessed that she had doubts.

Elsa's rigid and negative view about the world and wanting to have control over her life were her coping strategies with CSA. Ned's mother influenced his nurturing behaviors, religion, and choices of wife's characteristics. Ned was very religious and free-spirited. He trusted that God would provide what they needed. They both appreciated their differences and support from each other. However, the different worldviews also provided them challenges in communication when they needed problem solving.

Couple 4 Charlie and Tracy

Experiences in their Current Relationship

Charlie described his relationship with Tracy as a good relationship and they got along really well. He described Tracy as a very caring and organized person. He felt that they complimented each other well and that his opinions were heard and respected by Tracy. Tracy felt that their relationship had ups and downs but that it was a very stable relationship compared to her previous relationships. Tracy also felt that Charlie and she complimented each other well. Both Charlie and Tracy felt that they had similar goals about their lives and they communicated well in their relationship. Tracy felt that the depth she could communicate with Charlie was the same as she could with her therapist.

Interaction in Never-Resolved Conflicts

Tracy and Charlie both felt that they complimented each other well and had good communication. However, their relationship went through serious changes prior to the interview. Right after they moved in together, Tracy found out that she was pregnant. They had to adjust to living together, to co-parent two boys from Charlie's previous marriage, to go through the different changes of pregnancy, and to take care of their newborn baby. At the same time, Tracy also had to attend school and her work.

Those changes had an impact on their relationship. Tracy and Charlie both described

how they went through the same pattern, which was “*we would get upset with each other, harsh words would be said, and we stayed away from each other, and we apologized, and it would happen again.*” They tried to break this pattern. In their individual interviews, they both believed that the problem was because they did not have enough time to check in with each other and they ended up fighting. Charlie believed that their vivid imaginations caused them to over-interpret each other’s behavior, which caused problems in their communication. Therefore, they decided to choose “scheduling” as the topic for their never-resolved conflict discussion.

During their couple interview, the couple spent the whole time discussing what day of the week was the best day for them to get together and to touch base with each other. They also decided to choose a backup date in case something came up on their first choice. Their discussion seemed to be peaceful and right on target. Their discussion was also the shortest among all the couples as they reached their goal right away. Then, they fell into a long period of silence. At the end of the discussion, Tracy asked Charlie whether he was mad because he was playing with his hair during the discussion. Charlie responded that he was not angry and Tracy explained her concern as being something similar to her dad; that he would play with his hair when he was angry and then wouldn’t say anything.

In their interviews, they both identified that their upbringings, including reading, music, performance, outdoor activities, and their relationships with their own parents, influenced their interaction when under stress. Charlie and Tracy both agreed that the difficulty in their interaction was not conflict resolution but avoidance in conflict resolution. In their de-briefing session, Charlie used the hair incident as an example to express how imagination hindered their communication. They both agreed that if Tracy did not clarify with him (and they believed that most of the time was because they did not have time), she would end up believing he was mad and they ended up fighting. Tracy also felt that they both were also afraid of causing arguments in their relationship.

Not wanting to become their angry parents and behaviors learned in their childhood seemed to continue to influence how they approached their relationship. Tracy mentioned that Charlie's fear of becoming like his father had influenced Charlie in how he managed his anger; she described Charlie as being somewhat passive-aggressive. Charlie, in his own personal diary, also mentioned that he found himself adopting his father's depressive attitude patterns in his interactions with Tracy. Tracy, in her own personal diary, mentioned how she filled up with anger because she did not have time for herself and when she asked help from Charlie, he fell into his self-pity pattern and dragged all his past relationship history into the discussion, causing fights in their relationship. Tracy's

therapist told her that Charlie did not want to solve the problem by playing “yes, but” game with her. In her personal diary, she came up with different solutions for coping with her current relationship with Charlie in order not to have her son grow up in an environment full of anger. However, she also realized that her coping strategies were the same as how she coped with her mother’s anger.

Their interaction patterns and the internal processes were recorded in their own personal diary. Their interaction seemed to be efficient but they also avoided expressing their true feelings. Charlie’s fear of becoming his father seemed to make him fall into the same behavior as his father. The passive-aggressive and sometimes non-spoken anger seemed to make Tracy’s experiences growing up in her family when she didn’t know when her mother was going to have an angry outburst. She coped with Charlie’s situation similar to her childhood coping strategy to her mother’s anger. By doing so, she wanted to avoid the anger in her family of creation and to avoid becoming like her mother.

Couple 5: Larry and Mary

Experiences in their Current Relationship

Larry described how he “*loved Mary to death*,” and their relationship was full of surprises. He felt that Mary sometimes tried to push his buttons but also could be the sweetest thing in the world. However, they got along pretty well for the most part. In the

past few years, Mary had gone through several suicide episodes while going through her therapy for CSA. Larry described how that had been really hard on him as he wanted to provide his children a stable life while taking care of Mary as well. However, he believed that he needed to be Mary's "*tree in the storm*" to support her through her recovery process.

Mary felt that Larry was really supportive and for the most part in their relationship, they communicated very well. Also, Mary felt that Larry believed in her CSA story and how bad her mother treated her, which was very important to her. She described how Larry cared about her very much and would do things to make her feel better. In her diary, Mary described how she felt depressed when her birthday approached because they did not have money to get her something special. She also believed that she did not need the same material things as her mother had. Larry made a cake himself for her birthday to make her feel better.

Interaction in Never-Resolved Conflicts

In their individual interviews, Larry and Mary both mentioned "money" was usually the reason that caused the most arguments in their relationship. Larry described how Mary always went on a shopping spree whenever Larry specifically told her not to use the money in the bank because they needed to pay for the bills. Larry acknowledged that

Mary did not buy things that were not necessary or for herself. However, he felt that Mary could have waited and he wondered why Mary always did that when he specifically told her not to do so. Mary described how they had different priorities for what to buy. Larry would buy tools and she would buy things for the kids.

In their never-resolved conflict interaction, Larry expressed how frustrated he felt when Mary seemed to purposefully spend money when he asked her not to do so. Mary argued it was not for herself, which Larry acknowledged. Mary started to ask Larry whether he knew their children's sizes and different things. Larry kept repeating his frustration by telling Mary how her behavior upset him. The turning point was when Mary finally replied to Larry that she would do it anyway without telling Larry because she knew Larry would not want her to spend the money. Larry finally was able to have Mary hear his frustration and told Mary that that was what made him mad. While they were discussing how to approach their finances differently, Mary started to tell Larry how bad her mother was in terms of managing her finances and Larry was able to recognize that Mary was more responsible.

In their de-briefing, Larry described similar experiences as the researcher had experienced in Mary's individual interview. Larry described how Mary would jump around different topics that were not related, and not remain focused on the conversation,

which was very frustrating and difficult for him. Larry reflected that, if his mother knew it was a serious conversation, his mother always paid full attention to him through the whole conversation. However, the interaction during the interview was better as he finally got Mary's attention and told her how frustrated he felt when Mary ignored his warnings about their money and his frustration. Mary defended herself saying that her Borderline Personality traits made her do so and her traits were because of her PTSD from her abuse by her mother. They both agreed that they needed to improve their communication by listening better to each other in an environment with less distraction.

There was no clear evidence from Mary's interviews and diary entries to know whether she felt criticized when Larry expressed his frustration. However, similar to the pattern she presented in her individual interview, in her interaction with Larry, she defended herself, jumped between topics, and then compared her own behaviors with her mother's to prove that she was better than her mother. Larry's difficulty in interpersonal relationship was that he was afraid of being rejected and therefore it was difficult to reach out to other people. When Mary had difficulty focusing on the conversation, it seemed to make it even more difficult for Larry to express his opinions.

Couple 6: Bill and Adele

Experiences in their Current Relationship

Bill described his relationship with Adele as a “*blessing*.” He described Adele as very responsible and loved him unconditionally. Adele described Bill as a very supportive person and very involved with everything to do with her and her children’s lives. They both described how the other person supported them well, and that they were able to commit in the relationship. However, they also acknowledged that their past seemed to get in the way in their interaction and they wanted to move forward with their dreams in their life together.

Interaction in Never-Resolved Conflicts

Adele and Bill both expressed that they knew the other person loved him/her but they usually let their past experiences influence their communication and relationship. They both agreed that “trust” was the biggest issue in their relationship. In their never-resolved-conflict interaction, Adele expressed that she did not like Bill to tell other females about their relationship, to leave the communication/fight without finishing it, and to change his stories every time. Bill expressed that he did not like Adele to feel she was the only victim in their relationship, to question him on all the details of the day when he came home, and to convict him before listening to his side of the story. Bill felt that there was no reason to communicate if Adele always felt she was right and Adele felt that she wanted Bill to prove she was wrong to her.

Their interaction had no turning point as they went on stating their perspectives and pointed out the other people's viewpoints were wrong. In the de-briefing session, they were not able to focus on the de-briefing either. They criticized each other's behaviors and would want the researcher to decide who was right and who was wrong. In the de-briefing session, Bill and Adele both expressed that their interaction was better than other times because Bill did not walk out on the conversation and Adele did not use disrespectful words.

Bill felt that they both were afraid of losing each other because of their past history with their families of origin. For Bill, who was belittled by his father and got incomplete attention from his mother, felt that he could be betrayed by his ex-wife and it was this that influenced his current relationship with Adele. He got "*bitter*" and "*overreacted*," when he felt Adele did not give him full attention/put him as the first priority in her life, and when Adele doubted his commitment in the relationship. Adele's questioning about all the details when he was out seemed to trigger his experiences that his father did not believe him. At the same time, Adele's desire to want to know everything in his life was a sign to Bill as he was the center of Adele's life, which was what he did not have in past relationships with his parents and his ex-wife.

The two primary injuries in Adele's developmental process were CSA and her

parents' rejection after she revealed CSA. Adele described how she did not trust men, especially old men, and refused to have men control her life. Adele explained that, among all the men she dated, Bill was the first man who was older than she was, and with him, she had tried to break this fear. Her biggest wish was to have her father accept the "truth" of her CSA and to believe her. Her biggest fear was to speak her mind and have her loved ones not believe her and accept her. In her relationship with Bill, she displayed all these behaviors such as going after Bill to explain himself non-stop even when Bill ran away. She would also pick up on all the little details that Bill said in order to decide whether Bill was trustworthy. She still related trust with "letting her guard down," which potentially put her in a vulnerable situation for immediate family members to have a chance to hurt her. In their interaction, she kept telling Bill to "*prove her wrong*" that he was trustworthy, unlike other men in her life.

Bill and Adele's behaviors seemed to trigger each other. Either Bill or Adele could start their interaction pattern. For example, Bill asked a female friend in the church how to make Adele trust him, which made Adele feel that Bill trusted other people's opinion more than hers. That was a similar experience to the one Adele had when she revealed CSA to her parents. Her parents talked to her grandparents and decided Adele was wrong. Adele pursued the explanation with Bill, which made Bill feel Adele doubted him. That

was a similar experience Bill had when his father doubted his ability. Bill walked away, which made Adele pursue more as it was similar experience to what Adele had had with her parents. When Adele tried to support her son's relationship with his biological father, Bill felt that Adele chose other people over him, which was similar to his experience with his mother. When he reacted to the situation, Adele felt that Bill wanted to control him, which was similar to her experiences with her father and grandfather.

Interaction of Childhood and Adulthood Attachment: Between Couple Comparison

All the couples appreciated and had positive experiences in their current relationships and with their current partners. They also described and/or provided examples for how they had better communication, received better support, and felt connected with their current partners than with their parents. However, when they faced a never-resolved conflict, they reacted with the coping strategies developed in childhood or with their own parents' behaviors. If the behaviors adopted were caring and nurturing, such as seen in couple 2, it would help the relationship and individual partner to grow.

Table 4-6 on page 196 presented the participants' responses during the never-resolved conflict interaction in the couple's relationship. Among 12 participants, three of them (Don, Rosie and Ned) adopted their nurturing parents' behaviors when under stress. The rest of the participants adopted their angry parents' behaviors (Angie,

Charlie, Bill), or continued behaviors learned in childhood for coping with significant events that happened in childhood.(Brad, Don, Ned, Larry and Adele), or continued their childhood behaviors used to cope with their angry parents (Brad, Elsa, Charlie, Tracy, and Mary).

Comparing the interaction of the six couples, three different patterns emerged. First, the couples with at least one partner copied their nurturing parent's behaviors when under stress/conflict. At the same time, the other partner reacted to stress with the strategies developed in childhood. Couple 2 (Don and Rosie) and couple 3 (Ned and Elsa) belonged to this group. These two couples also had the longest and the second longest relationships among the six couples (19 years for couple 2 and 32 years for couple 3). Don and Rosie adopted their nurturing parents' behaviors and their relationship seemed to maintain some balance. During their never-resolved conflicts discussion, Ned explained that his smoking was his way of coping with his lost identity in the U.S.; Rosie listened and accepted his sadness, just like she used to react to her mother or how her mother provided for her.

Don --- Please see the quotes on page 140.

Rosie

I felt connected to what he was saying, and, I felt his sadness, and I felt sad as well, because it's hard, and I know it's hard for him, yeah

(when asked her parents' reaction when she revealed CSA to her parents) *it*

was very difficult, it was the most difficult thing, the most difficult conversation in my life, hm, my parents just listen to me, and they were shocked, my father said, he said, " (sigh), by this time, probably he is dead," he said, but, I, I felt his comments was more like his desire of wishing him dead, and my mother just hugged me and started crying, like, I was crying like, like, hm, like little child, if I was, I don't know, I felt, in that moment, I returned at that stage when that happened, like consoling me, and giving me the protection that I didn't receive at that time.

Ned also adopted his nurturing mother's behaviors as well as positive experiences from his life. His wife, Elsa, continued to cope with significant events with strategies learned from childhood, which was self-blaming. In their never-resolved conflict interaction, Elsa checked with Ned several times for the reason he disagreed with her suggestion even though he did not indicate his disagreement verbally. Elsa also expressed how she felt about their financial difficulty, which, she felt, was all her fault. Ned assured her that it was not her fault and believed that his religion would carry him through the difficult times.

E:(crying) apart of it has been my health, and my depression, because I was going to school to get my degree, I would graduate by now, and earning 40,000 a year, then, my depression just got too big, and my anxiety got too big for me to stay in school, and so, now, I can't even work now, so, I messed things up, too.

N:no, no she is not, there's, there's things in life that you can't control, these are things that we can't control, with that the same time, there's not saying that we can't get through this, and there wouldn't be a better results than we had anticipated, and it could be worse, but I am going to expect the best,there's a lot of people in debts and that's affects life most of Americans, but we can't, I am not going to let it give me an ulcer, you know,

I've got a life to live, and to be enjoy, and, ..., but there are few things I think we can twig, I am open to that, but what we are talking about, maybe you will get start with the budgeting thing, and get with someone from down the financial service, maybe, we can do the basic, you got to trust God to provide,

Couple 5, Larry and Mary, represented the second pattern. When under stress/conflict in their relationship, they continue to interact with the coping strategies they had developed during certain childhood experiences. Larry tried to get his points conveyed (as he was able to do so with his mother), but was not able to be successful when Mary did not respond to him on the topics.

L: when I would start talk to mom about something, if it's serious issue we were having, I have her attention, she was there to talk to me, we completed the conversation, as to it was, and Mary, it's, you know, I started the conversation, and...

M: I am scattered

L:she scattered isn't nearly the description sometimes

M: (laugh)

L:we would get two or three sentences into our conversation, and, she would start talking about the color of the marker,she just started watching the television, her attention is not to the conversation, her attention is whatever what she is doing

M: I explained to you recently that I know why I was doing this (She referred to the Borderline Personality Traits developed due to PTSD).

L: it is very challenging because I am trying to get my point through, and sometimes, I am not the most articulate the choice of words, and, she is not always understanding the way I get things through, and when she misses the pieces the middle of I am trying to explain, it's just explode the whole thing off, and she doesn't understand what I am trying to explain, and I am getting frustrated because of that, and, then, she is getting frustrated because I don't drop the subjects, because she is not understanding what I

am saying, and it makes it very challenging in that matter

Charlie and Tracy also belonged to the second pattern; they interacted with each other by the coping strategies they developed in childhood. In order to cope with their angry parents, they tried not to cause other people's anger. In their never-resolved conflict interaction, they both were very civil as if they were afraid of causing any negative interactions. They focused on finishing the task, which was to find time to be with each other throughout the week.

In her diary, Tracy talked about her plan to cope with the conflict in their relationship and realized it was the same strategy she had used to cope with her angry mother.

- 1) don't ask for help*
- 2) be kind & respectful*
- 3) keep physically protected*
- 4) remember basic needs for me & XXXXX (her son's name) & get support from other friends. Ironically, this seems to be the same strategy I use with my mom (do anything it takes to keep peace & keep psychic distance)*

Charlie also talked about how he adopted his father's behavior in his relationship with Tracy:

I can see how I have adapted some of the self depressing attitude + habits of my dad.

In Tracy's individual interview and diary, she revealed that Charlie had a tendency to feel sorry for himself, and he was passive-aggressive at times with his anger. Tracy's

coping was to take on all the responsibilities but feel angry inside. However, from Charlie's individual interview and diary, he indicated that he felt Tracy was very supportive and understanding, especially when he was depressed. They presented two different patterns individually and in their interaction. It seemed that they tried to avoid conflict by interacting with their childhood strategies but those strategies only carried them to a certain degree. Then, Charlie adopted his father's behaviors to deal with their conflicts while Tracy continued to use strategies learned in childhood to cope with Charlie's behavior. Tracy's coping behaviors were explained by Charlie as supportive, but Tracy actually felt angry and "*fed up*" in their relationship.

