

EXPLORING DISORGANISED ATTACHMENT STYLE IN MALAY MOTHERS: A MIXED METHOD AND QUALITATIVE APPROACH USING CASE STUDIES

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Abstract

Previous studies have shown that insecure attachment style in adults is associated with mental disorder. The category of disorganised insecure style is greatly debated, in terms of its definitions and measurement, but is frequently taken as indicative of most risk for disorder and poor functioning. This study describes the qualitative element of a mixed-methods approach. A large scale survey of self-reported attachment style and depression in Malay women was followed by a subset of 61 depressed women who were interviewed using the Attachment Style Interview. All proved to have insecure attachment style and the 12 described here had a disorganised or mixed style rating. This article provides a qualitative analysis of these cases, examining themes of isolation (lack of close relationships), conflict (partner negative interaction and domestic violence), dependence (both high and low), and angry and fearful attitudes to others. The paper discusses the concept of disorganised attachment style in relation to social exclusion and psychopathology.

Keywords: Disorganised attachment styles; Unresolved loss; Vulnerable mothers; Malays; Depression.

INTRODUCTION

Secure attachment style in adults is now widely recognised as a key aspect of functioning critical for well-being (Kemal Kuscü, Dural, Chen, & Yas, 2009). In contrast insecure attachment styles (typically those anxious-ambivalent or avoidant) relate to different forms of psychopathology (Pielage, Gerlsma, & Schaap, 2000). Relatively few studies have examined in any detail the less common and more poorly defined disorganised adult attachment style in relation to aberrant relationship patterns (Busch, Cowan, & Cowan, 2008) and psychopathology (Nakash-Eisikovits, Dutra, & Westen, 2002). The existing studies do however indicate that disorganized attachment is highly associated with psychopathology in adult life (Liotti, 1999, 1992; Crittenden, 1995; Main & Solomon, 1986, 1990; Green & Goldwyn, 2002; Greenberg, Speltz, DeKlyen, & Endriga, 1999). It is also linked with poor emotional regulation, highly hostile-aggressive behavior in social relationships from childhood onwards (Lyons-Ruth, Alpern, & Repacholi, 1993) and dissociative states with failure to resolve loss and trauma (Main & Solomon, 1990). It is identified across the life span, with disorganized attachment style argued to represent a serious developmental deficit increasing risk of emotional and behaviour disorders in children and adolescence (Nakash-Eisikovits et al., 2002; Agrawal, Gunderson, Holmes, & Lyons-Ruth, 2004). It also is said to relate to severe adult disorders such as borderline personality disorder (Korzekwa, Dell, & Pain, 2009) and psychopathy (Van den Berg & Oei, 2009; van Ijzendoorn, 1995). However, there is relatively little agreement on what constitutes disorganised attachment style in adults and its definition and measurement, with little investigation of this phenomenon in community studies cross-culturally and including narrative accounts. Taking a psychological and social perspective, with a mixed-methods approach, this study aims to offer new insights into disorganised attachment styles through case study of

vulnerable Moslem women in Malaysia. The effects of abusive partner relationships, social stigma and of isolation through being shunned or excluded by the community will be discussed in relation to disorganised attachment styles.

Disorganised attachment style has been identified as unresolved trauma indicated by dissociative experience, which becomes apparent for example while describing childhood experience (Main & Solomon, 1990; Pearson & Mandell, 2000). An alternative view involves the presence of two un-integrated and conflicting attachment styles (Crittenden, 1995; Bifulco & Thomas, 2012). In childhood, such styles are associated with punitive control and uncontrolled aggression (Lyons-Ruth, 1996; van IJzendoorn, Schuengel, & Bakermans-Kranenburg, 1999). This is consistent with adult studies which link it with externalizing disorders, particularly psychopathy, in offender populations (Guttman-Steinmatz & Crowell, 2006; Van den Berg & Oei, 2009; van IJzendoorn et al., 1997). The study reported here will discuss disorganised attachment style in terms of the presentation of those 'mixed' or dual styles involving both anxious and avoidant characteristics, using the Attachment Style Interview (ASI). This measure involves assessing quality of close ties and in the ability to relate to close others and access support, as well as conflict in relationships. Also, complex attitudinal profiles involving features such as fear and anger or approach and avoidance, where no clear single style or strategy can be determined (Bifulco, Moran, Ball, & Bernazzani, 2002).

Disorganized attachment style is rare in the community (Crowell, Trebox, Gao, Pyffe, Pan, & Waters, 2002; Ward, Lee, & Lipper, 2000; van IJzendoorn & Bakermans-Kranenburg, 1996), with prevalence of 6% in adult samples (Bifulco et al., 2002) but as high as 70% among patient samples (Fonagy, Target, & Gergely, 2000; van IJzendoorn, Schuengel, & Bakermans-Kranenburh, 1999). It is identified with early developmental problems (Sroufe, Cofino, &

Carlson, 2010), aberrant parental behavior (Busch et al., 2008), and parental serious mental disorders (Borelli, David, Crowley, & Mayes, 2010; Wan & Green, 2009; Hobson, Patrick, Crandell, García-Pérez, & Lee, 2005) or substance abuse (Howe, Brandon, Hinings, & Schofield, 1999; Lyons-Ruth, Connell, Zoll, & Stahl, 1987; Lyons-Ruth, 1996; Main & Hesse, 1990; Lyons-Ruth, 2003). It is associated with social adversity, but this in itself does not differentiate insecure style from disorganized styles (Cyr, Euser, Bakermans-Kranenburg, & van IJzendoorn, 2010).