The last pattern was that one of the partners continued to use the strategies developed in childhood and the other one adopted the angry parent's behaviors. Couples 1, 4 and 6 belonged to this pattern. As described in the previous section, Charlie and Tracy fell into this pattern when their coping mechanisms reached a certain level. Angie and Brad (couple 1) and Bill and Adele (couple 6) also displayed this pattern. Angie and Brad's pattern was presented in detail in the previous section (on page 149-159). When Angie got mad, which seemed to trigger Brad's memory about his mother, he responded with his coping strategies developed when he was a child coping with his mother's anger outbursts, which was to shut down. When Brad shut down, he made Angie even more

angry, which made Brad continue to shut down to react to the anger.

Bill described how he would get bitter and Adele described how Bill often ran out from the conversation when they had conflicts. Bill's behaviors seemed to be similar to Adele's fear that her family did not listen to her and walked out on her when she needed. She pursued by going after Bill to explain her position in order to avoid the same betrayal happened to her. Her pursuing behaviors made Bill feel that he was belittled by her, which were the similar experiences with his father, and he walked away.

A:but I feel like I shouldn't be that type of woman that to always hold in, if you say something that bothers me, instead of me that hold it in, I should address it, if I don't address, , I am going into my mind and wonder why did you say this or why he did that?.....I can't have a man that I love in my heart betray me, make me feel like I can't trust him, trying to convince me to believe in something that is not true, and I tell you this all the time, maybe not in those words, I just feel like I don't want to be that way, and I got to be able to control this, if I feel something, I have to be able to share with you, whether that is right or wrong, if something bothers me, I should be able to share with you, if I want an answer about something, I should be able to talk to you about it, and not, giving myself an answer.....

B:it's hard, you can't force it, you know,, it's just not going to work, because instead of you convincing them in a loving way to change, to do certain thing, and it's the negativity that what you are trying to make change, it's never going to make any difference, never, it will push somebody away before you can pull it in.....

The second column in Table 4-6 (on page 196) compared the participants' behaviors during never-resolved conflict interaction with their current model of self and other on

Table 4-5 (page 194). Interestingly, other than couple 6, all the couples presented a self-other pattern. That is, one of the partners' behavior was the response to his/her own model of self (Brad, Don, Elsa, Charlie), and the other partners' behavior was the responses to his/her own model of other (Angie, Rosie, Ned, Tracy, Larry). For example, Brad's model of self was his fear of failing other people, which he had developed during childhood as a means of coping with his parents' divorce and his father's disapproval of his interests choices. His response when he had a conflict was to run away, shut down, or melt down, which was the same behavior that he used to cope with his mother's anger, and his father's disapproval.

For Angie, when experiencing conflict or things that made her uncomfortable, she got angry and pushed people away. She copied this behavior from her mother, which also corresponded to her model of other, when anger seemed to make her not be invisible any more.

Couple 6 presented their own pattern differently from the rest of the couples. The behaviors of both partners in couple 6 were the responses to their own model of other. Bill and Adele both had a positive model of self, but a negative model of other. When they had conflict, their behaviors also corresponded with their model of other. Bill's model of other was insecure and worry about losing his partner. He copied his father's

behaviors to handle the conflicts by being angry and walking away. Adele's model of other was to be afraid people would not believe her and would control her. Her coping mechanism was to explain herself as much as she could and try to control the situation/people.

Conclusion

The four research questions explored individual partners' developmental milestones (research question 1); their attachment with their parents and its influences on adult view about self and other (research question 2); their current attachment with their partners and its influences on their view about self and other (research question 3); and the interaction between partners especially under never-resolved conflict (research question 4).

Research Question 1: What are the important developmental events and milestones for each partner?

The participants chose partners who had similar childhood experiences as they had. Five of the six couples had similar developmental experiences in early childhood (couples 1, 2, 3, 4, and 5). Two of the six couples had both partners who were survivors of CSA (couples 1 and 5). Two of the six couples had both partners experience angry parents in childhood (couples 3 and 4).

The important events which influenced the participants' development included

parents' conflicts, such as constant fighting, parents' divorce, triangulation into parental relationships, parents' discipline style, the witnessing of domestic violence, physical, emotional, and sexual abuse, substance and alcohol abuse, parent's angry behaviors, non-angry parent's non-protecting behaviors, childhood moving experiences, parents' emotional/physical absent, and parental reactions when revealing CSA. Even though some of the participants recognized that their parents did their best, or they understood the reasons behind their parents' behaviors, they also recognized the influences. For example, Larry understood that his mother had to move around for jobs in order to put food on the table, his interpersonal relationships and abilities in handling interpersonal relationships was influenced by his mother's choices.

The factors that influenced the participants' parents' choices included their own significant events, couple relationships, and other macrosystem factors such as gender expectations. For example, Ned's mother did not leave his father even when she suffered from severe physical violence because, according to Ned, his mother wanted to do the right thing based on what the Bible said. She told Ned that his father brought home the money and kept the roof over their head. They needed to look at it as a positive thing. In addition, at that time, divorce was not acceptable and it would be hard for his mother to raise children by herself.

Research Question 2: How do childhood attachment styles influence the individual partners' views about themselves (model of self) and each other (model of other)?

Childhood attachment did have an influence on the participants' current model of self and other. However, the significant events and/or the fulfillment of developmental needs that the participants experienced also had an influence on the participants. There were several participants whose coping strategies and/or model of self and other were developed due to their parents' reactions to significant events.

For example, Brad's model of self and responses in his couple relationship was developed to cope with his parents' divorce and his parents' behaviors. Larry's mother moved around because of divorce, which influenced Larry's interpersonal relationships and his model of self and other. Adele had very close relationships with her parents. However, her current difficulty in the relationship was the result of her CSA and her parents' handling on her revealing of the CSA. Ned had a very abusive father. However, his mother's love and nurturing also provided him different coping strategies and a positive attitude in his current relationship with Elsa. Therefore, the relationship with his parents was not the single factor that contributed to the participants' model of self and other in adulthood. It was the interaction between the relationship with the parents and the parents' handling of the significant events/ developmental needs that contributed to

the participants' current view about self and their current relationship with their parents.

Between-couple comparison revealed that at least one partner in the relationship had a nurturing parent in their childhood. In terms of adult model of self, most of the couples (four of six) presented copy-cope type as one of the partners had the same view about self as his/her parents while the other partner's model of self was developed in childhood to cope with significant events or angry parents. In terms of adult model of other, most of the couples (four of six) presented cope-cope type as both partners' view of other were developed in childhood to cope with angry parents' behaviors or significant events.

Research Question 3: How do adult attachment styles influence the female CSA survivor and her partner's view about themselves (model of self) and each other (model of other)?

The couples all expressed receiving support and love in their current relationship. However, the participants' current model of self and other was different in good times than during conflicts.

Research question 4: How do childhood attachment styles influence the interaction between female adult CSA survivor and her partner, especially during unresolved conflicts?

When under stress, the couples' model of self and other, and coping strategies developed in childhood seemed to surface. If one of the partners in a couple was able to

adopt nurturing behaviors from his/her parents, it seemed to strengthen the couple interaction when under stress, such as couple 2. Otherwise, both partners might interact with the coping strategies developed in childhood; or, one of the partners reacted to the never-resolved conflict with the coping strategies developed in childhood while the other one reacted to the interaction the same as his/her parents. In addition, while one of the partners' behaviors in conflicts corresponded to his/her own model of self, the other one's behaviors in conflicts corresponded to his/her model of other.

Table 4-1. *Demographic Information*

	Couple 1		Couple 2		Couple 3		Couple 4		Couple 5		Couple 6	
Nickname	Brad	Angie	Don	Rosie	Ned	Elisa	Charlie	Tracy	Larry	Mary	Bill	Adele
Gender	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
Ethnicity	Caucasian	Caucasian	Hispanic	Hispanic	African American	Caucasian	Caucasian	Caucasian	Caucasian	Caucasian	African American	African American
Age	25	26	31	28	55	53	29	40	31	28	35	30
Education	pursuing college degree	pursuing college degree	high school graduated	pursuing graduate degree	4-year college graduated	high school graduated	4-year college graduated	pursuing graduate degree	2-year college graduated	high school not graduated until 9th grade	high school graduated	high school graduated
Employ Status	Full-time employee	Full-time student	Full-time employee	Full-time student	Full-time employee	Home Maker	Part-time Employee	Full-time Student	Full-time Employee	Home-Maker	Unemployed	Home Maker
Relationship Duration	4		14		32		2.5		8		2	
Marital status	married	married	married	married	Divorced before and married to current partner	married	divorced before; currently cohabitate with partner	divorced before; currently cohabitate with partner	married	married	divorced before, currently engaged and cohabitate with partner	currently engaged and cohabitate with partner

Table 4-1. Demographic Information (cont.)

	Couple 1		Couple 2		Couple 3		Couple 4		Couple 5		Couple 6	
Nickname	Brad	Angie	Don	Rosie	Ned	Elsa	Charlie	Tracy	Larry	Mary	Bill	Adele
Biological Parents	divorced and both biological parents remarried	divorced and both biological parents remarried	married	married	married until father passed away	married until father passed away	married	married	divorced and both remarried	divorced	Father had previous marriage, cohabitated, divorced the first wife, and married mother until mother passed away. Father is remarried now	Father had previous marriage, cohabitated, divorced the first wife, and married mother until mother passed away. Father is remarried now
Individual Therapy History	Yes	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	Yes
Couple Therapy History	No	No	No	No	Yes	Yes	Yes	Yes	No	No	No	No
Support Group History	No	No	No	Yes	No	Yes	No	Yes	Yes	Yes	No	No

Table 4-2. Abuse History

		Couple 1		Couple 2		Couple 3		Couple 4		Couple 5		Couple 6	
	Nickname	Brad	Angie	Don	Rosie	Ned	Elsa	Charlie	Tracy	Larry	Mary	Bill	Adele
Abuse History	Sexual	Yes	Yes; oral, fondling.	No	Yes; pornography, fondling, intercourse	No	Yes; intercourse object penetration	No	Yes; fondling, intercourse	Yes; oral, attempted intercourse	Yes; oral, pornography, attempted intercourse	No	Yes; fondling
	Perpetrator	Female cousin	Two elder brothers	N/A	Friend's male nanny	N/A	Father	N/A	Mother; brother's older male friend	Older male friend	Mother; Mother's boyfriend	N/A	Step-grandfather
	Physical	No	No	No	No	Yes	Yes	No	Yes	Yes	No	Yes	No
	Perpetrator	N/A	N/A	N/A	N/A	Father	Father	No	Mother	Stepmom	N/A	Father	N/A
Abuse History	Emotional	No	No	No	No	Yes	Yes	No	Yes	No	No	Yes	No
	Perpetrator	N/A	N/A	N/A	N/A	Father	Father	N/A	Mother	N/A	No	Father	N/A
	Witness	Yes	No	No	No	Yes	No	No	No	No	No	Yes	Yes
	DV	Physical abuse	Physical abuse	No	No	Physical Abuse	Physical Abuse	No	No	No	No	Physical Abuse	Emotional Abuse
Abuse History	Perpetrator	mother's boyfriend	N/A	N/A	N/A	father to mother	N/A	N/A	N/A	N/A	N/A	father to step-mother	father to step-mother
		to mother											

Table 4-2. Abuse History (cont.)

	Couple 1		Couple 2		Couple 3		Couple 4		Couple 5		Couple 6	
	Brad	Angie	Don	Rosie	Ned	Elsa	Charlie	Tracy	Larry	Mary	Bill	Adele
Nickname	Yes	Yes	No	No	Yes	No	No	No	No	No	Yes	No
Substance Abuse												
Illegal Drugs												
Alcohol	Yes	Yes	Yes	No	Yes	No	No	No	No	No	No	No
Other Family Member being sexually Abused	N/A	Mother	N/A	N/A	N/A	Possibly older sister; niece	N/A	Mother by her stepfather	two older children by female partner's mother		N/A	younger sister by coach; cousin by step-grandfather; grandparents' foster daughter by step-grandfather

Table 4-3. *Between-Couple Comparison of Developmental Experiences*

	Couple 1		Couple 2		Couple 3		Couple 4		Couple 5		Couple 6	
	Brad	Angie	Don	Rosie	Ned	Elsa	Charlie	Tracy	Larry	Mary	Bill	Adele
Early childhood	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	×	×
Elementary School	✓	✓	×	×	✓	✓	○	○	✓	✓	○	✓
Middle School	✓	✓	*	*	✓	✓	×	×	○	○	×	○
High School	✓	✓	✓	✓	✓	✓	✓	✓	Δ	Δ	✓	✓
Early Adulthood	✓	✓	✓	✓	○	×	✓	✓	✓	✓	✓	✓
Middle Adulthood	N/A	N/A	N/A	N/A	✓	✓	N/A	×	N/A	N/A	×	N/A

* Due to different school systems/names, the coding in couple 2 was coded adolescence stage, equivalent to the combination of middle school and high school years in the US system.

✓ partners had significant events happened at the same stages

○ partners had significant events happened at different stage

×

Δ Partners had similar significant event happened at this stage

Table 4-4. Comparing Childhood and Adulthood Relationship with Parents

	Couple 1		Couple 2		Couple 3		Couple 4		Couple 5		Couple 6	
	Brad	Angie	Don	Rosie	Ned	Elsa	Charlie	Tracy	Larry	Mary	Bill	Adele
FA	changed in Middle school; Distant currently	changed in high school; neither close nor distant	changed in high school to have adult to adult respecting relation	continue to be a positive relation	changed in mid-adulthood until received therapy; understood fa's behaviors	continue to feel the control from her fa	continue to fear his fa's anger	changed in mid-adulthood from love her fa to have ambiguous feelings after therapy	continue to be distant	continue to be distant	changed in early adulthood from fear to adult-to-adult relation	changed in high school from trust and close to fear and distant
MA	distant from childhood until now	distant from childhood until now	changed in high school to have adult to adult positive relation	continue to be a positive relation	continued to be a positive relation	continue to be distant with her ma	continue to be a positive relation	continue to be distant but not fear any more	continue to be a positive relation	continue to be distant and cut off completely now	continue to be distant but good relation until MA passed away	continue to be a positive relation until MA passed away

FA/fa = Relationship with father MA/ma = Relationship with mother

Red= Changed from childhood

Blue= Same as childhood

Table 4-5. *Influence from Relationship with Parents to Current Model of Self and Model of Other*

	Couple 1		Couple 2		Couple 3		Couple 4		Couple 5		Couple 6	
	Brad	Angie	Don	Rosie	Ned	Elsa	Charlie	Tracy	Larry	Mary	Bill	Adele
Self	# * fear of failed other people	# low self- esteem	# knew that he was good in his career; but current stressful event challenged his view about himself and the need to re-identify himself	☺ knew she was loved & supported by her parents & partner; aware duplicated her ma's behaviors in couple dyad after received therapy	o belittled, angry, & harsh on self at times	* unworthy, doubting herself; feeling everything was all her fault	o☺ depression & low self-esteem shy but wanted to be seen	# part of her believed herself was good after received therapy	# was not able to express himself well; difficulty to reach out to people	☺ powerless & useless just like her mother said about her but sometimes can stop herself doing so after received therapy	# happy at where he was in his career	# proud of herself that she never resulted in using drugs or illegal activities

Table 4-5. Influence from Relationship with Parents to Current Model of Self and Model of Other (cont.)

	Couple 1		Couple 2		Couple 3		Couple 4		Couple 5		Couple 6	
	Brad	Angie	Don	Rosie	Ned	Elsa	Charlie	Tracy	Larry	Mary	Bill	Adele
Other	# # Fear of being weak & asking help	# ◊ Feeling invisible; fear to show her true emotions & used anger to show it	# knew that he could get support from his parents and partner	⊙ knew that she could get support from her parents and partner	⊙ knew he was loved by his family; trusted God would provide	* difficulty to trust people; wonder why people would like her; would ruin friendshi ps	* afraid of being hurt and disapproval from other people anger	* part of her felt she caused other people's anger	# afraid of being hurt by other people; trusted people had good intention	# People usually did not believe her except her husband	* # insecure and worried to lose his partner her, control her, or think her as crazy if she spoke up her mind;	# afraid of people would not believe her; would hurt her, control her, or think her as crazy if she spoke up her mind;

◊ Same behaviors/emotions/viewpoints as his/her angry parent behaved in childhood

⊙ Same behaviors/emotions/viewpoints as his/her nurturing parent behaved in childhood

Coping behaviors/feelings developed in childhood to significant events

* Coping behaviors/feelings developed in childhood to angry father/mother

Table 4-6. Responses in Never-Resolved-Conflict Interaction

	Couple 1		Couple 2		Couple 3		Couple 4		Couple 5		Couple 6	
	Brad # *	Angie o	Don #	Rosie ⊙	Ned # ⊙	Elsa *	Charlie * o	Tracy *	Larry #	Mary * o	Bill o	Adele #
When under stress/ conflict	ran away, shut down, melt down, when had negative situation	angry; pushed people away	smoked, talked to the partner; support	talked to the partner; respect and trust	used the attitude of gratitude philosophy; avoid to worry himself; believed "God" would provide	self-blaming; controlling rigid	avoid causing conflict; imagining other people's behaviors as anger; passive-aggressive depressive behaviors	avoid causing conflict; over-analyzing other's behavior	tried to express his opinion but would be lost if interrupt ed by his partner	* o scatter; not paying attention; criticize her ma's behavior	o got bitter, angry, did not want to talk, walked away	# wanted to express her opinion; afraid of losing her partner; checked her partner's daily routine in detail
vs. model of self/ other	self	other	self	other	other	self	self	other	other	self	other	self

o Same behaviors as his/her angry parent behaved in childhood

⊙ Same behaviors as his/her nurturing parent behaved in childhood

Coping behaviors: feelings developed in childhood to significant events

* Coping behaviors/feelings developed in childhood to angry father mother

Chapter 5

Discussion

This chapter summarizes the research findings, compares the similarities and differences of the research findings to the literature, presents the implications of the research findings, and discusses the limitations of the research.

Summary of the Research Findings

This research aimed to explore the interaction of childhood attachment (with parents) and adulthood attachment with current relationship partner using the lens of Attachment Theory (Bowlby, 1982), Human Ecology Theory (Bronfenbrenner, 1979), and Psychosocial Development Theory (Erickson, 1964) for a sample of adult female survivors and their partners. The research findings showed that the participants had similar developmental experiences with their current partners. One of the partners in each couple had a positive and nurturing relationship in childhood with at least one of his/her parents. The participants' childhood relationships with their parents did have an influence on their current model of self and other. The participants developed their current model of self and other through the interaction with their parents, and their parents' responses to their childhood developmental needs and/or significant events. Through the interaction, the participants might adopt their parents' view/behaviors in their current model of self

and/or other. Or, they might continue to use the coping strategies developed in childhood that were used to cope with their parents' behaviors/significant events in their current model of self/other. The participants' parents' behaviors/responses were influenced by their own significant events or couple relationships such as divorce or domestic violence. The parents' decisions about how to cope with the situation were influenced by their socioeconomic status, education, social expectations, and other macrosystem factors such as gender expectations.

In the current relationship, all the participants experienced support and positive experiences different from their relationship with their own parents. However, when encountering conflicts that could not be resolved in their relationships, their reactions were either similar to their parents' behaviors or became the coping strategies that were developed in childhood to cope with the parents' behaviors or significant events. Those behaviors in a conflict situation corresponded to their model of self or model of other. One partner's behaviors corresponded to a model of self, while the other partner's behavior corresponded to a model of other.

Figure 5-1 on page 227 shows the influences of childhood relationships with parents on the interaction between the partners. The two family systems on the left represent the male partner and the female survivor's childhood family systems. Each of the family

systems was influenced by exosystem and macrosystem factors, which further influenced the parents' decisions when encountering their own significant events. The participants were influenced by their interactions with the individual parents and the parental relationships. The participants *coped with or copied* the interaction with the individual parents or the parental relationships in the developmental process, which, then, influenced their current model of self and other. In their never-resolved conflict interaction, they reacted with the behaviors copied from their parents or the behaviors developed in childhood that were used to cope with the interactions in the family systems. One of the partners' responses corresponded to his/her model of self, while the other's corresponded to his/ her model of other.

Connections to the Literature

Adult CSA Female Survivors

Previous research studies have explored different aspects of CSA on the development of female adult CSA survivors in different areas such as PTSD (Huang, Zhang, Momartin, Huang, & Zhao, 2008). As discussed in Chapter 2 (pages 62-65), the influence of CSA on female adult survivors' development can be explained from Human Ecology Theory (Bronfenbrenner, 1979) perspective. The nature of CSA (Finkelhor & Kendall-Tackett, 1997) such as the duration and the type of the abuse (Balcom, 1996),

individual coping strategy (Bal, Van Oost, De Bourdeaudhuij, & Crombez, 2003), individual attachment with the parents (Alexander et al., 1998), the family structure (Meyerson, Long, Miranda, & Marx, 2002), and parental reaction (Bal, De Bourdeaudhuij, Crombez, & Van Oost, 2005) all have been shown to have an impact on adult female survivors' psychological well-being in adulthood.

The female participants in this study were all female survivors of child sexual abuse, with some differences in the type of abuse. Similar to previous research studies, these participants showed varying difficulties in their current developmental stages such as low self-esteem (Jump, 1995), perfectionism, eating disorders (Polusny & Follette, 1995), depression (Schilling, Aseltine Jr., & Gore, 2007), anxiety (Neumann, Houskamp, Pollock, & Briere, 1996), and personality disorder traits (Alexander et al., 1998). At the individual level, due to differences in the nature of their CSA experiences, the female participants of this study displayed different levels of symptom severity. At the family level, most of the female participants' families of origin structures contained one angry parent and one powerless/absent parent (Trepper & Barrett, 1986). Most of the female participants also experienced one of the parents as angry and the other one as failing to provide protection (Banyard & Williams, 2007). Their current model of self and other were the same as their parents or were the coping strategies developed in childhood to

cope with their parents' behaviors or significant events such as CSA.

Male Partner of Adult CSA Female Survivors

Missing from the literature is attention to the development of male partners of female CSA survivors. Previous studies focused on the male partners' experiences when their female partners went through therapy (Nelson & Wampler, 2000; Reid, Taylor, & Wampler, 1995; Reid, Wampler, & Taylor, 1996), and had not yet explored the male partners' developmental process and its influence on their current adult intimate relationships.

Most of the male participants in this study had similar developmental experiences as their partners. On the individual level, they also experienced low self-esteem, perfectionism, difficulty in interpersonal relationship and trust, depression, and anxiety. The structure of their families of origin was also similar to their own partners. Half of the male participants witnessed their mothers' male spouses/partners physically abusing their mother and/or stepmother. Some of them also experienced their non-offending or non-angry parents' powerlessness to protect them from the offending/angry parents' abuse. Their current model of self and other, similar to their female partners, were the same as their parents' behavior or were the same as their coping strategies developed in childhood to cope with their parents behaviors or significant events.

Attachment with Parents: Childhood vs. Adulthood

Not all of the participants' relationships with their parents went through changes. Interestingly, most of the participants' relationships with their mothers did not change much, but with their fathers, it often did change (Please see table 4-4 on page 193). This phenomenon might relate to what Attachment Theory suggests, that is, mothers who were usually the primary attachment figures, remained so (Belsky & Fearon, 2002a). However, why the relationship with mothers tended to stay the same but not with fathers remained unclear.

Some participants (i.e. Angie and Tracy) suspected or had confirmed that their mothers were also the survivors of abuse. Some of them also suspected or had confirmed that their mothers had mental health issues such as depression and eating disorders (i.e. Angie, Tracy, and Mary). Similar to previous studies, these participants' mothers' experiences and/or mental health and well-being seemed to restrict their abilities to attune to the participants' needs in childhood (Carter, Garrity-Rokous, Chazan-Cohen, Little, & Briggs-Gowan, 2001). It also influenced the participants' current model of self and other. For example, Angie was aware of her angry behaviors as similar to her mother and Tracy tried as much as she could to avoid becoming like her mother.

If the participants' relationships with their parents did change, it was usually related

to certain significant events they experienced in childhood and how their parents approached those significant events. These significant events might relate to certain developmental needs at certain stages, such as adolescents exploring their identities (Erickson, 1964). For example, Brad's dad approached Brad's needs to explore his interests in adolescence with suppression (Allen, McElhaney, Kuperminc, & Jodl, 2004), while Don's parents approached it with concern and respect. Their parents' different approaches made the differences in the parent-child relationships and their current model of self and other (Karavasilis, Doyle, & Markiewicz, 2003).

In some cases, the significant events that the participants experienced were related to their parents' own couple relationships or life experiences at the time (Belsky & Fearon, 2002b). For example, Angie described how her mother took out her anger on Angie and her brother after the divorce. At that time, Angie and her brother were the only two children living with their father. At the same time, her father went on to develop a new relationship after the divorce. Her parents' coping and decisions because of the divorce had significant influence not only on themselves but also on Angie's development.

Another example was Mary and Larry. After the divorce, their mothers had to move them around to wherever the mothers could get the jobs in order to support Mary and Larry. "Moving around" was a significant event in both Mary and Larry's developmental

process and had significant influence on their current model of other. However, it was also their mothers' coping with the divorce. Ned's mother decided to stay with his father even though she suffered from severe domestic violence. According to Ned, his mother did what their religion expected her to do.

It seemed that family environment, parental life experiences, developmental needs, and/or significant events all had the potential to contribute to the participants' relationship with their parents (Belsky & Fearon, 2002b). However, it was how the parents responded to these events that made the difference (Atkinson et al., 2000) in influencing the participants' adult model of self and other. Similar to previous studies, the participants showed that maternal responses were significant to infant attachment development (Atkinson et al., 2000), and the relationship with the mother showed less change from childhood to adulthood. In addition, paternal responses were also significant in attachment development especially when the participants had secure attachment with their fathers in childhood (i.e. Brad, Angie, Bill, and Adele). These fathers' responses to the participants' needs contributed significantly to their current model of self and other.

Attachment Development: Influence outside Family

Peer, significant adults, and school also had influences on the participants' development. The participants in this study showed that their significant adults or peers

did have influences on their life decisions (e.g., Tracy), or did provide support at different times in their lives (e.g., Brad). However, the causal relationship was not clear. Previous research studies found that secure attachment did have an influence on performance in school (Granot & Mayseless, 2001; Moss & St-Laurent, 2001), and improved peer relationships (Coleman, 2003). However, the study participants indicated that there was an interaction between attachment and peer relationship, not a causal relationship. For example, Tracy identified that she was able to find a lot of good friends who helped her throughout the years. When she was young, she did not understand why those friends, who were from very supportive families, would like her. This was different from the previous study findings where children found peers with similar attachment styles (Hodges, Finnegan, & Perry, 1999; Lieberman, Doyle, & Markiewicz, 1999). Tracy's friends also helped her to pay attention to her coping strategies, such as eating disorders.

In addition, the interaction of peer influence was related to the family ecology and parental responses. For example, Larry's difficulty in peer relationships was the result of his parents' divorce (Fraley 2002) and constant moving with his mother. He described how his peers would tease him because his parents were divorced. His coping with moving around was to keep everything to himself so that he would not be hurt again. Even though his mother responded with a positive and accepting manner, it still had an

influence on Larry's current model of self. Moreover, even though the peers, significant adults, and school did have influence on the study participants' development, most of the study participants' current model of self and other was significantly influenced by their relationship with their parents (Richaud de Minzi, 2006; Kerns, Tomich, Aspelmeier, & Contreras, 2000; Kerns, Tomich, & Kim, 2006).

Adult Relationships and their Influence on Attachment

The partners in each couple reported that their current relationship was more supportive and loving than their relationship with their parents. According to Adult Attachment Theory (Hazan & Shaver, 1987), the support and love that participants receive from each other should be a secure base for them (Feeney, 1999; Schachner, Shaver, & Mikulincer, 2003). However, most of the participants seemed to have difficulty seeking help from their partners (i.e. Brad and Tracy), or feeling undeserving when receiving it from their partners (i.e. Elsa). In their current never-resolved conflict, their reactions in the interaction were similar to their parents' behaviors or their childhood coping strategies. Moreover, the negative interaction in the never-resolved conflict interaction seemed to confirm their model of self or other. This phenomenon was similar to the previous findings that individuals with attachment styles that change when they undergo stress were more likely to have personal or family history with mental illness,

parental discord, or history of abuse (Cozzarelli, Karafa, Collins, & Tagler, 2003; Davila, Burge, & Hammen, 1997; Davila & Cobb, 2003; Davila, Karney, & Bradbury, 1999).

Adult Attachment vs. Childhood Attachment

The partners' reactions in the never-resolved conflict displayed similarities with the behaviors they learned from childhood. Their reactions also corresponded with their model of self or other. This was similar to the previous adult attachment that individuals usually selected environment or people to confirm their attachment style (Collins & Read, 1990; Kirkpatrick & Davis, 1994; Treboux, Crowell, & Waters, 2004). Previous studies found that individuals with ambivalent attachment styles would pair with individuals with avoidant attachment styles in order to correspond with their behaviors and confirm their own attachment style (Collins & Read, 1994; Kirkpatrick & Davis, 1994). This study did not categorize the participants' attachment using any of the category system such as Ainsworth (Ainsworth, Blehar, Waters, & Wall, 1978), Main et al. (Main, Kaplan, & Cassidy, 1985), or Hazen and Shaver (Hazan & Shaver, 1987). However, based on the model of self and model of other, the study found that one of the partners' reaction in never-resolved conflict corresponded with his/her model of self and the other one's corresponded with his/her model of other, which was similar to the previous scholarship in this area.

Implications

Implications for Clinical Practice

Individual and couple therapy. Previous research showed that male partners of female CSA survivors experienced distress and confusion when the female CSA survivors went through therapy (Miller & Sutherland, 1999; Nelson & Wampler, 2000). Couple therapy is suggested to be used to deal with the couple's interaction difficulties (Johnson, 2002). However, if the female CSA adult survivors' male partner had similar developmental experiences as they did, providing individual therapy to the female CSA adult survivor alone might not be the best choice.

For example, in one of Angie's diary entries, she specifically mentioned that she and Brad were on different levels in their healing process as a result of her individual therapy. She considered leaving Brad if he did not catch up with her. In addition, if the partners confirmed each other's model of self and other, focusing on the female survivors' individual process only, might not help the couple break/change their interaction pattern in daily life. In Ned's individual interview and diary, he mentioned the importance of couple therapy in his relationship with Elsa. He believed that couple therapy helped him and Elsa to break through the destructive patterns his parents had and helped them going through different low points in their marriage. Tracy also mentioned that through couple

therapy, she was able to see her own patterns played out in the relationship, which was not the focus in her individual therapy.

Interestingly, at the de-briefing time that followed the close of the study, a few of the couples in the study mentioned that their relationship was better after the first individual interview (i.e. Angie and Brad and Don and Rosie). Mainly, the female partners felt their male partners were more attentive to their emotions after the first individual interview. The male partners admitted that reviewing their developmental history and relationship history brought them different perspectives about themselves and their relationships. Brad expressed that he understood what it meant to be “*emotionally supportive and not providing suggestions.*” Don felt that he appreciated his relationship with Rosie even more than before. Charlie and Bill felt that they understood how their past contributed to the difficulties in their current relationships. Larry felt that the individual interview provided a chance for him to talk about his story and his stress in supporting Mary. He felt he now had more energy to continue supporting Mary in her healing process. Talking about their own stories in the individual interviews brought male participants different perspectives and understanding in their interactions with their partners.

From these findings, along with participants’ feedback, it seems that therapists should carefully consider who should be part of the ongoing process of therapy for CSA

survivors. Given that the current positive interaction did not change their model of self and other, and that couples' interactions in conflict were based on learned behaviors in childhood that reinforced their model of self and other, then therapists need to understand that their clients are not just female survivors, but male survivors as well. The clients in the room include the female CSA survivors, the male partners, and their interaction patterns that were learned from the partners' relationship with their parents.

From the male participants' feedback, providing the male partners a chance to talk about their stories gave them a chance to understand their contribution in the couple relationship and to understand their female partners' experiences. From female participants' feedback, the individual interview with the male participants changed their couple interactions. Combining individual and couple therapy in the work with the CSA survivors can provide the couples a chance to understand their histories and their contributions to current relationships. By doing so, the therapists can also understand the dynamics played out in the couple relationship. Through individual therapy, therapists can understand the individual partners' developmental history and attachment evolution. Through couple therapy, therapists can understand how the individual partners' attachment evolution played out in current couple relationships, and how the individual partners seek the confirmation of their model of self and other in current partners. Then,

therapists can help the couple to break their interaction cycle.

The power of the therapist. There were several participants who mentioned that they had changed their perspectives about different issues “*after my therapist said so.*” For example, Tracy talked about how she no longer trusted her father because her therapist said that her father did not rescue her when she needed him. Although I did agree with most of their therapists’ perspectives, I was struck by the power that the therapist played in the female CSA survivors’ recovery process.

For example, in her individual diary, Tracy also mentioned that her therapist commented on Charlie’s behaviors as playing the “yes-but game” but not wanting to change. I cannot help but wonder if Charlie was there to defend his perspective, how would that influence Tracy’s position and approaches to their relationship? As mentioned before, Angie mentioned that she and Brad were no longer in the same level in their healing process because of therapy. These female participants’ experiences suggested that the therapists providing individual therapy had a lot of power in deciding the female participants’ couple relationships. Ironically, power was the main issue causing CSA to happen. Even though the power of the therapists is inevitable, the therapists should be aware of the influence of their powers on the clients’ treatment inside and outside the therapy room.

The research participants revealed many individual reactions that were surprising to me during their individual diary and de-briefing times. I can also recall so many surprising moments when I realized that the participants' experiences were so different from the observations. My own biases and life experiences did contribute to those surprising moments. However, through their individual diaries, I realized that the participants tried very hard to maintain their relationships and their model of self and other by using what they learned in childhood. It was only in their individual moments that they were able to reveal their true reactions. For example, in Tracy and Charlie's "never-resolved conflict" interaction, they did not show any conflict and focused on the task. It was until I read their individual diary that I realized their "civilized" behaviors were their coping strategies learned from childhood to cope with their angry parents' behaviors. By being "civil," they tried to avoid conflict and tried not to make the other person angry.

Journaling and other methods for balancing the power of the therapist and the clients. Using diaries or other methods can provide therapists with access to the individual partners' private moments and is helpful in working with the survivors of CSA. Therapists can evaluate overuse of power and influence on their clients and can also evaluate whether their assessments and intervention were useful to the clients.

Diaries seemed to work well with most of the participants in this study. However, a few of the male participants did have difficulty keeping diaries. Larry especially mentioned that keeping a diary was for girls and not for the men. So if therapists were to assign this task, perhaps presenting it in a more gendered way to appeal to male clients may be necessary.

Marriage and Family Therapy theories application. Marriage and Family Therapy (MFT) theories provide useful tools to help CSA survivors and their partners from a system's perspectives. Based on these research outcomes, MFT therapists should be well prepared in individual development and the interconnections with Ecological Theory. Understanding individual Psychosocial Development (Erickson, 1964), attachment needs (Bowlby, 1982), and Ecological Theory (Bronfenbrenner, 1979), the MFT therapists can apply a systems lens to work with adult CSA survivors and their partners both individually and systematically.