‘Unresolved’ loss or trauma in parents is linked to a mental representation in the child of the parent being “frightened” or “frightening”, resulting in a disoriented child response. In this scenario, parents are a simultaneous source of fear and comfort (David & Lyons-Ruth, 2005). As consequences, as measured by the SST the infant utilizes a confused ‘freeze’ or erratic response in adaptation to threat of separation rather than the usual fight or flight coping strategies (Ayoub, Fischer, & O’Connor, 2003). These children can respond to their parents’ chaotic behavior with either appeasement or revenge. For example Ayoub and colleagues described the development of aggressor-tyrant behavior when these children grow up, associated with the etiology of an abuser (op cit).. Such children may seek out those with power and status, while in private remaining timid, quiet and withdrawn. This can reflect as fear in the presence of an abusive parent, and aggression in their absence. A level of dissociation between the modes of mental functioning can develop and the complex disorganized attachment patterns in childhood can then persist into adulthood (Levy, 2005; Weinfield, Sroufe, & Egeland, 2000). This persona established in parent-child relationships (Madigan, Moran, & Pederson, 2006; Madigan, Bakermans-Kranenburg, van IJzendoorn, Moran, Pederson, & Benoit, 2006) persists to influence the quality of close relationships in adulthood, resulting in both abuser and victim characteristics

(Levesque, Lofontaine, Bureau, Cloutier, & Dandurand, 2010; Weston, 2008; Henderson, Bartholomew, Trinkle, & Kwong, 2005; Ayoub et al., 2003; McCarthy & Taylor, 1999). Whilst there is an amount of research on aggressors in forensic settings (van IJzerdoorn, Feldbrugge, Derks, De Ruiter, Verhagen, & Philipse, 1997), there is relatively little on victims. Children with disorganized attachment patterns are often more aggressive towards those they see as powerless (Ayoub et al., 2003). Children looked after by the state, are at particular risk of developing disorganized attachment styles, either in residential care or before placed for adoption (Juffer, Bakermans-Kranenburg, & van IJzerdoorn, 2005; Zeanah, Smyke, Koga, & Carlson, 2005; Rutter et al., 1998; Bifulco et al., 2011).

Many researchers conclude that abusive relationships and maltreatment in childhood is a fundamental of developing disorganized attachment styles (Lyons-Ruth, Dutra, Schnuder, & Bianchi, 2006). However, childhood maltreatment is also a common source of other insecure styles (Bifulco et al., 2002). Furthermore adult trauma, complex mourning responses and PTSD can also contribute to adult disorganized attachment suggesting a possible model combining both child and adult trauma (Stovall-McClough & Cloitre, 2006; Riggs, Paulson, Tunnell, Sahl, Atkinson, & Ross, 2007; Liotti, 2004). This has relevance for partner relationships (Bifulco & Thomas, 2012). Individuals' with Insecure attachment styles report poor marital functioning, communication and problem-solving (Kobak & Hazan, 1991), low flexibility and reciprocity in confiding (Mikulincer & Nachshon, 1991) and low support-seeking in situations where anxiety increases (Simpson, Rholes et al., 1992). There are further links with adult abusive relationships. Dutton and Painter (1981) proposed a theory of traumatic bonding whereby powerful emotional attachments are seen to develop as a specific feature of abusive relationships. These abusive relationships involve power imbalances and intermittent conflict-reconciliation which is said to

strengthen emotional attachment in those vulnerable. Emotional attachment to a person can increase feelings of personal power as well as can create microcosm that leads to feelings of powerless. This can be explained when an unequal power relationship can become increasingly unbalanced over time, and the power dynamic related to psychopathology in women. Thus, women in these relationships may feel more negative about themselves, more helpless in terms of defending themselves and increasingly more dependent on their controlling partners. The cycle of relationship-produced dependency and low self-esteem can create a misplaced strong felt attachment to partners which when violence is present is a difficult pattern to break. A potentially abusive male partner may develop a sense of inflated power which also create a sense of dependency on women to maintain the feelings of being powerful and control in the dyadic relationship. In abusive relationships, physical abuse can serve to maintain a power differential, whereas emotional abuse including threats against the women and her children can serve to maintain the relationship homeostasis.

In abusive partner relationships, intermittency of abuse is characterized by the alternating threatening and caring behaviours of the abusers. The latter is termed the 'contrition' phase of the abuse cycle and can involve promises from the abusive partner to the victim to maintain the relationship and avoid separation. The victim is thus subject to alternating periods of aversive/negative arousal and the relief/release associated with its removal. This intermittent reinforcement/punishment is highly effective in producing persistent patterns of maladaptive attachment behaviour that are difficult to extinguish or terminate. Anxiety is argued to be linked to aggression only if the partner is Avoidant, establishing a pattern of fear of abandonment in one partner and fear of intimacy in the other (Roberts & Noller, 1998). However, it is likely to be more complex patterning with alternating angry-avoidance and anxious-ambivalence in terms of

the intermittent punishment/reward cycle. Anger is clearly key, with Bowlby viewing interpersonal anger as arising from frustrated attachment needs and functioning as a form of protest directed at maintaining or regaining contact with the attachment figure (Bowlby, 1982; Bartholomew, Henderson et al., 2001). Such protest can range from verbal abuse of the attachment figure, to control over their behaviour or to violence. In attachment terms, such abusive behaviour is likely to be precipitated by real or imagined threats of rejection, separation or abandonment by the partner. In individuals with problematic early attachment experience, perception of ambiguous behaviour by the partner as rejecting or unsupportive can make for dangerous partnerships. Thus disorganised attachment involving