For example, Bowen Family Systems Theory (Kerr & Bowen, 1988) can be used as a tool to explore the individual partners' relationship with their families of origin. A detailed genogram with the individual partners can help them to talk about their development and their relationship histories with their families of origin, their parents' relationship, and the influences from their families of origin. Doing the genogram with

each partner provides him/her a chance to share his/her story with the therapist's full attention. On the other hand, doing the genogram with both partners present also provides them a chance to understand each other's from different perspectives.

The concepts of destructive and constructive entitlement from Contextual Family Therapy (Boszormenyi-Nagy & Spark, 1984) can also be applied to understand individual partners' model of self and other in the relationship with their parents. That is, destructive and constructive entitlement learned in childhood with parents, siblings, and other significant others could be understood in relation to model of self and other. For example, if an individual were parentified in childhood, the destructive entitlement earned with the parents might contribute to his/her model of self and other.

Emotionally-focused therapy (EFT) uses Adult Attachment Theory to help couples working through attachment injuries in their relationships. EFT has been applied to working with CSA survivors and their partners (Johnson, 2002). Johnson (2002) suggested that the ongoing couple interaction maintains the CSA survivor's symptoms. By helping couples change their attachment styles from insecure to secure, the CSA survivors would improve their interpersonal functions. However, based on the current research findings, the couple interaction also reinforced the male partners' attachment style. As such, therapists should also pay attention to the male partners' contribution in

the difficulties in the couples' interaction.

EFT focuses on breaking the pursue/withdraw and attack/defend cycle in the couple's interactions. The findings from this research study showed that attachment injuries in the couple relationship might be the result of individual partners trying to maintain their model of self and other learned from childhood. Understanding how individual partners copy/cope their childhood strategies can help the therapists to understand how pursue/withdraw and attack/defend confirmed the individual partner's model of self and other. It can also help the therapist to be more efficient in constructing new interaction between the partners.

Implications for Future Research

Individual vs. Couple. Three of the 11 original recruitment responses were callers that identified themselves as female CSA survivors and fulfilled the recruitment criteria. However, they were excluded from the study because their partners were not willing to participate. In future research, these individuals whose partners do not wish to participate could be placed into another group for comparison.

Heterosexual couples, homosexual couples, and male CSA adult survivors with their partners. There were two couples in this study with both partners as survivors of CSA. Most likely, as these partners displayed similar developmental experiences in childhood,

there are more couples in which both partners are survivors of abuse. Therefore, another direction for future research is to focus on male survivors of CSA with their partners, gay and lesbian couples with one partner as CSA survivors, and couples with both partners as CSA survivors. It is important to understand how the couple interaction in those different groups similar or different than the female survivors of CSA with their partners in order to draw up proper treatment plan as well as research plan.

Treatment effectiveness. Integrating different treatment strategies and exploring the effectiveness of different treatment strategies are needed for future research to help the recovery process for CSA adult survivors more efficiently. The research participants had experiences in different kinds of therapy, including individual, couple, and support groups. Some of them were in therapy for a long time and some of them experienced different kinds of therapy to deal with different issues they were facing at different stages of their lives.

The question is not which form of the therapy is better or suitable for the CSA survivors and their partners. The research findings showed that both individual and couple therapy are needed for the treatment of the survivors of childhood sexual abuse and their partners because they reinforced each other's model of self and interacted with each other's model of self and other in the interaction. Without addressing both parties,

the therapist may not be able to get the full picture of the difficulties that the CSA survivors were facing outside therapy. In addition, the therapist might reinforce the CSA survivors to use current model of self and other in current relationships without being aware of it.

Previous research on treatment effectiveness with survivors of CSA was limited and only focused on individual therapy (Price, Hilsenroth, Petretic-Jackson, & Bonge, 2001). Clinicians and researchers need to address the issue of integrating both forms of therapy together with the right timing in order to improve the effectiveness of the treatment.

Implications for Public Policy

The process of finding the participants was the most challenging part of this study. When I contacted different community and non-profit agencies for help with recruitment, they usually were not able to help because CSA survivors were not part of their service population. It was easier to find this through agencies who were serving female victims of domestic violence, rape, or substance abuse. The research findings showed that some of the female survivors or their male partners had history of substance abuse or witnessing domestic violence. However, these experiences happened in the study participants' past and they did not receive help from any public services until they were old enough to seek help by themselves. For example, Tracy mentioned that her brother

and mother were ordered by social services to receive counseling because of physical abuse. She reported that she felt so alone in that process because the social worker who went to their house never noticed her existence and her needs even though she lived in the same household.

It is understandable that most of the funding goes to rape victims, domestic violence victims, substance abusers, and/or children suffering from different forms of abuse. Those abuse/traumas are visible and happened in the present needing immediate attention. It is also understandable that most of the funding goes to prevention services. It is most important to prevent the trauma from happening at all. Therefore, public policy and funding orient toward the victims whose trauma happened in the present or toward prevention. However, abuse continues to happen. The research participants in this study were in their 20s to their 50s. If the prevention work had been effective, how did the participants in their 20s still experience similar trauma as the participants in their 50s? More importantly, does the trauma go away itself if the child victims were never discovered by any adults?

The participants in this study were in different developmental stages and different family life stages. Other than couple 2 who did not yet have children, the rest of the participants all mentioned the difficulty of being parents because of the influence from

their families of origin. Many of them also mentioned that they hoped to be different from their own parents, and to give their children different environments from the system they grew up in. Few of the participants also mentioned their own mothers were survivors of CSA. The study findings showed the importance of transgenerational and ecological influences in individual development.

Broadening the definition of "Prevention." Public policy and funding sources need to reconsider the definition of prevention. Prevention works should not be limited to educating parents or children about abuse and related resources. It should include funding for treatment with adult survivors for CSA and make it more visible and more accessible. As Ned and Elsa mentioned, even though they tried their best to change their parenting when their daughters had problems, they understood how their parenting had some negative impact on their daughters' lives currently. Treatment with CSA adult survivors should be considered as part of the prevention work because it will help the future generation to function better.

Research findings showed that the participants reverted into their childhood learned behaviors when under stress. These learned behaviors appeared when they were under stress and might be the reason causing their stress. That is, it might be their coping strategies causing their difficulties in the relationship. The peers, significant adults, and

other systems were important to the participants' development, but the coping strategies under stress were influenced by the parents. Thus public policies and funding sources need to take an ecological perspective into consideration. It is important to protect children. However, it is also important to improve the children's system so that the children can learn different coping strategies to turn into positive model of self and other in adulthood. When helping children with abuse histories, the children's parents should also be considered as clients. The therapists who work with these parents should have training and understanding about abuse, trauma, and systems perspectives. The treatment goal for these parents should not be constricted but also include their own recovery process.

Limitations

Validity of Retrospect Research

Phenomenological research relies on the report of participants' experiences. This research study relied heavily on the participants' memories of their childhood experiences. The attachment relationship evolved and memories also evolved. In a few instances, the participants would report having positive experiences with their attachment figures but later changed their statement after they recalled other incidents that happened in the relationships. The accuracy of the participants' memories of their childhood experiences

was unknown and unable to be externally verified. This limitation is inevitable in retrospective studies but does effect the validity of the findings (Hassan, 2006).

Bracketing out My Judgment

Phenomenological research also emphasizes the importance of providing participants freedom to express their experiences. The reliability of the research lives within the participants' statement, not the researcher's interpretation. In addition, attachment with their parents did evolve throughout the developmental process. Therefore, the participants' model of self and other were also evolving throughout the process. In order to respect the participants' experiences and expression, I had to bracket out my judgment when coding the participants' experiences in "model of self" and "model of other." For example, the participants might describe their attachment figures' responses to the participants' significant events, and their own experiences under the circumstances. However, these experiences might be the participants' evaluation of their parents' behaviors from their adult perspective. For example, many female survivors' parents were unaware of CSA even when there were red flags. The participants commented that they could not believe that their parents, mostly mothers, did not pay attention to those red flags. These were their comments or critiques of their parents' behaviors from their adult perspectives. Thus, for some participants, it was hard for them to answer their

experiences from childhood perspectives or memories. As a researcher, I needed to bracket my judgment and not label the participants' experiences as worthy or unworthy.

Two-Year Relationship Cutoff Criteria

In terms of the selection criteria for this sample, couples with both partners willing to participate might have better attachment than the couples whose partners were not willing to participate. In addition, the two-year relationship cutoff point was set based on previous research studies (Bowlby, 1982; Hazen & Zeifman, 1999). It was suggested that it took at least two-years for attachment to form (Bowlby, 1982; Hazen & Zeifman, 1999). However, previous studies have also demonstrated that some couples stayed in the relationship even though they were unhappy but because it was familiar as their childhood attachment relationships. Therefore, even though all the couples in this study reported their current relationship was better than their parents, to say that current attachment with the partner can potentially change the childhood attachment style might not be correctly inferential from this study.

Influence of Social Desirability

Prior research suggested that the participants' behaviors did not show dramatic change in the home observations, even when under the situation where the intrusion during observation was minimum (Gardner, 2000; Jacob, Tennenbaum, Seilhamer,

Bargiel, & Sharon, 1994; Pett, 1992). However, the observation settings in this study varied depending on the participants' choices. Most of the couples decided to have the couple interview at their family homes, and few of them chose to be in the campus clinic. The observation may have some influences on the participants' behaviors, as the researcher and camera were present. However, only a few couples reported that their interaction was different than their usual interaction. With the help of the diaries, individual interviews, and de-briefing times, the couple's interaction and its relationship with childhood attachment with parents were captured as best as possible within the limits of research.

The Definition of "Stress"

Based on Attachment Theory, if the attachment figure provided a secure base for the individual to return to when under stress, the individual was more likely to have a secure attachment with the attachment figure. Prior research had found that insecure childhood attachment is like a baseline (Trebourg et al., 2004). Adults were likely to fall back to this baseline when under stress (Trebourg et al., 2004). The research design asked the participants to discuss a topic that was not resolvable in the couple relationship to demonstrate the similarities or differences of current couple attachment and previous childhood attachment with their parents. However, the limitation may be as to whether

“never-resolved conflict” in the couple relationship can be defined as “stress” (Davila & Sargent, 2003). From the research outcomes, the participants did display similar reactions in the “never-resolved conflict” interaction. However, the cause-effect was unknown. That is, it was unclear whether the participants’ reaction learned from childhood caused “never-resolved conflict,” or it was the never-resolved conflict that caused the participants to react to the situation with their childhood coping strategies or the same behaviors as their parents did.

Concluding Statement

This study has provoked some questions, such as, “how important is sexual abuse as a variable in the developmental process?” And, “how important is childhood attachment as a variable in the developmental process?” And “how long does childhood attachment continue in life?”

Researchers in childhood sexual abuse and attachment have asked these questions for decades. These are highly studied topics, with different researchers who hold different perspectives and varying research approaches for data collection and analysis.

As with most researchers, I brought my biases with me into this study. As a person who has trained first as an individual therapist and then, as a systems therapist, this research study explored my two beliefs about human beings. The first belief is that an

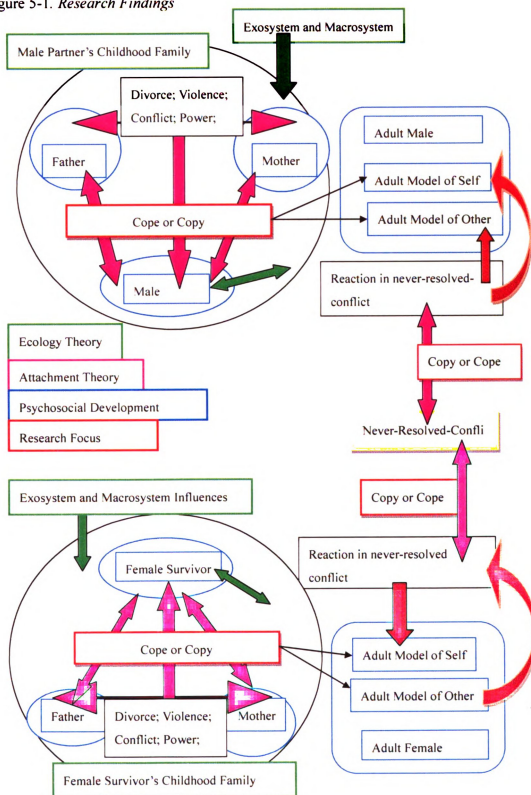
individual is influenced by the environment, but also decides how much he/she wants to continue to be influenced by the environment. The second belief is that an individual is influenced by his/her past experiences, but also can change the future by his/her current actions. A therapist needs to attend to both individual and system needs. A therapist also needs to understand the clients' past but work with the clients' in the present.

All the couples in this study tried to be different than their parents in their current relationships. They also experienced better quality relationship than they had with their parents. However, their past attachment history did seem to contribute to their interaction difficulties in stressful situations. It might be that their past history contributed to the interaction and resulted in a set of issues that become a never-resolved conflict. It might be the issues they were facing triggered their past and activated their coping strategies developed in childhood. From a systems perspective, the cause and effect is not important. Breaking the negative interaction cycle is the focus. Understanding the individual partner's developmental history might assist this process. Helping the partners to react to each other differently provides them a chance to create a different system from the systems they grew up in.

The participants in this study all stated that by participating in this study, they hoped to advance the knowledge of couple interactions when the female partners were CSA

adult survivors. As a therapist and a researcher, I cannot change what happened in those survivors' past and what happened in their systems. However, I truly believe that they deserve to have healthier relationships and deserve to live in healthier systems. I hope this research study will contribute to the research and practice that goes into enhancing the effectiveness of treatment with adult survivors of child sexual abuse and their partners.

Figure 5-1. *Research Findings*



APPENDICES

Appendix 1: Telephone Screen Questions

Thank you for your response to my advertisement. I'd like to tell you a little bit about my research project and also ask you a few questions to make sure that you are a good match for my study.

This study is to explore the couple relationship when the female partner had sexual abuse experiences in childhood. I am interested in how your relationship with your family and your partner's relationship with his family influence your relationship as a couple. The first step of my study is to get some information about you background information and your history in order to decide whether you are a good match for my study. It will take around 10 minutes to complete this process.

Child sexual abuse is not an easy subject to talk about. Going through this first step can help you decide whether you would feel comfortable talking about this issue in the research process. Also, if you do not fulfill my selection criteria, you do not need to go through the whole process or meet with me.

If you are not willing to continue this process at any time during our conversation, you are free to stop at any time. All the information that you tell me will be kept confidential to the maximum by law. I will not take any of your personal information and contact information unless you are the match of this research and are willing to continue on the next stage of my study. Therefore, there will be no identifiable data if you are not willing to continue or you are not the match of this study. If you are willing to continue, I will take your contact information in the end of this phone conversation. All the data, no matter with or without caller's personal information, will be locked in the cabinet in my advisor's office. You can also contact my advisor Dr. Marsha Carolan at 517-432-3327.

Would you be willing to participate in this telephone screening process?

Yes _____ No _____

Background information

- Could you tell me how old you are?
- Could you tell me if you are in a committed relationship of at least two years?
- Are you engaged, married or living together?
- Have you discussed participation in this study with you partner? Has he agreed to also participate in this study?
- Have you disclosed your child sexual abuse history with your partner?

(Stop here if the caller is under 21 and has not been in the relationship with her partner

for two years, or the partner is not willing to participate or not aware of the female partner's child sexual abuse history. I will repeat the recruitment criteria to her, thank her, and end the screening process at this time.)

Sexual Abuse History

- As you know, this study is interested in finding out how child sexual abuse experiences may or may not affect the adult couple relationship. Therefore, I need to ask you some questions about your sexual abuse history.
- Since you identified as a survivor of child sexual abuse, can you tell me:
- How you always had the memories of childhood sexual abuse? Yes _____ No ____
- Was there a time when you did not remember?
- How did you come to remember if there was time that you did not remember?

(Stop here if the caller seems to indicate having problems remembering child sexual abuse in the past. I will politely let the caller know that I am looking for the participants who have always had memories about child sexual abuse.)

Now I need to ask you some sensitive questions about your sexual abuse to determine if you meet the criteria for this study. If you are uncomfortable with these questions, please let me know and we do not need to proceed any further.

- How old were you when the first sexual abuse experience happened? How long did the sexual abuse go on?
- Was the person who perpetrated abuse a family member, family friend or someone in your community?
- Do you know how much older that person was than you, or, How old that person was at that time?

(Stop here if the caller did not meet the sexual abuse criteria, which is, the perpetrator was at least 5 years older than the victim if sexual abuse happened when the victim was before age of 12, or the perpetrator was at least 10 years older than the victim if sexual abuse happened when the victim was between age 13 and 16.)

Contact Information

Thank you for providing me so much information on the phone. I understand it is not easy to talk about with a stranger about these experiences. The research process will ask you more information about your family, your current relationship, and child sexual abuse experiences in depth. If you are willing to participate, I would like to get your

contact information and set up a time to meet with you and your partner to provide you more information about this research in-depth. In the face-to-face contact, I will explain to you and your partner about the stages of this research process and the time required from you to participate in this process.

(If the caller agrees to meet face-to-face with her partner, I will take her contact information and set an appointment with her.)

Appendix 2: Individual Semi-Structure Interview Guide

1. Introduction:

Thank you for participating in this interview. The whole interview is about 60 to 90 minutes. I am going to ask you about your childhood experiences and what you think how those experiences might have affected you and your life right now. We will start from your memories about your childhood, to your relationship with your parents, to your adult dating relationships, and to your current relationship. Before we start, do you have any question?

2. Background information, Developmental Milestone, and Trauma History

2.1 Can you tell me a little bit about yourself?

- your age, job, marital status, education, etc
- family background: timeline regarding place of birth, family home and neighborhood, extended family, relationship with extended family, and family moving, etc.

2.2 Can you tell me your memories about your childhood?

- Can you tell me one important things happened to you before you started elementary school, in elementary school, middle school, high school, and after high school that was important to you and stood up in your memory right away?
- Did you remember how did you feel and what went through your mind when that happened?

2.3 Can you tell me a about the child sexual abuse? (For female survivor only)

- Who was that person hurting you?
- How old were you when this first happened?
- How long did it last?
- How often did it happen?
- How did you feel about the experiences?
- How did it stop in the end?

2.4 Were there any stressful life events that happened often in your daily life when you grow up? If you did, can you tell me more about those experiences?

- Who is that person?
- How old were you when this first happened?
- How long did this last?
- How often did it happen?
- How did you feel about these experiences?
- How did it stop in the end?

3. Attachment with parents

Now, I am moving into the questions about your relationship with your parents.

3.1 Can you tell me a little bit about your mom and dad? What kind of persons are they?
How would you describe them?

4.2 How would you describe your relationship with each of your parents?

4.3 When you were sick, hurt, or upset, or in any other negative situation, how did your parents react to those situations?

4.4 Were there any other adults with whom you were close like parents as a child? Can you tell me more about that person and what did that person do that make you feel you were close to him/her?

4.5 Did you remember any significant relationship transition with your parents from your childhood until now? When was that? How did that happen? How did you feel about that transition?

4.6 How about your relationship with your parent now? Do you talk to them about your personal concerns or worries? Are there things that are hard for you to talk to them about?

5. Current relationship

Now, we are moving into your current relationship. You and your _____ (boyfriend, girlfriend, husband, wife) have been _____ (dating, living together, married) for _____ (duration).

5.1 Were there any previous serious romantic relationships before your current partner?

Draw a timeline of the relationship history. Probe about the duration, seriousness, positive and negatives of the relationship, cause of breakup, and the participant's reaction to the breakup.

5.2 Current Relationship

- How would you describe your relationship?
- How would you describe your partner?
- When you were sick, hurt, or upset, or in any other negative situation, how did your parents react to those situations?
 - Why did you think that your partner did that?
 - How did your partner's reaction make you feel?
 - Do you think that your partner knew how you feel?
- How comfortable are you discussing your personal matters with your partner?
- How affectionate are the two of you within the relationship?
 - Is one of you more so than the other?

- Is there ever an issue because of the expression of affection in private or public?
 - Probe for sexual relationship, specifically, whether he/she is satisfied with the sexual relationship and if not, what are his/her feelings/thinking about the situation?)

5.3 Conflict Resolution

- How often do you have disagreements or arguments? Do you usually resolve those disagreements?
- What is the most common conflict that you have but never get resolved?
 - Is there any conflict in your relationship happening a lot but never get resolved?
 - How do you feel about that conflict?
 - How do you feel about this issue never got resolved?
 - Is there any physical violence involved in the conflict?

5.4 Breakup/Regrets

- How much faith do you have that your relationship will last in the long term?
 - Have you thought about breaking up with your partner?
 - If you do, have you had any fears and worries about the breaking up?

6. Conclusion

Thank you for sharing with me so much information about you, your family, and your relationship.

- Is there anything you would like to say or share with me about today's interview before we end?
- From today until the we see each other next time (two weeks later), I would like you to write down anything that come up to you regarding what we talked about today, for example, your relationship with your parents and your current partner. The instruction about keeping your diary is also in the first page of the journal. I would like you to keep this diary to yourself without sharing with your partner. I will not share your diary with your partner, either.
- When we come back next time, we are going to do three things. First, I would like check in with you about your and what are your feelings/thoughts that come up in the following two weeks. Second, I would like to have you and your partner to discuss the never-resolved-issue that you just told me. Third, we will reflect about your discussion and wrap up the interview.

Are there any questions and concerns before we end the interview?

Appendix 3: Reflection Diary Instruction

Instructions for Keeping Your Diary:

The purpose of this diary is for you to keep any thoughts that related to your individual interview. Therefore, the three main topics that I would like you to keep in here are your thoughts about your childhood, your relationship with your parents, and your relationship with your current partner. When you write down your thoughts, I would like you to keep it as detail as possible. You don't need to worry about the logic, the writing, the grammar, but your own thoughts. When you describe an incident, keep in mind the 5 W (who, what, when, where, how) in the incident. In addition, I am interested in your thoughts about the meaning of that incident to you. Please remember to write down your thoughts about why that person did that to you or why that incident happened to you.

Remember that we talked about the "never-resolved-argument" between you and your partner? If that happened in the next two weeks, I would like you to write down the detail about the incidents and your thoughts and feelings before, in the process, and after the incident.

Please remember to bring your diary to me when you come to the next interview with your partner. Your diary will not be shared with your partner. You are free to make a copy for yourself but the original copy will have to return to me.

Appendix 4: Couple Semi-Structure Interview Questions

1. Summarize the purpose of the couple.

Thank you for coming back to the interview again. Today, I am going to observe your interaction and talk to you about your interaction. Mainly, I want to know how couples solve their conflicts and how it relates to their experiences from childhood.

2. Summarize the “never-resolved conflict” from individual partner and assign the task.

- If the couple mentioned the same issue in the individual interview:

So, two weeks ago, when I interviewed _____ (husband's name), you mentioned that in your relationship, _____ (summarize the issue) is the issue you often disagree with your wife (or girlfriend). When I interviewed _____ (wife's name), she also mentioned the same thing. I would like the two of you to spend 15-20 minutes to discuss this issue here and try to solve it. I am going to just observe your interaction.

- If the couple mentioned different issue in the individual interview:

So, two weeks ago, when I interviewed _____ (husband's name), you mentioned that in your relationship, _____ (summarize the issue) is the issue you often disagree with your wife (or girlfriend). When I interviewed _____ (wife's name), she mentioned different issue. Even though they are different, there is an underlying theme in your argument, which is _____ (summarize the issue). I would like the two of you to spend 15-20 minutes to discuss this issue here and try to solve it. I am going to just observe your interaction.

3. Reflection on the couple interaction

- How do you feel about this discussion?
- Are they different or similar to the discussion you attempted to do at home?
What are the differences and similarities?
- Why do you think they are the same or different?
 - Why did you think you/ your partner did that?
 - How did that make you feel when he/she said/did that?
- Are there any similarities or differences in your interaction comparing to your interaction with your parents? What are the similarities and what are the differences?
- What changes would you like to see in your communication/relationship?

4. Reflection on the research process:

- Looking back in your life, is there anything you would have done differently?
How about in your relationship?

- How do you feel about this whole interview process?
- Any comment that you would like me to know?

5. When the research analysis is done, would you be willing to checking on the analysis and to provide me feedbacks?

Appendix 5: Research Participant Information and Consent Form

You are being asked to participate in a research project. Researchers are required to provide a consent form to inform you about the study, to convey that participation is voluntary, to explain risks and benefits of participation, and to empower you to make an informed decision. You should feel free to ask the researchers any questions you may have.

Study Title: Influence of Early Attachment on the Couple Relationship for Child Sexual Abuse Survivors and Their Partners

Researcher and Title: Dr. Marsha Carolan, Ph. D; Ching-Ju Chen, M.S.

Department and Institution: Department of Family and Child Ecology, Michigan State University

Address: 13B Human Ecology Building, East Lansing, MI 48824

Telephone: 517-432-3327

A research project on “Influence of Early Attachment on the Couple Relationship for Child Sexual Abuse Survivors and Their Partners” is being conducted by Grace Chen, a Ph. D student in the Department of Family and Child Ecology at Michigan State University.

This research aims to understand your relationship with your parents and your partner, and to explore the similarities or differences in these two relationships. From this study, the researcher hopes to learn how an early relationship such as the one between the parent and child may affect a current relationship such as the couple’s relationship. There will be 6-10 couples participate in this study. This study will have 3 stages that last over the course of 3 weeks. In the first stage, you are being asked to take part in a 60-90 minute interview process. The interview process will include questions about your relationship with your parents and important events in your development, and how those experiences make you feel about yourself. In the second stage, you will keep a diary for two weeks to journal the thoughts related to the individual interview questions. In the third stage, you and your partner will participate in a 60 to 90 minutes interview together. The interview process will include questions about your relationship with your partner, and how those experiences make you feel about yourself. The individual and couple interview will be video recorded and audio recorded for transcribing the interview. In the end of the study,

I will provide you with an overview of my findings and get your insights about the findings if you wish to share your thoughts with me.

Potential benefits include the opportunity to gain understanding about yourself, your experiences with your parents, your experiences with your partner, and how your relationship with your parents might have influenced your current relationship with your partner. These understandings about you and your experiences in the relationships may provide you a chance to improve your relationship. Although, the nature of the interview is non-threatening, a perceived risk might be that you feel uncomfortable sharing your experiences in front of your partner and the researcher. You might also feel uncomfortable or stressful to hear your partner's experiences about your relationship. The investigator will be sensitive and will not probe questions further if you are uncomfortable with them.

Any personal information from this study will remain confidential. The researchers will protect your privacy to the greatest extent allowable by law. You will be assigned an identification code based on the pseudo-name that you would like to use, and your personal information will not be labeled on these tapes/transcripts. The identification code is the initial of the pseudo-name. During the interview process, this pseudo-name will be used throughout the interview process as well as be used in the transcripts. The video and audiotapes are used only for transcribing the interview and not for other purposes. After transcribing the interview, the audiotape, video tape, diary, and transcripts from each interview will be stored in individual box and locked in the cabinet in a university office. The transcripts will be saved in the computer with security code. Only my advisor and the researcher will have the security code to open the files. When the analysis is finished, all the files in the computer will be deleted permanently. Only my advisor, the researcher, and the University Institutional Review Board can request to access these tapes and the hard copies of the transcripts. The results of this study may be published or presented at professional meetings, but the identities of all research participants will remain anonymous.

The study is strictly voluntary. Please be aware that you are not required to participate in any part of this research. You may choose not to respond to questions during the interview. You may discontinue your participation at any time without penalty except not getting incentives.

You will receive a \$10 gift card for the participation in each research step with total of

\$30 dollars. That is, you will receive a \$10 gift card for participating in the individual interview, a \$10 gift card for the diary, and a \$10 gift card for participating in the couple interview. Therefore, each individual partner will receive a total of \$30 dollars for participating in the study if he/she decides to participate in all steps. That is, if you participated in the individual interview, but choosing not to participate in keeping the diary or couple interview, you would receive a \$ 10 dollar gift card. If you participated in the individual interview and keeping your diary, but choosing not to participate in the couple interview, you would receive two \$ 10 dollar gift cards.

If you have any questions about this study or concerns regarding the manner in which the study is conducted, please contact the faculty supervisor of this research project, Marsha Carolan at 517-432-3327 or Ching-Ju Chen at 517-444-1132.

If you have any questions about your role and rights as a research participant, or would like to register a complaint about this study, you may contact, anonymously if you wish, the Director of MSU's Human Research Protection Programs, Dr. Peter Vasilenko, at 517-355-2180, FAX 517-432-4503, or e-mail irb@msu.edu, or regular mail at: 202 Olds Hall, MSU, East Lansing, MI 48824.

You are deciding whether to participate. If you agree voluntarily, to participate in this research, please sign below. You may keep a copy of this consent form for your reference. The researchers will offer the finished study for you to read.

Your signature below indicates your voluntary agreement to participate in this study.

Participant Signature _____ *Date* _____

Investigator Signature _____ *Date* _____

Appendix 6: Developmental Experiences within Couple Comparison

Table 4-7. Developmental Experiences within Couple Comparison

Couple 1		
Developmental Stage	Significant Events	
	Brad	Angie
Early Childhood	<i>Parents' fighting</i> <i>Parents' divorce</i> Living arrangement	<i>Parent's fighting</i>
Elementary School	<i>Sexual abuse</i> Birth of younger sister Father remarried Witnessing mother's domestic violence	Sexual Abuse Recurring nightmares Acting out sexual abuse in school
Middle School	Father <i>not supportive to his afterschool curriculum</i> (playing football) by requesting him to work to sabotage his choices. Mother remarried but annulled the marriage	Puberty Parents <i>not supportive to her after school curriculum</i> <i>Parents' divorce</i>
High School	<i>Substance abuse</i> <i>Dropping out of school</i> Change afterschool to curriculum to music and father did not support his decision Reveal his struggle to his father and father took out all his privilege and took out his anger on the younger sister by telling her that he was not her father.	<i>Substance abuse</i> <i>Suspended from school</i> Pregnant and Abortion Mother took out her anger due to divorce on her and her brother Father often left her and her brother unattended at home during weekend.
Early Adulthood	<i>Leaving home town and moved to a new city with the help from a friend in order to change his life.</i> <i>Enroll into community college</i>	Living around with different people randomly with no purpose in life Arrested for DUI <i>Leaving home town and moved to a new city with the help from older brother in order to change her life.</i> <i>Enroll into a community college and transferred to a four-year University</i>
Current Life	Got accepted to transfer to a four-year	Balancing school and parenting

	University	Confronting perpetrator
Couple 2		
Developmental Stage	Significant Events	
	Don	Rosie
Early Childhood	<p>Expected to study hard but more interested in working with hands. <i>Mother did the discipline and made decisions regarding children</i></p> <p><i>Father was more distant and in the background</i></p>	<p>Sexual abuse</p> <p>Very close to her mother and remembered her mother was always attentive to her needs</p> <p><i>Father was the disciplinary and a stronger figure in the household.</i></p>
Elementary School	<p>Having problems with authority; not wanting to be told what to do</p>	<p>Being bullied in school and mother went to school to talk to teacher about that</p> <p>Being very perfectionist in academic performance</p> <p>Anger outburst to sister's children</p> <p>Had very good interpersonal relationship</p>
* Adolescence	<p>Expelled from middle school</p> <p>Substance abuse</p> <p>Listened to heavy metal music</p> <p>Grew long hairs</p> <p>Smoking and Drinking</p> <p>Dropped out of high school</p> <p><i>Started dating current partner</i></p> <p>Resolving problems with "authority" issues with his parents</p> <p><i>Started working and found his areas of interests</i></p> <p><i>Started his own business</i></p>	<p>Disclose CSA to her parents</p> <p><i>Established her career goals</i></p> <p>Feeling triangulated by her parents</p> <p><i>Started dating current partner</i></p>
Early Adulthood	<p><i>Stabled his business and careers</i></p> <p>Broke up and got back with his current partner</p> <p>Got married</p>	<p>Broke up and got back with her current partner</p> <p>Emotionally abused by ex-boyfriend</p> <p><i>More clear goals and choices and decided to study abroad</i></p>

		Got married
Current Life	Moving from home country to US due to wife's decision to study abroad Losing his business Re-building self identity	Balancing school and marriage Being able to make own decision without the influence from parents
* Due to different school systems/names, the coding in couple 2 was coded adolescence stage, equivalent to the combination of middle school and high school years in the US system.		
Couple 3		
Developmental Stage	Significant Events	
	Ned	Elsa
Early Childhood	<p><i>Angry and workaholic father</i></p> <p>Nurturing mother</p> <p>Mother worked in the family owned store</p> <p>Older siblings, especially older sister took care of him</p> <p>Had close relationship with younger sister</p> <p>Witnessing father physical abuse to mother</p>	<p><i>Father verbally and physically abused children</i></p> <p>Cold/passive mother</p> <p>Onset of CSA</p> <p>Mother pregnant with younger brother and it was a hard pregnancy</p> <p>Being left alone at home in the night and the whole family went out for ice cream</p>
Elementary School	<p>Father alcohol abuse</p> <p><i>Father physical abuse mother and children</i></p> <p><i>Father threaten to kill the rest of the family</i></p> <p><i>Experiencing somatic symptoms such as headaches every Friday as father always abuse alcohol and physically abused mother during weekends</i></p> <p>Onset of panic attack</p> <p>Older siblings ran away from home</p> <p>Beg mother to run away from father but mother making excuses for father</p>	<p>Sister started to get very sick due to juvenile diabetic, and mother stayed in the hospital frequently</p> <p>Mother started to work</p> <p>Joining girl scout</p> <p>CSA continued throughout elementary school years</p> <p>CSA experiences was brutal including threats, objects penetration, sexual experiments, tied up in the garage</p> <p>Sick a lot such as stomachaches, headaches.</p>
Middle School	<p>Join choir and found some joy in life</p> <p><i>Thought that he wouldn't live very long because life was miserable</i></p>	<p>Continued to be in girl scout and hanged out with girls from girl scout</p> <p>Class clown</p>

		Tried to be perfect <i>Suicide ideation</i> Fear of dying with no one knew Self-hatred
High School	Father passed away (<i>got away from father's presence</i>) Substance abuse Oldest brother helped to raise him	Suicide ideation Moving out of home to take care of brother's wife from Thailand (<i>got away from father's presence</i>) Getting counseling from community mental health due to suicide ideation <i>Became Christian under the influence of her friend</i>
Early Adulthood	Going away for college got married and divorced became a father <i>Re-connected with the church group. "the life his mother raised him in,"</i> and met current spouse there Got married with current spouse	Join a religious group and met current spouse Got married with current spouse and became a stepmother Older sister passed away Became a mother
Middle Adulthood	Struggled with <i>depression and anxiety</i> Starting therapy Both daughters got pregnant at teenage years	Experienced flashbacks, nightmares, postpartum depression, anxiety, phobia, Confronting father about CSA Father passed away Returning to school but cannot finish due to anxiety and depression
Current Life	Appreciation for his career Learn to practice the attitude of gratitude philosophy Religion is important part in life	Continuously facing depression and anxiety Facing family financial difficulties
Couple 4		
Developmental Stage	Significant Events	
	Charlie	Tracy
Early Childhood	<i>Father's anger</i>	<i>Mother's anger</i>