Disorganised attachment style may also reflect in part the fragmented social context which often occurs in the lives of those suffering trauma. For example, children in residential care, with their high rates of disorganised attachment style, are subject to lack of planning, continuous uprooting and sometimes being moved from parents into care and then back again. This may perpetuate disorganised attachment patterns due to discontinuity of care. In adulthood, it is possible that social exclusion, stigma and the push-pull involved in domestic violence and psychological abuse all contrive to further compound both fearful and angry responses to the world, where both fearful desire for closeness and mistrustful angry avoidance grows. Thus inner and outer world disharmony and lack of coherence may conspire in failing to identify, resolve or assimilate trauma experience expressed as disorganised attachment style as an extreme example of unsuccessful transactions between the person and his/her social environment across the lifespan (Carlson, Sroufe, & Egeland, 2004). Such factors also need to be seen in relation to culture.

Cultural aspects in attachment and Malay women

Malaysia is highly multicultural where Malay women (rather than Chinese or Indian), most of whom are Moslem, experience cultural and religious restrictions on their social and emotional expression (Abdullah, Noor, & Wok, 2008). Such women are expected to be emotionally strong and are discouraged from expressing or sharing their emotions with others. Malay women hold to their traditional cultural values of fulfilling their motherhood duties and family expectations (op cit). Women have responsibility for all the care in the family and are prohibited or discouraged from voicing their dissatisfaction with any of these roles. Even when the women are employed outside the household their choices are usually controlled by their husbands. They are not allowed to go against their husbands' views or to make decisions for their family. Those women who do assert themselves are characterized as dominant and aggressive and seen pejoratively as "control queens". Additional social restrictions for women in Malaysia come from these cultural assumptions that women need to fulfil their social responsibility as homemakers. Parenthood is tied to the development of kinship ties, both strengthening and extending the family line into the next generation. This means that the wife's primary duty is to look after her home, being responsible for her domestic duties, with her husband taking care of external matters (Abdullah, Noor, & Wok, 2008). There is also evidence that women spend substantially more time on household chores and child-care than their husbands (Abdullah, Noor, & Wok, 2008).

There are few studies on adult attachment styles among the Malaysian population. Ng and colleagues found that women showed significantly higher levels of anxious attachment style than men, and more than Chinese or Indian women (Ng, Trusty, & Crawford, 2003). However, these studies involved modest sample sizes among ethnic groups with little information on sample selection. Rather different findings came from Schmitt and colleagues student sample of

Malaysians in a cross-cultural study of 62 nations (Schmidt et al., 2003; Schmitt & Allik, 2005) where a significantly higher level of dismissive styles was found. None of these studies examined the relationship between adult attachment styles and depression. This is particularly important for insecure attachment style, which has proved the most important risk factor for depression in adult attachment research since 1993 (Pettem, West, Mahoney, & Keller, 1993) where both general populations and psychiatric patients were assessed (Bifulco et al., 2002).

A previous quantitative analysis of the study reported showed a relationship between insecure attachment and depression in Malay women using the self-report Vulnerable Attachment Style Questionnaire (VASQ). The overall insecurity score together with the proximity-seeking dimension and mistrustful avoidance contributed to modelling depression (Abdul Kadir & Bifulco, 2013). The total score contributed to other vulnerability (interpersonal relationship problems and low self-esteem) and life events in modelling depression. In this sample of single (separated, widowed, divorced) mothers, the analysis showed marital status played a vital role in patterning either Anxious or Avoidant types of attachment styles. This report focuses on a subgroup of 61 women who were interviewed about their close relationships and attachment attitudes to identify a proportion using the ASI with disorganised styles, typified as combining both anxious and avoidant elements. These are further analysed here here in relation to key emerging themes of conflict, isolation, dependency and fear and anger.. The analysis also sought to draw links with the social circumstances of these women.

METHOD

Participants

The study was conducted in a community residing in the Johor Bahru, one of the states on the Peninsular Malaysia (Abdul Kadir & Bifulco, 2011). The overall sample comprised 1,002 mothers, half of them were separated or divorced and raising their children alone. The women were aged 24-56, had at least one child at home and were selected from local organisations for single parents and other community groups. Of 1,002 studied, 34.8% of the women had depression as indicated by General Health Questionnaire (GHQ-30). All women were Moslems and most were actively religious. The study was a two-part investigation. The first part involved a questionnaire-based investigation of attachment style, quality of relationships, self-esteem and depression (Abdul Kadir & Bifulco, 2011) and the second part involved interviews of a vulnerable subsample all of whom were depressed (Abdul Kadir & Bifulco, 2010). Whilst the findings of the first part are published elsewhere in relation to attachment insecurity relating to depression over in a model requiring life events and problem relationships (Abdul Kadir & Bifulco, 2013), it is the qualitative aspect reported here.