	<p>Nurturing mothers</p> <p>Spending time to sing, read, and play with mothers</p> <p><i>Grew up in a rural environment and influenced his love for outdoor world.</i></p>	<p>Physical and emotional abuse by mother</p> <p>Father making excuses for mother</p> <p>Not allowed to have her own thing</p> <p>Reading and hide to escape into another world</p> <p><i>Trying to be perfect, good, not to make mistakes that would make her mother mad</i></p>
Elementary School	<p>Shy in social situation</p> <p><i>Fear of making mistakes because did not want to make his parents yell and angry</i></p> <p>Called to the principal's office for the first and the only time in school from K to 12.</p>	<p><i>Grew up in a natural environment and influence her career decision</i></p> <p>Schools as refugee</p> <p>Brother sent to counseling due to mother's physical abuse</p> <p>Got strength from friends in school</p>
Middle School	<p>Difficulty adjusting to the new school because of new interpersonal relationship</p> <p>Uncomfortable feelings about interacting with opposite sex</p> <p>Participated in different afterschool curriculum such as play, band, and piano lessons</p>	<p>Reading books about slavery to learn how to cope with abusive environment</p> <p>Continued to get strength from friends and learned that there were different family dynamics</p>
High School	<p>Dating girls far away from hometown</p> <p>Quitting boy scout</p> <p>Continued to participated in band and play</p> <p><i>Wanting to leave hometown to see the world</i></p>	<p>Started dating</p> <p>Join the band and playing Flute in the band</p> <p>Onset of eating disorder</p> <p>Continued to get strength from friends</p> <p><i>Influenced by significant adults and wanting to leave hometown to see the world</i></p>
Early Adulthood	<p><i>Left hometown for college</i></p> <p>Chose the university that his girlfriend went</p> <p><i>Left college to California to learn to play music</i></p>	<p><i>Left hometown for college</i></p> <p>Left US to study abroad.</p> <p>Started counseling</p> <p><i>Left US to Scotland and got married there</i></p>

	<p><i>Came home and broke up with girlfriend</i></p> <p>Girlfriend got pregnant and got married</p> <p>Divorced when the second child was young</p> <p>Had the third child with current partner</p>	<p>DV in the first marriage</p> <p>Went back to school and made career decision into field related to Nature</p> <p><i>Came back to US</i></p> <p>Continue having eating disorder</p>
Middle Adulthood	N/A	<p>Received therapy</p> <p>Divorced the first husband</p> <p>Pursing education in Environment/Nature</p> <p>Met current partner and became a mother</p>
Current Life	<p>Planning on going back to school</p> <p>Difficulties in co-parenting relationship with ex-wife</p> <p>Receiving therapy</p>	<p>Trying to balance relationship, school, and being a mother & step-mother</p> <p>Continue to receive therapy</p>
Couple 5		
Developmental Stage	Significant Events	
	Larry	Mary
Early Childhood	<p><i>Parents' divorce</i></p> <p><i>Father's distance</i></p> <p><i>Mother's moving around</i></p> <p>Took speech class in kindergarten</p>	<p><i>Parents' Divorce at 2</i></p> <p><i>Moving around with mother</i></p> <p>Onset of CSA</p> <p><i>Didn't have memories about father</i></p> <p>Mother went back to school.</p> <p>Mother had mood swings</p> <p>Mother used Marijuana</p>
Elementary School	<p>CSA</p> <p>Mother continued to move around</p> <p>Mother had different boyfriends came and go</p> <p>Went to elementary school a year late due to system change and being held back for another year due to poor academic performance</p> <p>Difficulties in learning and in interpersonal relationships in school</p>	<p>Mother's boyfriend got married but continued to be in their life</p> <p><i>Mother continued to move around</i></p> <p>Mother ignored her when her boyfriend came to visit.</p> <p>Sexually acting out on other children</p>

	<p>Being bullied by other kids in school due to parents' divorce</p> <p>Anger outburst in school and referred to anger management class</p> <p>Distant relationship with father</p> <p>Stepmother physically abused him and sister; and mother reported to protective services</p> <p><i>Moved in with father in the fifth grade and stopped to move around with his mother</i></p>	
Middle School	<p>Lived with father</p> <p>Joined boy scout</p> <p>Grades improved</p>	<p>Mother moved away from mid-Michigan area to be closer to her boyfriend</p> <p><i>Mother stopped to move around at 6th grade</i></p> <p>Adjusting into new school</p> <p>Mother's boyfriend tried to rape her</p>
High School	<p>Moved back with mother in 10th grade due to father moved away</p> <p><i>Moved in with a friend's family in order to go back to the old school district and emancipated from parents</i></p>	<p>Sexually acting out</p> <p><i>Moved in and out with one of the adult boyfriend who was more than 10 years older than her to try to leave her mother</i></p> <p>One credit short to finish high school and took adult education class to get her diploma</p>
Early Adulthood	<p><i>Moved out of Michigan to go to school and moved back to Michigan after finished school</i></p> <p>Met current partner and moved in with her and her mother</p> <p>Moved out from current spouse's mother and got married</p>	<p>Met the first son's father, moved in with him, move out of Michigan and moved back. domestic violence, moved back with mother</p> <p>Met current partner, partner moved in with them, got pregnant with the second child, and moved out from her mother's place</p> <p>Found her mother molested her two older children and got a restraining</p>

		order
Current Life	Struggle financially Struggle with partner's CSA recovery	Receiving therapy for CSA and was diagnosed with Borderline Personality Disorder Struggle financially
Couple 6		
Developmental Stage	Significant Events	
	Bill	Adele
Early Childhood	Adored father Father controlled mother Mother tried to take children and ran away from father	Father was controlling and decision maker in the family Lots of family events
Elementary School	Father and mother broke up Father went back to his wife Moved in with father <i>Father was the discipliner to a point where he was verbally and physically abusive, especially when he did not perform well in school</i> <i>Stepmother was the primary caregiver and was more linear</i> Mother moved around and would be with mother only during summer times; <i>mother was also linear in the discipline</i> <i>Witnessed father physically abused stepmother</i> Difficulty in school and being held back for several times	<i>Father was the reinforce discipliner</i> <i>Mother was more linear</i> Onset of CSA One of the cousin was molested with her Broke arms Playing clarinet in school
Middle School	Father and stepmother got divorce Moved in with mother Started working Onset of substance abuse	Afraid of male teacher and older males <i>Witnessing father emotionally controlled mother</i>
High School	Dropped out from high school due to bad performance and absence Started working & <i>emancipated from his</i>	Younger sister raped by coach Revealed CSA to sister in order to help sister talk

	<i>family</i>	<p>Reveal CSA to parents</p> <p>Accused lying about CSA from extended family members</p> <p>Asked to leave the family because of accusing her step-grandfather</p> <p>Went through different independent living program & <i>emancipated from her family</i></p>
Early Adulthood	<p><i>Ex-wife got pregnant when he was 19, and decided to get married</i></p> <p>Ex-wife cheated with his uncle</p> <p>Continued to abuse illegal drugs</p> <p>Divorced ex-wife</p> <p>Left hometown for substance treatment, went back, and relapse</p> <p>Left hometown for substance abuse treatment again and decided not to move back again.</p> <p>Met current partner, moved in together, and had a child together</p>	<p><i>Got pregnant, moved in with son's father at age 19</i></p> <p>Son's father was incarcerated</p> <p>Moved out of hometown with son and moved current place for a change</p> <p>Suicide attempts and hospitalized</p> <p>Started counseling</p> <p>Mother passed away</p> <p>Had second child</p> <p>Met current partner, got engaged, and had third child</p>
Current Life	In training to get his GED and license for truck driving	<p>Re-built relationship with father and siblings</p> <p>Struggling with CSA impact</p>

Red= same significant events happened in the same stage

Blue - same significant events happened in the different stage

Green - similar significant events happened in the same stage

REFERENCES

REFERENCES

- Adam, K. S., Sheldon-Keller, A. E., & West, M. (1996). Attachment organization and history of suicidal behavior in clinical adolescents. *Journal of Consulting and Clinical Psychology*, 64(2), 264-272.
- Ainsworth, M. D. S., Blehar, M. C., Waters, E., & Wall, S. (1978). *Patterns of attachment: A psychological study of the strange situation*. Hillsdale, N.J.: Erlbaum.
- Ainsworth, M. W. (1999). Intergenerational effects of incest on parenting: skills, abilities, and attitudes. *Journal of Counseling and Development*, 77(3), 303-314.
- Alexander, P. C. (1992). Application of attachment theory to the study of sexual abuse. *Journal of Consulting and Clinical Psychology*, 60(2), 185-195.
- Alexander, P. C. (1993). The differential effects of abuse characteristics and attachment in the prediction of long-term effects of sexual abuse. *Journal Of Interpersonal Violence*, 8(3), 346-362.
- Alexander, P. C. (2003). Understanding the Effects of Child Sexual Abuse History on Current Couple Relationships: An Attachment Perspective. In S. M. Johnson & V. E. Whiffen (Eds.), *Attachment processes in couple and family therapy*.; 342-365; . New York, NY, US: Guilford Press.
- Alexander, P. C., & Anderson, C. L. (1997). Incest, attachment, and developmental psychopathology. In D. Cicchetti & S. L. Toth (Eds.), *Developmental perspectives on trauma: Theory, research, and intervention* (pp. 343-377). Rochester, NY, US: University of Rochester Press.
- Alexander, P. C., Anderson, C. L., Brand, B., Scaeffter, C. M., Grelling, B. Z., & Kretz, L. (1998). Adult attachment and long-term effects in survivors of incest. *Child Abuse & Neglect*, 22(1), 45-61.
- Alexander, P. C., Teti, L., & Anderson, C. L. (2000). Childhood sexual abuse history and role reversal in parenting. *Child Abuse & Neglect*, 24(6), 829-838.

- Allen, J. P., Hauser, S. T., & Borman-Spurrell, E. (1996). Attachment theory as a framework for understanding sequelae of severe adolescent psychopathology: An 11-year follow-up study. *Journal of Consulting and Clinical Psychology*, 64(2), 254-263.
- Allen, J. P., & Land, D. (1999). Attachment in adolescence. In J. Cassidy & P. R. Shaver (Eds.), *Handbook of attachment: Theory, research and clinical applications* (pp. 319-335). New York: Guilford Press.
- Allen, J. P., Marsh, P., McFarland, C., McElhaney, K. B., Land, D. J., Jodl, K. M., et al. (2002). Attachment and autonomy as predictors of the development of social skills and delinquency during mid-adolescence. *Journal of Consulting and Clinical Psychology*, 70(1), 56-66.
- Allen, J. P., McElhaney, K. B., Kuperminc, G. P., & Jodl, K. M. (2004). Stability and change in attachment security across adolescence. *Child Development*, 75(6), 1792-1805.
- Allen, J. P., Moore, C., Kuperminc, G., & Bell, K. (1998). Attachment and adolescent psychosocial functioning. *Child Development*, 69(5), 1406-1419.
- Allen, J. P., Porter, M., McFarland, C., McElhaney, K. B., & Marsh, P. (2007). The relation of attachment security to adolescents' paternal and peer relationships, depression, and externalizing behavior. *Child Development*, 78(4), 1222-1239.
- American Psychiatric Association. (2000). *Diagnostic and Statistical Manual of Mental Disorders (DSM- IV-TR)* (Fourth Edition, Text Revision ed.). Arlington, VA: American Psychiatric Publishing, Inc. .
- Anan, R. M., & Barnett, D. (1999). Perceived social support mediates between prior attachment and subsequent adjustment: a study of urban African American children. *Developmental psychology*, 35(5), 1210-1222.
- Anderson, C. L., & Alexander, P. C. (1996). The relationship between attachment and dissociation in adult survivors of incest. *Psychiatry: Interpersonal and Biological Processes*, 59(3), 240-254

- Anderson, C. L., & Alexander, P. C. (2005). The Effects of abuse on children's development: An attachment perspective. In T. P. Forrest (Ed.), *Handbook for the treatment of abused and neglected children*. (pp. 3-23). Binghamton, NY, US: Haworth Social Work Practice Press.
- Aspelmeier, J. E., Elliott, A. N., & Smith, C. H. (2007). Childhood sexual abuse, attachment, and trauma symptoms in college females: the moderating role of attachment. *Child Abuse and Neglect*, 31(5), 549-566.
- Atkinson, L., Niccols, A., Pagilia, A., Coolbear, J., Parker, K. C. H., Poulton, L., et al. (2000). A meta-analysis of time between maternal sensitivity and attachment assessment: Implications for internal working models in infancy/toddlerhood *Journal of Social and Personal Relationships*, 17(6), 791-810.
- Bacon, B., & Lein, L. (1996). Living with a female sexual abuse survivor: Male partner's perspective. *Journal of Child Sexual Abuse*, 5(2), 1-16.
- Bal, S., De Bourdeaudhuij, I., Crombez, G., & Van Oost, P. (2005). Predictors of trauma symptomatology in sexually abused adolescents: a 6-month follow-up study. *Journal of Interpersonal Violence*, 20(11), 1390-1405.
- Bal, S., Van Oost, P., De Bourdeaudhuij, I., & Crombez, G. (2003). Avoidant coping as a mediator between self-reported sexual abuse and stress-related symptoms in adolescents. *Child Abuse & Neglect*, 27(8), 883-897.
- Banyard, V. L. (1997). The impact of childhood sexual abuse and family functioning on four dimensions of women's later parenting. *Child Abuse & Neglect*, 21(11), 1095-1107.
- Banyard, V. L. (2007). Adolescent survivors of sexual abuse: Developmental outcomes. *The Prevention Researcher*, 14(2), 6-10.
- Banyard, V. L., Arnold, S., & Smith, J. (2000). Childhood sexual abuse and dating experiences of undergraduate women. *Child Maltreatment*, 5(1), 39-48.
- Banyard, V. L., & Williams, L. M. (1996). Characteristics of child sexual abuse as

correlates of women's adjustment: A prospective study. *Journal of Marriage and the Family*, 58(4), 853-865.

Banyard, V. L., & Williams, L. M. (2007). Women's voices on recovery: a multi-method study of the complexity of recovery from child sexual abuse. *Child Abuse & Neglect*, 31(3), 275-290.

Banyard, V. L., Williams, L. M., & Siegel, J. A. (2001). The long-term mental health consequences of child sexual abuse: an exploratory study of the impact of multiple traumas in a sample of women. *Journal of Trauma and Stress*, 14(4), 697-715.

Banyard, V. L., Williams, L. M., & Siegel, J. A. (2002). Re-traumatization among adult women sexually abused in childhood: exploratory analyses in a prospective study. *Journal of Child Sexual Abuse*, 11(3), 19-48.

Barcus, R. (1997). Partners of survivors of abuse: A men's therapy group. *Psychotherapy: Theory, Research, Practice, Training*, 34(3), pp.316-323.

Bartholomew, K. (1990). Avoidance of intimacy: An attachment perspective. *Journal of Social and Personal Relationships*, 7, 147-178.

Bartholomew, K., & Horowitz, L. M. (1991). Attachment styles among young adults: A test of a four-category model. *Journal of Personality and Social Psychology*, 61(2), 226-244.

Bartholomew, K., & Shaver, P. R. (1998). Methods of assessing adult attachment: Do they converge? In J. A. Simpson & W. S. Rholes (Eds.), *Attachment Theory and Close Relationships* (pp. 46-76). New York, NY: The Guildford Press.

Beitchman, J. H., Zucker, K. J., Hood, J. E., DaCoata, G. A., Akman, D., & Cassavia, E. (1992). A review of the long-term effects of child sexual abuse. *Child Abuse & Neglect*, 16(1), 101-118.

Belsky, J. (1996). Parent, infant, and social-contextual antecedents of father-son attachment security. *Developmental Psychology*, 32, 905-913.

- Belsky, J. (1999). Interactional and contextual determinants of attachment security. In J. Cassidy & P. R. Shaver (Eds.), *Handbook of attachment: Theory, research and clinical applications* (pp. 249-264). New York: Guildford Press.
- Belsky, J., & Fearon, R. M. (2002a). Early attachment security, subsequent maternal sensitivity, and later child development: does continuity in development depend upon continuity of caregiving? *Attachment & Human Development*, 4(3), 361-387.
- Belsky, J., & Fearon, R. M. (2002b). Infant-mother attachment security, contextual risk, and early development: A moderational analysis. *Development and Psychopathology*, 14(2), 293-310.
- Berant, E., Mikulincer, M., & Florian, V. (2003). Marital satisfaction among mothers of infants with congenital heart disease: The contribution of illness severity, attachment style, and the coping process. *Anxiety, Stress & Coping*, 16(4), 397 - 415.
- Bianchi, S. M. (1995). The changing demographics and socioeconomic characteristics of single parent families. *Marriage & Family Review*, 20(1-2), 71-97.
- Bohlin, G., Hagekull, B., & Andersson, K. (2005). Behavioral inhibition as a precursor of peer social competence in early school age: The interplay with attachment and nonparental care. *Merrill-Palmer Quarterly*, 51(1), 1-19.
- Bohlin, G., Hagekull, B., & Rydell, A.-M. (2000). Attachment and social functioning: A longitudinal study from infancy to middle childhood. *Social Development*, 9(1), 24-39.
- Bost, K. K., Vaughn, B. E., Washington, W. N., Cielinski, K. L., & Bradbard, M. R. (1998). Social competence, social support, and Attachment: Demarcation of construct domains, measurement, and paths of influence for preschool children attending Head Start. *Child Development*, 69(1), 192-218.
- Boszormenyi-Nagy, I., & Spark, G. M. (1984). *Invisible Loyalties* New York, NY: Brunner/Mazel, Inc.