The second stage of the study was thus an intensive investigation of 61 women selected from the questionnaire sample half of whom were married and half of whom had been separated, divorced or widowed. All had psychosocial vulnerability and all had high depression scores on the GHQ-30. The demographic characteristics of the subsample mirrored the larger sample with the mean age of 39.6 (S.D=7.2), ranging from 24 to 56 years old. Of 61, 34.4% (n=21) of the participants were full time housewives, 19.7% (n=12) were self-employed and 45.9% (n=28) were in work full or part time. The mean income was below the poverty line. In term of education, all participants received some level of formal education in either secondary or higher education (e.g., higher school certificates, diplomas, bachelors). The women were interviewed

using standardised attachment and clinical interviews, with the attachment and related relationship information described here.

The 13 individuals reported on were selected for having a rating of dual/disorganized insecure attachment style. (see Appendix 1 for the distribution of styles and risk characteristics).

Ethical permission

Ethical permission was granted by the Economic Planning Unit of Malaysia and the university ethics committee of Royal Holloway, University of London, participants provided informed consent with confidentiality, anonymity, and secure storage of data guaranteed.

Measures

The Attachment Style Interview (ASI; Bifulco et al., 2002) is a semi-structured interview that first measures the quality of current close adult relationships in terms of confiding and social support. The section on partner conflict was extended to cover details of violence both in present and past relationships. The ASI in the original English was translated into the Malay language, using simple, clear, concise and non-technical language as much as possible. Any expression that might be considered offensive or too intrusive for Malaysian culture was reworded and adapted and the conceptual equivalent of a word or phrase was utilized, rather than word-for-word translation.

The participants were encouraged to talk at length about their experience of partner, family and friends with selected close relationships questioned in detail. First marital history was determined, then the degree of contact with partners, family members (parents, siblings) and friends as potential support figures. Life events in the last year were covered through checklist (Brugha & Cragg, 1990). Further questions on the quality of close relationships with partner/spouse and up to two close confidants were asked. Ratings were made of confiding,

active emotional support by other, negative and positive interaction and felt attachment in each relationship. Additional probes in the marital/partner section on negative interaction ascertained violence as well as verbal conflict. Overall summaries of each relationship were rated on 7-point scales with 1-3 reflecting good enough support and 4-7 poor support. Conflictful relationships were further identified in the index. A rating of 'ability to make and maintain relationships' was based on the number of close supportive figures. Having only one or no close confiding relationship denoted insecurity of style.

The ASI then questioned on seven attitudinal scales include mistrust of others, constraints on closeness, fear of rejection, self-reliance, desire for company, fear of separation and anger in relationships. These contribute to an overall global scale, which determines the type of attachment style. There are five styles of the ASI: Enmeshed, Fearful, Angry-dismissive and Withdrawn as well as Secure. Where the subscale ratings showed more than one profile was fulfilled, then a 'dual' insecure attachment style was rated and this taken to denote Dual/Disorganised attachment styles. Inter-rater reliability of the instrument is good and its predictive validity in relation to depression tested in more than one study (Bifulco et al., 2004; Bifulco et al., 2002).

Analysis

The audio-recorded interviews were transcribed and rated on the ASI schedules with key comments used to justify ratings on each scale. These were then translated back into English for qualitative content analysis related to the different styles. The focus in this analysis is only on the Dual/Disorganised attachment styles and experiences of (i) partner conflict (ii) isolation and (iii) concurrent fear and anger in relating to others.

RESULTS

Rates of insecure attachment style

The quantitative report of the ASI showed that of the 61 women interviewed 23% of women had a 'mild' level of insecurity equated with secure (X mildly anxious and X mildly avoidant style), but none were rated as 'clearly secure,' 66% had anxious (enmeshed or fearful) attachment styles and 17% avoidant (angry-dismissive or withdrawn) and 30% (18) .. Eighteen respondents (29.5%) had a Dual/Disorganised rating combining mainly Anxious style (Enmeshed or Fearful) with Avoidant style (Angry-dismissive or Withdrawn). The most common combinations of style were Fearful and Angry-dismissive (26%; n=16). Only two women (3%) had combined anxious styles of Fearful and Enmeshed. In one instance a participant exhibited three attachment styles but is not included in this analysis (Appendix 1 shows array of data of 61 cases giving attachment styles, partner conflict and lack of support with the 13 cases used in the analysis marked).

Experience of isolation

Forty-one of the women interviewed had poor support, defined in terms of lack of confiding and emotional support in partner or up to three others named as close. Questions were also asked about closeness to family of origin. Those with low support were categorised as 'poor' ability to make and maintain relationships. These comprised women who were isolated and had no one to confide in, together with those who had people they named as close but in whom they could not confide, and with whom some had angry interactions.

The following are examples of poor support involving isolation:

My siblings never support me in times of crisis. My eldest brother does not recognise me as his sister. Nobody in my neighbourhood helps me when I am in difficulties. They avoid me because I'm a single mother. I run a business but a few weeks ago I was forced

to close down the business. I've no close friends. I am close to my mother but I do not confide in her (Respondent 43)

This woman had virtually no contacts and had become isolated because of the stigma of being a lone parent. In the following examples the women described having a close friend but was unable to confide.

Yes, I have a close friend. But I don't confide in her. I feel its hard to get close to anyone especially women. I avoid them. I'm a bit wary. I can't ask for help and advice. I was actually told not to ask for help, because they also have lots of problem. I would never ask for help from my siblings. They are not supportive. They always blame me for what has happened. (Respondent 44)

In the above quote the woman described her psychological barriers to getting close or asking for help. Another woman also exhibited constraints on closeness linked to mistrust:

I don't like to get close to people. I always avoid them. I will not ask for help. Some people are selfish and opportunists. I don't trust them. They will not understand my problem. I don't confide or talk to others. I don't think they will keep my problems confidential. (Respondent 1)

It can be seen that isolation in these women was in part due to the stigma and blame attached to being a lone parent which resulted in being shunned by family and friends. But it was also about having psychological barriers to asking for help or support, based on mistrust.

Experiences of conflict in partner relationship

Of the 30 women interviewed who were married and living with a partner, nearly all (27/30) reported high negative interaction with him, characterised by frequent arguments or rows. In the total interviewed group 47.5% (n=29) described physical abuse attacks and/or threats of violence from their husband during their marriage (currently or in previous relationships). This led on some occasions to reports of being hospitalised when they were severely injured (n=16). The following examples from the interviews are given illustrating verbal conflict whereby partners demoralise and criticise the women. Also psychologically abusive techniques are shown for isolating the women and for undermining with threats for example to take the children. The first illustrates controlling behaviour by her husband:

My husband has always been aggressive, controlling, and feels very entitled. But lately things have got worse as he has intimidated other family members and manipulated others against me. He does not support the children financially. Yet he maintains very strict control of us and is very possessive of the children. It got to the point of him getting violent and trying to take them with him when I tried to force him out. He also threatened that he would take the children. (Respondent 39)

The second example illustrates partner control in enforcing isolation, but which also results in physical abuse:

I was married for 16 years. For 16 years I was not allowed to visit my parents and sisters, not even allowed to make phone calls. My husband disliked socialising and he stopped me from seeing or going out with friends. So therefore I had no friends in this neighbourhood. I stayed at home and had no contact with outsiders. He locked me and my youngest son in the house when he went out for his work. He sent our daughters and

sons to school and picked them up. He did however take care of all household expenses. He became physically abusive. (Respondent 29)

The following examples also show use of psychological abuse with the physical abuse:

He was very verbally abusive and would often throw things at me, hit or punch me if he got angry enough. He has an acid tongue and says mean and very hurtful things. He is crafty and will very cleverly say things during small disagreements that are meant to evoke reactions. Those insults provoke and hurt me deeply which escalates things into big fights. I do not want to fight him, yet I do not want him to be able to get away saying such things that are way over the top. (Respondent 38)

The following examples show actual physical violence as well as verbal conflict:

If I talk to him about our children's problems at school, he seems disinterested. If I ask him for money, he gets mad and starts shouting. He will curse me. He will call me names such as stupid, foolish, rude, son of a bitch, pig, and say I am ugly every time we get into a fight. He walks away and leaves me alone at home after cursing me. He said he hates me so much. He picks on me nearly every day. I don't answer him back. He does not like me to speak or allow me to give any opinion. I don't like to be called names or put down. It is insulting. I row with my husband every day and frequently get hit. One day when we got into a fight, he took a television and threw it at me. There was another time he kicked and punched me. He has pushed me down the stairs and I was severely injured. He has hit me on my face on a number of occasions recently. He says some hurtful things and just keeps on arguing. We argue most days of the week. (Respondent 23)

This description talks about the start of the violence:

Two months after being married to my husband, he started beating, punching, kicking and hitting me. He even physically abused me while I was expecting his child. He battered me almost every day. He is not an alcoholic or drug user. He has had affairs with other women. He beat me when I asked about his affairs. He will start a conversation, and then he will get angry if I don't respond to him. If I keep quiet and listen to him, he will also beat me. (Respondent 28)

Therefore, the range of experience of conflict shown is more complex than violence alone. As documented in the domestic violence literature, the behaviour also involves psychological abuse with enforced entrapment and verbal criticism leading to a diminution of self-esteem as well as enforced helplessness (REF). Typically, women with Dual/Disorganised styles had both isolation and conflict in their lives.

Fear and Anger combined

Fear and anger are key components in the Fearful and Angry-dismissive styles respectively, as rated in the ASI. Usually these form distinct and mutually exclusive styles with fear or anger forming different responses to others. Of these Fearful is the more submissive style, defined by fear of rejection, with sensitivity to criticism, rejection and being let down. It tends involve self-blame. . In contrast Angry-dismissive is a more dominant style with blame of others and high felt anger in relationships.

Examples of comments made by women rated as Fearful illustrate a sense of shame when people know too many personal things about them. This woman described such shame and fear which

also related to stigma about her mother having had AIDS, but then also talked about her anger, which spilled over into her parenting:

I suppose it's better to keep all these difficulties to myself. Not to be shared with others.

It's shaming when people know about your family affairs. People look down on you. You see my mother died because of HIV/AIDS. She was a nice person. She had done nothing wrong. I don't know how she got HIV/AIDS. You know if others find out about this, they would humiliate my mothers' memory.