- Bowlby, J. (1982). *Attachment and loss: Attachment* (Vol. 1). New York, NY: Basic Books.
- Breslau, N., Lessler, R. C., Chilcoat, H. D., Schultz, L. R., Davis, G., & Andreski, P. (1998). Trauma and posttraumatic stress disorder in the community. *Archives of General Psychiatry*, 55(7), 626-632.
- Briggs, L., & Joyce, P. R. (1997). What determines post-traumatic stress disorder symptomatology for survivors of childhood sexual abuse? *Child Abuse & Neglect*, 21(6), 575-582.
- Bronfenrenner, U. (1979). *The ecology of human development : Experiments by nature and design*. Cambridge, MA: Harvard University Press .
- Browne, A., & Finkelhor, D. (1986). Impact of child sexual abuse: A review of the research. *Psychological Bulletin*, 99(1), 66-77.
- Burgess, K. B., Marshall, P. J., Rubin, K. H., & Fox, N. A. (2003). Infant attachment and temperament as predictors of subsequent externalizing problems and cardiac physiology. *Journal of Child Psychology and Psychiatry*, 44(6), 819-831.
- Carter, A. S., Garrity-Rokous, F. E., Chazan-Cohen, R., Little, C., & Briggs-Gowan, M. J. (2001). Maternal depression and comorbidity: predicting early parenting, attachment security, and toddler social-emotional problems and competencies. *Journal of American Academy of Child & Adolescent Psychiatry*, 40(1), 18-26.
- Chauncey, S. (1994). Emotional concerns and treatment of male partners of female sexual abuse survivors. *Social Work*, 39(6), 669-676.
- Cobb, R. J., Davila, J., & Bradbury, T. N. (2001). Attachment security and marital satisfaction: The role of positive perceptions and social support. *Personality and Social Psychology Bulletin*, 27(9), 1131-1143.
- Cole, P. M., & Putnam, F. W. (1992). Effect of incest on self and social functioning: A developmental psychopathology perspective. *Journal of consulting and clinical psychology*, 60(2), 174-184.

- Coleman, P. K. (2003). Perceptions of parent–child attachment, social self-efficacy, and peer relationships in middle childhood. *Infant and Child Development*, 12, 351-368.
- Collins, N. L., & Read, S. J. (1990). Adult attachment, working models, and relationship quality in dating couples. *Journal of Personality and Social Psychology*, 58, 644-663.
- Collins, N. L., & Read, S. J. (1994). Cognitive representations of attachment: The structure and function of working models. In K. Bartholomew & D. Perlman (Eds.), *Advances in personal relationships: Attachment processes in adulthood* (Vol. 5). London: Jessica Kingsley.
- Corey, K. M., & Leslie, D. R. (1997). The prevalence of child sexual abuse: Integrative review adjustment for potential response and measurement biases. *Child Abuse & Neglect*, 21(4), 391-398.
- Cozzarelli, C., Karafa, J. A., Collins, N. L., & Tagler, M. J. (2003). Stability and change in adult attachment styles: Associations with personal vulnerabilities, life events, and global constructs of self and others. *Journal of Social and Clinical Psychology*, 22(3), 315-346.
- Creswell, J. W. (2007). *Qualitative inquiry and research design: Choosing among five approaches* (2nd ed.). Thousand Oaks, CA: Sage Publication.
- Davila, J., Burge, D., & Hammen, C. (1997). Why does attachment style change? *Journal of personality and social psychology*, 73(4), 826-838.
- Davila, J., & Cobb, R. J. (2003). Predicting change in self-reported and interviewer-assessed adult attachment: Tests of the individual difference and life stress models of attachment change. *Personality and Social Psychology Bulletin*, 29(7), 859-870.
- Davila, J., Karney, B. R., & Bradbury, T. N. (1999). Attachment change processes in the early years of marriage. *Journal of personality and social psychology*, 76(5), 783-802.

- Davila, J., & Sargent, E. (2003). The meaning of life (events) predicts changes in attachment security. *Personality and Social Psychology Bulletin*, 29(11), 1383-1395.
- Department of Health and Human Services. (1999). *Mental Health: A report of the Surgeon General*. Retrieved May 17, 2008. from <http://www.surgeongeneral.gov/library/mentalhealth/home.html>.
- Dickey, W. C., Blumberg, S. J., Division of Health Interview Statistics, National Center for Health Statistics, & Center for Disease Control and Prevention. (2002). *Prevalence of mental disorders and contacts with mental health professionals among adults in the United States: National Health Interview Survey, 1999* (No. DHHS SMA04-3938). Rockville, Maryland: U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Center for Mental Health Services, o. Document Number)
- Diehl, A., S. , & Prout, M., F. . (2002). Effects of posttraumatic stress disorder and child sexual abuse of self-efficacy development. *American Journal of Orthopsychiatry*, 72(2), 262-265.
- Diener, M. L., Isabella, R. A., Behunin, M. G., & Wong, M. S. (2008). Attachment to mothers and fathers during middle childhood: Associations with child gender, grade, and competence. *Social Development*, 17(1), 84(18).
- DiLillo, D. (2001). Interpersonal functioning among women reporting a history of childhood sexual abuse: Empirical findings and methodological issues. *Clinical Psychology Review*, 21(4), 553-576.
- DiLillo, D., & Damashek, A. (2003). Parenting characteristics of women reporting a history of childhood sexual abuse. *Child Maltreatment*, 8, 1-15.
- DiLillo, D., & Long, P. J. (1999). Perceptions of couple functioning among female survivors of child sexual abuse. *Journal of Child Sexual Abuse*, 7(4), 59-76.
- DiLillo, D., Tremblay, G. C., & Peterson, L. (2000). Linking childhood sexual abuse and abusive parenting: The mediating role of maternal anger. *Child Abuse & Neglect*,

24(6), 767-779.

Doyle, A. B., & Moretti, M. M. (2000). *Attachment to parents and adjustment in adolescence: Literature review and policy implications*. Retrieved June 14, 2008, from http://www.phac-aspc.gc.ca/dca-dea/publications/pdf/attachment_e.pdf.

Draucker, C. B. (1996). Family-of-origin variables and adult female survivors of childhood sexual abuse: A review of the research. *Journal of Child Sexual Abuse*, 5(4), 35-64.

Erickson, E. H. (1964). *Childhood and Society* (2nd ed.). New York, NY: Norton.

Fagot, B. I. (1997). Attachment, parenting, and peer interactions of toddler children. *Developmental Psychology*, 33(3), 489-499.

Feeney, J. A. (1994). Attachment style, communication patterns, and satisfaction across the life cycle of marriage. . *Personal Relationships*, 1(333-348).

Feeney, J. A. (1996). Attachment, caregiving, and marital satisfaction. *Personal Relationships*, 3, 401-416.

Feeney, J. A. (1999). Adult romantic attachment and couple relationships. In J. Cassidy & P. R. Shaver (Eds.), *Handbook of attachment: Theory, research and clinical applications* (pp. 355-377). New York, NY: Guildford Press.

Feeney, J. A., Noller, P., & Callan, V. J. (1994). Attachment style, communication, and satisfaction in the early years of marriage. In K. Bartholomew & D. Perlman (Eds.), *Advances in personal relationships: Attachment process in adulthood* (Vol. 5, pp. 269-308). London: Jessica Kingsley.

Feinauer, L. L., Mitchell, J., Haprer, J. M., & Dane, S. (1996). The impact of hardness and severity of childhood sexual abuse on adult adjustment. *The American Journal of Family Therapy*, 24(3), 206-214.

Feinauer, L. L., Callahan, E. H., & Hiltom, H. G. (1996). Positive intimate relationships decrease depression in sexually abused women. *The American Journal of Family*

Therapy, 24(2), 99-106.

Finkelhor, D. (1979). *Sexually Victimized Children*. New York, NY: Free Press.

Finkelhor, D., & Kendall-Tackett, K. (1997). A developmental perspective on the childhood impact of crime, abuse, and violent victimization. In D. Cicchetti & S. L. Toth (Eds.), *Developmental Perspectives on Trauma: Theory, Research, & Intervention*. Rochester, NY: University of Rochester Press.

Finkelstein, E., Bray, J., Research Triangle Park, Larson, M. J., Miller, K., The MEDSTAT Group, et al. (2002). *Prevalence of, and Payments for, Mental Health and Substance Abuse Disorders in Public and Private Sector Health Plans* (No. DHHS SMA04-3938). Rockville, Maryland: U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Center for Mental Health Services.

Firth, M. T. (1997). Male partners of female victims of child sexual abuse: Treatment issues and approaches. *Sexual and Marital Therapy*, 12(2), 159-171.

Fraley, R. C. (2002). Attachment stability from infancy to adulthood: Meta-analysis and dynamic modeling of developmental mechanisms. *Personality and Social Psychology Review*, 6(2), 123-151.

Fraley, R. C., & Brumbaugh, C. C. (2004). A dynamical systems approach to conceptualizing and studying stability and change in attachment security. In W. S. Rholes & J. A. Simons (Eds.), *Adult attachment: Theory, research, and clinical implications* (pp. 86-132). New York: Guilford Press.

Gagnon, M., & Hersen, M. (2000). Unresolved childhood sexual abuse and older adults: Late-life vulnerabilities. *Journal of Clinical Gerontopsychology*, 6(3), 187-198.

Gallo, L. C., & Smith, T. W. (2001). Attachment style in marriage: Adjustment and responses to interaction. *Journal of Social and Personal Relationships*, 18(2), 263-289.

Gardner, F. (2000). Methodological issues in the direct Observation of parent-child

interaction: Do observational findings reflect the natural behavior of participants? .
Clinical Child and Family Psychology Review, 3(3), 185-198.

George, C., Kaplan, M., & Main, M. (1985). Adult attachment interview. Unpublished manuscript. University of California, Berkeley.

Giorgi, A. P., & Giorgi, B. M. (2003a). The descriptive phenomenological psychological method. In P. M. Camic, J. E. Rhoads & L. Yardley (Eds.), *Qualitative Research in Psychology: Expanding Perspectives in Methodology and Design* (pp. 243-273). Washington D. C: American Psychological Association.

Giorgi, A. P., & Giorgi, B. M. (2003b). Phenomenology. In J. A. Smith (Ed.), *Qualitative Psychology* (pp. 25-50). Thousand Oaks, CA: Sage Publication.

Godbout, N., Sabourin, S., & Lussier, Y. (2008). Child sexual abuse and adult romantic adjustment: Comparison of single- and multiple-indicator measures. *Journal of Interpersonal Violence*.

Graham, C. A., & Easterbrooks, M. A. (2000). School-aged children's vulnerability to depressive symptomatology: The role of attachment security, maternal depressive symptomatology, and economic risk. *Development and Psychopathology*, 12(02), 201-213.

Granot, D., & Mayseless, O. (2001). Attachment security and adjustment to school in middle childhood. *International Journal of Behavioral Development*, 25(6), 530-541.

Greensberg, M. T. (1999). Attachment and psychopathology in childhood. In J. Cassidy & P. R. Shaver (Eds.), *Handbook of attachment: Theory, research and clinical applications* (pp. 469-495). New York: Guildford Press.

Griffin, D. W., & Bartholomew, K. (1994). Models of the self and other: Fundamental dimensions underlying measures of adult attachment. *Journal of Personality and Social Psychology*, 67(3), 430-445.

Gullone, E., Ollendick, T. H., & King, N. J. (2006). The role of attachment representation

in the relationship between depressive symptomatology and social withdrawal in middle childhood.(Author abstract). *Journal of Child and Family Studies*, 15(3), 271(215).

Hamilton, C. E. (2000). Continuity and discontinuity of attachment from infancy through adolescence. *Child Development*, 71(3), 690-694.

Harvey, M. R. (1996). An ecological view of psychological trauma and trauma recovery. *Journal of Traumatic Stress*, 9(1), 3-23.

Hassan, E. (2006). Recall bias can be a threat to retrospective and prospective research designs. *The Internet Journal of Epidemiology*, NA.

Hazan, C., & Shaver, P. R. (1987). Romantic love conceptualized as an attachment process. *Journal of Personality and Social Psychology*, 5(2), 511-524.

Hazen, C., & Zeifman, D. (1999). Pair bonds as attachments: Evaluating the evidence. In J. Cassidy & P. R. Shaver (Eds.), *Handbook of attachment: Theory, research and clinical applications* (pp. 336-354). New York, NY: Guilford Press.

Hesse, E. (1999). The Adult Attachment Interview: Historical and current perspectives. In J. Cassidy & P. R. Shaver (Eds.), *Handbook of attachment: Theory, research and clinical applications* (pp. 395-433). New York, NY: Guilford Press.

Hetzel, M., D. , & McCanne, T. R. (2005). The roles of peritraumatic dissociation, child physical abuse, and child sexual abuse in the development of posttraumatic stress disorder and adult victimization. *Child Abuse & Neglect*, 29(8), 915-930.

Hodges, E. V. E., Finnegan, R. A., & Perry, D. G. (1999). Skewed autonomy-relatedness in preadolescents' conceptions of their relationships with mother, father, and best friends. *Developmental Psychology*, 35(3), 737-748.

Huang, G., Zhang, Y., Momartin, S., Huang, X., & Zhao, L. (2008). Child sexual abuse, coping strategies and lifetime posttraumatic stress disorder among female inmates. *International Journal of Prison Health*, 4(1), 54-63.

- Hughes, M. M. (1995). Using the couple relationship to address childhood sexual abuse. *The Family Journal: Counseling and Therapy for Couples and Families*, 2(2), 114-121.
- Jacob, T., Tennenbaum, D., Seilhamer, R. A., Bargiel, K., & Sharon, T. (1994). Reactivity effects during naturalistic observation of distressed and nondistressed families. *Journal of Family Psychology*, 8(3), 354-363.
- Jacobsen, T., & Hoffman, V. (1997). Children's attachment representations: Longitudinal relations to school behavior and academic competency in middle childhood and adolescence. *Developmental Psychology*, 33(4), 703-701.
- Johnson, S. M. (1989). Integrating marital and individual therapy for incest survivors: A case study. *Psychotherapy*, 26(1), 96-103.
- Johnson, S. M. (2002). *Emotionally-Focused Couple Therapy with Trauma Survivors: Strengthening Attachment Bonds*. New York, NY: Guilford Press.
- Johnson, S. M., & Williams-Keeler, L. (1998). Creating healing relationships for couples dealing with trauma: The use of Emotionally-focused marital therapy. *Journal of Marital and Family Therapy*, 24(1), 25-40.
- Jumpar, S. A. (1995). A meta-analysis of the relationship of child sexual abuse to adult psychological adjustment. *Child Abuse & Neglect*, 19(6), 715-728.
- Karavasilis, L., Doyle, A. B., & Markiewicz, D. (2003). Associations between parenting style and attachment to mother in middle childhood and adolescence. *International Journal of Behavioral Development*, 27(2), 153-164.
- Kerns, K. A., Aspelmeier, J. E., Gentzler, A. L., & Grabill, C. M. (2001). Parent-child attachment and monitoring in middle childhood. *Journal of Family Psychology*, 15(1), 69-81.
- Kerns, K. A., Tomich, P. L., Aspelmeier, J. E., & Contreras, J. M. (2000). Attachment-based assessments of parent-child relationships in middle childhood. *Developmental Psychology*, 36(5).

Kerns, K. A., Tomich, P. L., & Kim, P. (2006). Normative trends in children's perceptions of availability and utilization of attachment figures in middle childhood. *Social Development, 15*(1), 1(22).

Kerr, M. E., & Bowen, M. (1988). *Family Evaluation: An Approach Based on Bowen Theory* New York, NY: W. W. Norton & Company.

Kessler, R. C., Berglund, P. A., Glantz, M. D., Koretz, D. S., Merikangas, K. R., Walters, E. E., et al. (2002). *Estimating the Prevalence and Correlates of Serious Mental Illness in Community Epidemiological Surveys* (No. DHHS SMA04-3938). Rockville, Maryland: U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Center for Mental Health Services.

Kirkpatrick, L. A., & Davis, K. E. (1994). Attachment style, gender, and relationship stability: A longitudinal analysis. *Journal of Personality and Social Psychology, 66*(3), 502-512.

Kirkpatrick, L. A., & Hazan, C. (1994). Attachment styles and close relationships: A four-year prospective study. *Personal Relationships, 1*(2), 123-142.

Klohnen, E., & Bera, S. (1998). Behavioral and experiential patterns of avoidantly and securely attached women across adulthood: A 31-year longitudinal perspective. *Journal of Personality and Social Psychology, 74*(1), 211-223.

Knight, C. (1997). The use of self-disclosure by the therapist in the treatment of adult survivors of child sexual abuse. *Journal of Child Sexual Abuse, 6*(4), 65-82.

Lewis, M. (1997). *Altering fate: Why the past does not predict the future*. New York, NY: Guilford.

Lewis, M., Feiring, C., & Rosenthal, S. (2000). Attachment over time. *Child Development, 71*(3), 707-720.

Liang, B., Williams, L. M., & Siegel, J. A. (2006). Relational outcomes of childhood sexual trauma in female survivors: A longitudinal study. *Journal Of Interpersonal*

Violence, 21(1), 42-57.

Lieberman, M., Doyle, A. B., & Markiewicz, D. (1999). Developmental patterns in security of attachment to mother and father in late childhood and early adolescence: Associations with peer relations. *Child Development*, 70(1), 202-213.