When my husband beats me up and kicks me as he pleases. I fight back'. About her family she says: 'I don't speak to my father and parents in-law. I hate my father for the way he treated my mother and me. I don't want to hear his voice or to see his face. I refuse to talk to my parents' - in-law because I think they lied to me before I married their son. I do get angry with my daughter sometimes but she is just a small kid, I suppose I have to take a good care not to beat her. I pinch and spank her, sometimes. I can't control my anger. (Respondent 29)

In this example, rumours were spread about the woman from a friend who betrayed her, this she describes as the basis of her current fear of getting close:

, I had a close friend previously. She was my colleague. She did confide lots of things in me. She's married but she had an affair with another man. I kept her secret. But she's accused me of spreading gossip. She didn't know that other people might see her with her boyfriend. Yes, I do feel uncomfortable to be close to people. I would back off to anyone if I feel I'm getting close to her. I'm a bit wary now. I'm very angry with my ex-husband. He does not perform his duty as a father. I feel so bad when thinking about my childhood. It was really awful. (Respondent 35)

Another relates her fear of getting close to other from her husband's abusive behaviour in stopping her socialising:

My late husband locked me up for 16 years. I was prevented from socializing with others. I had no friend and was too scared to have one. I was beaten up if he even saw me talking to even my neighbour. I was scared all the time. Even now, I feel so scared and uncomfortable to be close to people. I'm scared I will be hurt again. I'm afraid people will blame me for what happened in the past. I cannot help myself from thinking of my past marriage. People always blame the wife not the husband when it comes to marital problems. (Respondent 46)

This woman has generalised her experience of being let down by her husband to an expectation of rejection from others:

I easily feel sympathy for anyone. But they always let me down. Like my ex-husband, who hurt and disappointed me. All males are the same, inhuman. I do feel uncomfortable being too close to people. If I feel I'm getting too close to a man, I would back off. They were not honest. I had a female friend and we were planning to run a small restaurant. I spent all my money on it and worked hard to make sure this business is a success. A month later, my friend and business partner accused me of being lazy and not being responsible for the business. I told her I don't have the money to roll out the business but she doesn't believe me. So, I decided to leave her, get out of her life and out of the business. (Respondent 53)

Describing her fear of rejection, this woman said:

I don't trust any man in this world. My daughter was raped when she was 10 years old. Nobody believes her. They said she is lying. Yes, I feel disappointed with my life. My sister does not believe me. I didn't ask for these things to happen to me... my ex-

husband... why he did this to me? I'm nice to him. I've tried to be a good wife to him'.

This respondent also reported anger in her relationship

'I hate my ex-husband. He married another woman. He divorced me. I will never forgive him for what he has done. I raise my children alone. I don't have enough money to support my children. I asked for help but my neighbours are not very helpful either.

(Respondent 38)

Anger with parents from childhood was a common theme and here it is combined with fear of rejection:

I easily feel sympathy to anyone. I was badly let down by my ex-husband, I'm disappointed. All men are the same, inhuman. I feel too uncomfortable to get close to men. They are not honest. I spend all my money in order to run a restaurant. I work hard to make sure this business is OK. A month ago, my business partner accused me of being lazy and not being responsible for the business. I was frustrated. I left her, out from my life and also the business'.

The respondent also reported anger in her relationships, first towards a man she has recently met and then about her childhood experience:

'I've met a man; he is an advisor of an NGO association. I met him to promote my direct selling product. At first, he was OK but few minute later, he changed. He said something unbelievable to me. Although he said he likes me.

I have a lot of resentment. My father wanted a baby boy, not me. I became a victim and my mother followed my father's order to make me look like a boy. I still remember, my hair was short and I wore boy's clothes. When I went to kindergarten and primary school, I still wore the boy's school uniform. I was confused. When I wanted to go to the toilet, I went to

the men's toilet. I played with boys. When I was in secondary school, age 13, my mother sent me to her hometown in East Coast of Malaysia, and from there I learnt to wear women's clothes. But I hated it. I was forced to wear female garments. I tried to make friends with other girls, but I was not used to it. I felt uncomfortable. (Respondent 39)

Here the resentment has been built up over years and is linked to her parents seeming lack of acceptance about her being a girl.

Contradictory Dependency needs

Women with anxious styles, particularly those enmeshed exhibited high dependency, described a need for company and fear of separation. In contrast, for women with avoidant styles, such as Angry-dismissive, the women reported high self-reliance with low need for company. Thus, women with dual/disorganised styles reported ambivalence over self-reliance which when coupled with the domestic violence described earlier may explain in part why some women stay in abusive relationships (Allison & Bartholomew, 2008).

This woman regretted her lack of friends describing herself as reliant on them for company:

I feel lonely and sad when I'm alone. I need a friend to talk to. I need my children around me so that I can forget my sadness. I like to meet new friends and see my friends more often. I think my life is more cheerful when I have them around me.

But she also described herself as self-sufficient and wanting to act alone:

I don't rely on others. I do make my own decision. I feel I'm a bit of a loner. I handle the household alone. But I think to have control over my life is good. (Respondent 28)

This woman had no close friends but would chat with taxi drivers to make her feel less lonely but also describes her independence:

(Q Would you say you were a sociable person?) Yes, I do enjoy meeting new people. Every night I meet taxi drivers, I'm friends with them. We talk a lot. I'm very happy and have fun and enjoy being with them. I waste my time just like that. I'm happy when people are around me. But I also feel alone and lonely sometimes. I would like to have friends to see more often.

I'm independent. I make my own decision. I think to have control of my life is important.

(Q: How do you feel when others are critical of you?) Stressed. (Q: How do you feel when things don't go the way you plan them?) Try it again, don't give up. (Respondent 39)

Other ambivalent descriptions related to fear of being separated from others particularly children, but combined with descriptions of self-reliance:

I am anxious when my children are away. I do not allow my children to stay away overnight. I'm a bit scared in case something bad happens to them. They are my property, they are my life. I don't have anybody except my children. If my children come back late, I call them, I search for them. I don't just sit and wait. I don't rely on others. All decision about households, children and school, I make it. My husband assists me with financial support. The rest I handle. (Respondent 22)

This woman described fear of being separated from her children, high self-reliance and low desire for company:

I'm worried and nervous when my one of my children gets back late. It happened recently with my son and I went out looking for him. He was supposed to be at home after school around 2.00pm but came back about 15-20 minutes late. I was so scared something bad had happened to him. I can't cope with loss anymore. My eldest daughter

is at university. I can't sleep and eat well when I think about her. She is far away from me. I worry so much about her. My children have never been away overnight to other place.

I don't feel having people around me a lot of time is so important. I prefer to be alone at home. I'm not interested in getting involve with others' business. I'm not really happy with my life but life has to go on. (Respondent 46)

Fear of separation shows how insecure attachment style can relate to overprotective or controlling parenting, with the potential for inter-generational transmission of risk. This woman showed such fear of separation together with fear of rejection:

I don't trust anyone. I share my problem with friend but she tells others. Before this, she find herself is easy to trust anyone. My trust is gone. I feel she betrayed me' together with fear of separation 'I feel uncomfortable when the children are away overnight. I feel so anxious if my husband takes the children outdoors without me. (Respondent 30)

I don't rely on my parents or sisters. My father is bed-ridden. My mother has to take care of my father. My sister does have money problems. I think I could manage without them. I like to make my own decision about things. If I have a problem to deal with I would say I do rely on myself more than anyone else. I need help but who will help me? No one, I better cope alone'.

This woman also showed fear of rejection

My marital life makes me avoid people. I feel uncomfortable and uneasy. I'm so scared to be hurt again' together with dependent style shown in Enmeshed 'I never allow my

children being away overnight. I feel lots of worry and nervous when one of my children gets back later than expected. This makes me panic. I feel like my life is gone.

(Respondent 46)

I'm quite self-reliant. I prefer to cope on my own. My husband left me with lots of debt... bank loan, car loan and housing mortgage. In fact, my income does not enough to pay back all the debt. I do odd jobs. I feel sad when people criticize me. Whatever decision I made is for the sake of my children. I like my own space. Privacy is important sometimes. (Respondent 53)

These examples illustrate the ambivalence and contradictory attitudes which are present in Dual/Disorganised attachment styles. These are described in the literature as having dysregulation of the attachment system, thus producing a strong feeling of internal self-conflict. It describes push-pull in terms of being alone and self-sufficient and being needy of company and close people around. A history of abuse or current abusive relationships is often associated with such attachment patterns.

DISCUSSION

The attachment interviews described in this sample of Malay women were selected for those Dual/Disorganised in order to illustrate the mixed, contradictory attitudes and ambivalence reported. They provided accounts of both isolation and conflict, as well as attitudes showing fear and anger and ambivalence over self-reliance. Many of the women reported domestic violence and alluded to childhood adversity. These accounts are consistent with those described elsewhere by UK women (Bifulco & Thomas, 2012) but in the Malaysian context the Moslem women describe a specific subordinate position in society, with those divorced, separated or widowed

experiencing particular disadvantage and social exclusion. Such women are frequently ostracized, leading to isolation and abandonment often as a result of prior domestic violence. It is understandable that this leads to mistrust and fear of getting hurt combined with anger at such circumstances. Blame of them as victims is frequent, with the women frequently seen as responsible for their demise. This level of dissonance between their actual victims status and the perception of being blamed and stigmatised for the break-up of their partner relationships may contribute to the duality of the attachment styles expressed with jumbled feelings of fear of rejection, angry mistrust and fear of separation. Women feared for their safety, and were traumatised by their earlier experience, but many equally felt angry with others for their maltreatment. Mistrust was a prevailing feature.

Nearly 30% of the women interviewed described marital violence when asked about negative interaction in the marriage. The Dual/Disorganised attachment styles seem understandable in terms of the women's experience, as strategies for dealing with their experience of hardship and their very difficult, sometimes violent marriages and often difficult current relationships with family of origin. It is not known when such styles were activated. These could have arisen in response to childhood adversity, or the experience of violence with the mixed expectation of obedience versus self-protection may have resulted in many staying years in such relationships with subsequent damage to their attachment styles.