Liem, J. H., & Boudewyn, A. C. (1999). Contextualizing the effects of childhood sexual abuse on adult self- and social functioning: an attachment theory perspective. *Child Abuse & Neglect*, 23(11), 1141.

Lussier, Y., Sabourin, S., & Turgeon, C. (1997). Coping strategies as moderators of the relationship between attachment and marital adjustment. *Journal Of Social And Personal Relationships*, 14(6), 777-791.

Lyons-Ruth, K. (1996). Attachment relationships among children with aggressive behavior problems: The role of disorganized early attachment patterns. *Journal of consulting and clinical psychology*, 64(1), 64-73.

Lyons-Ruth, K., Easterbrooks, M. A., & Cibelli, C. D. (1997). Infant attachment strategies, infant mental lag, and maternal depressive symptoms: predictors of internalizing and externalizing problems at age 7. *Developmental Psychology*, 33(4), 681-692.

Machejewski, P. K., Prigerson, H. G., & Mazure, C. M. (2001). Sex differences in event-related risk for major depression. *Psychological Medicine*, 31(4), 593-604.

Maddock, J. W., & Larson, N. R. (2004). The ecological approach to incestuous families. In D. R. Catherall (Ed.), *Handbook of Stress, Trauma, and the Family* (pp. 367-392). New York, NY: Brunner-Routledge.

Madigan, S., Moran, G., Schuengel, C., Pederson, D. R., & Otten, R. (2007). Unresolved maternal attachment representations, disrupted maternal behavior and disorganized attachment in infancy: links to toddler behavior problems. *Journal of Child Psychology and Psychiatry*, 48(10), 1042-1050.

- Main, M., & Goldwyn, R. (1994). Adult attachment rating and classification systems, version 6.0. Unpublished manuscript. . University of California, Berkley.
- 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 in attachment theory and research, Monographs of the Society for Research in Child Development* (Vol. 50, pp. 66-106).
- Maltas, C., & Shay, J. (1995). Trauma contagion in partners of survivors of childhood sexual abuse. *American Journal of Orthopsychiatry*, 65(4), 529-539.
- Marchand, J. F., & Hock, E. (1998). The relation of problem behaviors in preschool children to depressive symptoms in mothers and fathers. *Journal of Genetic Psychology*, 159(3), 353-366.
- McCartney, K., Owen, M. T., Booth, C. L., Clarke-Stewart, A., & Vandell, D. L. (2004). Testing a maternal attachment model of behavior problems in early childhood. *Journal of Child Psychology and Psychiatry*, 45(4), 765-778.
- Meyers, S. A., & Landsberger, S. A. (2002). Direct and indirect pathways between adult attachment style and marital satisfaction. *Personal Relationships*, 9(2), 159-172.
- Meyerson, L. A., Long, P. J., Miranda, R., & Marx, B. P. (2002). The influence of childhood sexual abuse, physical abuse, family environment, and gender on the psychological adjustment of adolescents. *Child Abuse & Neglect*, 26(4), 387-405.
- Miehls, D. (1997). Projective identification in sexual abuse survivors and their partners: Couple treatment implications. *Journal of Analytic Social Worker*, 4(2), 5-22.
- Mikulincer, M., & Shaver, P. R. (2007). *Attachment in adulthood: Structure, dynamics, and change*. New York: The Guilford Press.
- Miller, R. M., & Sutherland, K. J. (1999). Partners in healing: Systemic therapy with survivors of sexual abuse and their partners. *Journal of Family Studies*, 5(1), 97-111.

- Moss, E., Cyr, C., & Dubois-Comtois, K. (2004). Attachment at early school age and developmental risk: examining family contexts and behavior problems of controlling-caregiving, controlling-punitive, and behaviorally disorganized children. *Developmental Psychology*, 40(4), 519-532.
- Moss, E., Rousseau, D., Parent, S., St-Laurent, D., & Saintonge, J. (1998). Correlates of attachment at school age: maternal reported stress, mother-child interaction, and behavior problems. *Child Development*, 69(5), 1390-1405.
- Moss, E., Smolla, N., Cyr, C., Dubois-Comtois, K., Mazzarello, T., & Berthiaume, C. (2006). Attachment and behavior problems in middle childhood as reported by adult and child informants. *Development and psychopathology* 18(2), 425-444.
- Moss, E., & St-Laurent, D. (2001). Attachment at school age and academic performance. *Developmental Psychology*, 37(6), 863-874.
- Moustakas, C. (1994). *Phenomenological Research Methods*. Thousand Oaks, CA: Sage Publications.
- Muller, R. T., & Lemieux, K. E. (2000). Social support, attachment, and psychology in high risk formerly maltreated adults. *Child Abuse & Neglect*, 24(7), 883-900.
- Muller, R. T., Lemieux, K. E., & Sicoli, L. A. (2001). Attachment and psychopathology among formerly maltreated adults. *Journal of Family Violence*, 16(2), 151-169.
- Muller, R. T., Sicoli, L. A., & Lemieux, K. E. (2000). Relationship between attachment style and posttraumatic stress symptomatology among adults who report the experience of childhood abuse. *Journal of Traumatic Stress*, 13(2), 321-332.
- Munson, J. A., McMahon, R. J., & Spieker, S. J. (2001). Structure and variability in the developmental trajectory of children's externalizing problems: Impact of infant attachment, maternal depressive symptomatology, and child sex. *Development and Psychopathology*, 13(02), 277-296.
- Nash, M. R., Neimeyer, R. A., Husley, T. L., & Lamber, W. (1998). Psychopathology associated with sexual abuse: The importance of complementary designs and

common ground. *Journal of Consulting and Clinical Psychology*, 66(3), 568-571.

Nelson, B., & Wampler, K. (2000). Systemic effects of trauma in clinic couples: An exploratory study of secondary trauma resulting from childhood abuse. *Journal of Marital and Family therapy*, 26(2), 171-184.

Neumann, D. A., Houskamp, B. M., Pollock, V. E., & Briere, J. (1996). The long-term sequelae of childhood sexual abuse in women: A meta-analytic review. *Child Maltreatment*, 1(1), 6-16.

Ooms, T., & Wilson, P. (2004). The challenges of offering relationship and marriage education to low-income populations. *Family Relations*, 53(5), 440-447.

Oz, S. (2001). When the wife was sexually abused as a child: Marital relations before and during her therapy for abuse. *Sexual and Relationship Therapy*, 16(3), 287-298.

Paolucci, E. O., Genuis, M. L., & Violato, C. (2001). A meta-analysis of the published research on the effects of child sexual abuse. *The Journal of Psychology*, 135(1), 17-36.

Patton, M. Q. (2002). *Qualitative Research & Evaluation methods* (2nd ed.). Thousand Oaks, CA: Sage Publication.

Peleikis, D. E., Mykletun, A., & Dahl, A. A. (2004). The relative influence of childhood sexual abuse and other family background risk factors on adult adversities in female outpatients treated for anxiety disorders and depression. *Child Abuse and Neglect*, 28(1), 61-76.

Pett, M. A., Wampold, B. E., Vaughan-Cole, B., & East, T. D. (1992). Consistency of behaviors within a naturalistic setting: An examination of the impact of context and repeated observations on mother-child interactions. *Behavioral Assessment*, 14, 367-385.

Pietromonaco, P. R., & Carnelley, K. B. (1994). Gender and working models of attachment: Consequences for perceptions of self and romantic relationships. *Personal Relationships*, 1(1), 63-82.

- Polkinghorne, D. E. (1989). Phenomenological research methods. In R. S. Valle & S. Halling (Eds.), *Existential-phenomenological perspective in psychology: Exploring the breadth of human experiences* (pp. 41-60). New York, NY: Plenum Press.
- Polusny, M. A., & Follette, V. M. (1995). Long-term correlates of child sexual abuse: Theory and review of the empirical literature. *Applied & Preventive Psychology*, 4(3), 143-166.
- Price, J. L., Hilsenroth, M. J., Petretic-Jackson, P. A., & Bonge, D. (2001). A review of individual psychotherapy outcomes for adult survivors of childhood sexual abuse. *Clinical Psychology Review*, 21(7), 1095-1121.
- Putnam, F. W. (2003). Ten-year research update review: Child sexual abuse. *Journal of the American Academy of Child and Adolescent Psychiatry*, 42(3), 269-278.
- QSR International. (2008). NVivo qualitative data analysis software (Version 8). Cambridge, MA QSR International Pty Ltd.
- Richaud de Minzi, M. C. (2006). Loneliness and depression in middle and late childhood: The relationship to attachment and parental styles. *The Journal of Genetic Psychology*, 167(2), 189-210.
- Reid, K., Taylor, D. K., & Wampler, R. S. (1995). Perceptions of partner involvement in the therapeutic process by patients who experienced sexual abuse as children. *Journal of Sex Education and Therapy*, 21(1), 36-45.
- Reid, K., Wampler, R. S., & Taylor, D. K. (1996). The "alienated" partner: Responses to traditional therapies for adult sex abuse survivors. *Journal of Marital and Family Therapy*, 22(4), 443-453.
- Rind, B., Tromovitch, P., & Bauserman, R. (1998). A meta-analytic examination of assumed properties of child sexual abuse using college samples. *Psychological Bulletin*, 124(1), 22-53.
- Rellini, A. (2008). Review of the empirical evidence for a theoretical model to understand

- the sexual problems of women with a history of CSA. *Journal of Sexual Medicine*, 5(1), 31-46.
- Roche, D. N., Runtz, M. G., & Hunter, M. A. (1999). Adult attachment: A mediator between child sexual abuse and later psychological adjustment. *Journal of Interpersonal Violence*, 14(2), 184-207.
- Rosenstein, D. S., & Horowitz, H. A. (1996). Adolescent attachment and psychopathology. *Journal of Consulting and Clinical Psychology*, 64(2), 244-253.
- Rubin, K. H., Dwyer, K. M., Kim, A. H., Burgess, K. B., Booth-Laforce, C., & Rose-Krasnor, L. (2004). Attachment, friendship, and psychosocial functioning in early adolescence. *Journal of Early Adolescence*, 24(4), 326-356.
- Schachner, D. A., Shaver, P. R., & Mikulincer, M. (2003). Adult attachment theory, psychodynamics, and couple relationships: An overview. In S. M. Johnson & V. E. Whiffen (Eds.), *Attachment processes in couple and family therapy* (pp. 18-42). New York: Guilford.
- Scharefe, E. (2003). Stability and change of attachment representations from cradle to grave. In S. M. Johnson & V. E. Whiffen (Eds.), *Attachment processes in couple and family therapy* (pp. 64-84). New York: NY: Guilford Press.
- Schilling, E., A., Aseltine Jr., R., H., & Gore, S. (2007). Young women's social and occupational development and mental health in the aftermath of child sexual abuse. *American Journal of Community Psychology*, 40(1-2), 109-124.
- Schreiber, R., & Lyddon, W. J. (1998). Parental bonding and current psychological functioning among childhood sexual abuse survivors. *Journal of Counseling Psychology*, 45(3), 358-362.
- Schuetze, P., & Eiden, R. D. (2005). The relationship between sexual abuse during childhood and parenting outcomes: Modeling direct and indirect pathways. *Child Abuse & Neglect*, 29(6), 645-659.
- Seiffge-Krenke, I. (2006). Coping with relationship stressors: The impact of different

- working models of attachment and links to adaptation. *Journal of Youth and Adolescence*, 35(1), 25-39.
- Serafin, J. M. (1996). Disrupted relationships and couple therapy: Treating female survivors of child sexual abuse and their partners. *NCP Clinical Quarterly*, 6(2).
- Shapiro, D. L., & Levendosky, A. A. (1999). Adolescent survivors of childhood sexual abuse: The mediating role of attachment style and coping in psychological and interpersonal functioning. *Child Abuse & Neglect*, 23(11), 1175-1191.
- Simpsons, J. A. (1990). Influence of attachment styles on romantic relationships. *Journal of Personality and Social Psychology*, 59(5), 971-980.
- Smith, J. A., Jarman, M., & Osborn, M. (1999). Doing interpretative phenomenological analysis. In C. D. Murray & K. Chamberlain (Eds.), *Qualitative Healthy Psychology* (pp. 218-240). London: Sage Publication Inc.
- Smith, J. A., & Osborn, M. (2003). Interpretative phenomenological analysis. In J. A. Smith (Ed.), *Qualitative Psychology* (pp. 51-80). Thousand Oaks, CA: Sage Publication.
- Snyder, H. N. (2000). *Sexual Assault of Young Children as Reported to Law Enforcement: Victim, Incident, and Offender Characteristics* (No. 7/00 NCJ 182990). Washington, DC: U.S. Department of Justice, Bureau of Justice Statistics.
- Spaccarelli, S. (1994). Stress, appraisal, and coping in child sexual abuse: A theoretical and empirical review. *Psychological Bulletin*, 116(2), 340-362.
- Sroufe, L. A., Carlson, E. A., Levy, A. K., & Egeland, B. (1999). Implications of attachment theory for developmental psychopathology. *Development and Psychopathology*, 11(1), 1-13.
- Sroufe, L. A., Egeland, B., & Kreutzer, T. (1990). The fate of early experience following developmental change: Longitudinal approaches to individual adaptation in childhood. *Child Development*, 61, 1363-1373.

- Stams, G. J., Juffer, F., & van IJzendoorn, M. H. (2002). Maternal sensitivity, infant attachment, and temperament in early childhood predict adjustment in middle childhood: the case of adopted children and their biologically unrelated parents. *Developmental Psychology*, 38(5), 806-821.
- Stull, D., Bowman, K., & Virginia, S. (1994). Women in the middle: A myth in the making? *Family Relations*, 43 391-324.
- Styron, T., & Janoff-Bulman, R. (1997). Childhood attachment and abuse: Long-term effects on adult attachment, depression, and conflict resolution. *Child Abuse & Neglect*, 21(10), 1015.
- Sumer, N., & Cozzarelli, C. (2004). The impact of adult attachment on partner and self-attributions and relationship quality. *Personal Relationships*, 11(3), 355-371.
- Sund, A. M., & Wichstrom, L. (2002). Insecure attachment as a risk factor for future depressive symptoms in early adolescence. *American Academy of Child and Adolescent Psychiatry*, 41(12), 1478-1485.
- Treboux, D., Crowell, J. A., & Waters, E. (2004). When "new" meets "old": Configurations of adult attachment representations and their implications for marital functioning. . *Developmental Psychology*, 40, 295-314.
- Trepper, T. S., & Barrett, M. J. (1986). Vulnerability to incest: A framework for the assessment of intrafamily sexual abuse. In T. S. Trepper & M. J. Barrett (Eds.), *Treating Incest: A Multiple Systems Perspective* (Vol. 2, pp. 13-26). Binghamton, NY: Haworth Press, Inc.
- Twaite, J. A., & Rodriguez-Srednicki, O. (2004). Childhood sexual and physical abuse and adult vulnerability to PTSD: The mediating effects of attachment and dissociation. *Journal of Child Sexual Abuse*, 13(1), 17-38.
- Volling, B. L., McElwain, N. L., Notaro, P. C., & Herrera, C. (2002). Parents' emotional availability and infant emotional competence: predictors of parent-infant attachment and emerging self-regulation. *Journal of Family Psychology*, 16(4), 447-465.

- Ward, A. R., & Spitze, G. (1998). Sandwiched marriages: The implications of child and parent relations for marital quality in midlife. *Social Forces*, 77(2), 647-666.
- Waters, E., Merrick, S., Treboux, D., Crowell, J., & Albersheim, L. (2000). Attachment security in infancy and early adulthood: A twenty-year longitudinal study. *Child Development*, 71(3), 684-689.
- Weinfield, N. S., Sroufe, L. A., & Egeland, B. (2000). Attachment from infancy to early adulthood in a high-risk sample: Continuity, discontinuity, and their Correlates. *Child Development*, 71(3), 695-702.
- Weinfield, N. S., Whaley, G. J., & Egeland, B. (2004). Continuity, discontinuity, and coherence in attachment from infancy to late adolescence: sequelae of organization and disorganization. *Attachment & Human Development*, 6(1), 73-97.
- Weiss, E. L., Longhurst, J. G., & Mazure, C. M. (1999). Childhood sexual abuse as a risk factor for depression in women: Psychosocial and neurobiological correlates. *American Journal of Psychiatry*, 156(6), 816-828.
- Wertz, F. J. (2005). Phenomenological research methods for counseling psychology. *Journal of Counseling Psychology*, 52(2), 167-177.
- Whiffen, V. E., Judd, M. E., & Aube, J. A. (1999). Intimate relationships moderate the association between childhood sexual abuse and depression. *Journal of Interpersonal Violence*, 14(9), 940-954.
- Whiffen, V. E., & MacIntosh, H. B. (2005). Mediators of the link between childhood sexual abuse and emotional stress. *Trauma, Violence, & Abuse*, 6(1), 24-39.
- Wiersma, N. S. (2003). Partner awareness regarding the adult sequelae of childhood sexual abuse for primary and secondary survivors. *Journal of Marital and Family Therapy*, 29(2), 151-164.
- Wilson, K., & James, A. L. (1992). Child sexual abuse and couple therapy. *Sexual and Marital Therapy*, 7(2), 197-212.

- Zielinski, D. S., & Bradshaw, C. P. (2006). Ecological influences on the sequelae of child maltreatment: A review of the literature. *Child Maltreatment, 11*(1), 49-62.
- Zuravin, S. J., & Fontanella, C. (1999). Parenting behaviors and perceived parenting competence of child sexual abuse survivors. *Child Abuse & Neglect, 23*(7), 623-632.

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