In attachment theory, early childhood adversity leads to insecure attachment styles, but may be further compounded by adult trauma, leading to further distortion of the 'internal working model' and ever higher mistrust, with expectations of rejection and harm by others. The cases also show the lack of protective factors in terms of social exclusion with difficulties in getting help from outside due to social isolation, lack of support or help from family of origin. It

was notable that these women were mostly open about the abuse at interview, but none had ever reported it to the police or any authorities. Such action would be extremely difficult for Malay women living in Malaysia. However government reports show an increasing number of domestic violence reports (<http://www.wao.org.my/statistics.htm>) with an increase in reported cases.

It is argued that the social risk factors which play a vital role in developing attachment styles and activating adult attachment behavioural systems are life long. Early experience alone does not contribute to later adult attachment styles, the individual is a product of all his/her experiences (Sroufe, Carlson, Levy, & Egeland, 1999). Psychopathology is a joint product of early experiences, ongoing difficulties, and unsupportive partner relationships that accumulate (Bifulco et al., 2000). Explanations of disorganised attachment style frequently invoke trauma, and the lack of resolution of loss. These unresolved traumatic memories in these women describing domestic violence perhaps activate attachment behavioural systems deeply ambivalent in terms of seeking and shunning support, fearing and angry about close contact and having conflicting needs for self-reliance. In terms of internal working models, childhood experiences of neglect and abuse may provoke a disorganization of these women's confidence of others and impair their sense of self and trust of others (Pierrehumberta et al., 2009) and this may further affect the construction in close relationships.

Inability to manage negative emotion can be a central feature of disorganised attachment (Lyons-Ruth & Jacobvitz, 2008; Schore, 2000). The women in this study showed mixed feelings of anger and fear and seemed unable to resolve these. The implication is that there ongoing ability to regulate emotion when stressed would be compromised (Mikulincer & Shaver, 2009). Having both anxious and avoidant attachment would be described in terms of utilising both hyperactivating *and* deactivating strategies under stress with the impossibility of co-regulation

due to the absence of close support (Shaver & Mikulincer, 2007). In line with other attachment researchers, it is argued that dual/disorganised attachment styles are associated with lack of integration at behavioural, cognitive, affective, and motivational levels and these are likely to form lapses in working memory that interfere with optimal social functioning (Cassidy & Mohr, 2001).

Implications of the study

Findings reported in this study illustrate expressions of disorganised attachment styles among Malay Moslem women, the first such study in this group. This also adds to the growing body of knowledge on Disorganised attachment styles in general, supporting dual or mixed attachment style as a key construct. In this sample it is shown in the context of aberrant partner relationship patterns and isolation. Attachment researchers should further investigate the effects of adult adversity on the development of disorganised attachment styles as well as in relation to emotion-regulation under stress. Findings of this study further highlight the important roles of mental health counsellors to assist women with disorganised attachment styles by increasing their self-esteem and trust in others as well as helping them to improve the quality of close relationships to increase support.

Limitations

This study has several limitations. First, the study was cross-sectional and the women interviewed had depression as well as insecure attachment style, and the impact of symptoms on style needs to be considered as an alternative explanation of disorganised presentation. Second, the study did not include questions on childhood to examine the roots of disorganised attachment style in childhood trauma. Third, the subsample described is not representative of Malay women in general, although the first phase of study indicated the prevalence of insecure attachment style

as determined by self-report. Fourth, whilst the analysis was qualitative it was guided by an assessment of attachment style which had a quantitative and categorical structure. The themes described were those frequent in disorganised styles, but these were not determined by grounded theory or NVIVO methods of analysis, but by illustrating the comments made by the women in response to the more semi-structured questions asked.

More research is needed to explore disorganised attachment styles in adult and in those suffering deprivation to identify its link with domestic violence and other forms of adult abuse in addition to childhood adversity. This will help in terms of developing a more sophisticated mode of clinical intervention programmes in improving women's ability to improve their social and coping skills, as well as to increase their rates of response to psychological treatment.

CONCLUSION

This study is the first investigation into disorganised attachment styles among Malay Moslem women living in Malaysia. Findings of the study highlight the existence of disorganised attachment style among the Malay women who also had clinical depression many of whom experiences abusive relationship and/or isolation. Findings indicate that abusive partner relationships and isolation linked to social stigma and exclusion need to be taken into account when studying adult attachment styles and associated clinical disorder. Further research is needed on such styles cross-culturally in relation to social adversity.

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Appendix 1 – Summary of women included

Married women (n=5)

Id	Partner conflict	Lack of support	Attachment style
22	No	Yes	Fearful/ Angry-dismissive
23	Yes	Yes	Fearful/ Angry-dismissive
28	Yes	Yes	Enmeshed/Angry-dismissive
29	Yes	Yes	Enmeshed/Angry-dismissive
30	No	Yes	Enmeshed/Fearful

Single women (separated/divorced/widowed) (n=8)

Id	Prior partner conflict	Lack of support	Attachment style
1	No	Yes	Fearful/ Angry-dismissive
35	Yes	Yes	Fearful/ Angry-dismissive
38	Yes	Yes	Fearful/ Angry-dismissive
39	Yes	Yes	Fearful/ Angry-dismissive
43	No	Yes	Fearful/ Angry-dismissive
44	Yes	Yes	Fearful/ Angry-dismissive
46	Yes	Yes	Fearful/Enmeshed
53	Yes	Yes	Fearful/ Angry-dismissive