# ATTACHMENT STYLE AND EMOTIONAL INTELLIGENCE IN INDIVIDUALS WITH ADVERSE CHILDHOOD EXPERIENCES

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#### **Abstract**

This study specifically aims to see the profile of attachment style and emotional intelligence (EI) as part of personality and the correlation between them, specifically in individuals who have Adverse Childhood Experiences (ACE). By applying quantitative methods and purposive sampling techniques, this study implemented the ACE questionnaire to select participants who had ACE scores in the range 1-10 as the main characteristics of the sample from the men and women adult population. By using the Attachment Style Questionnaire (ASQ) and BarOn EQ-i, this study assessed the five domains of attachment style and the total, 5 composite scales, and 15 subscales of EI from 230 men and 250 women with an age range of 19-45 years. The Pearson correlational analysis results show that the Five Domains of Attachment scales are associated with the level of Total EI (r = -.121 - .576) and Composite EI scales in individuals who have ACE (r = -.17 - .74), except Confidence with Interpersonal and Stress Management, and Discomfort with Intrapersonal and Adaptability. These results are in line with the previous findings regarding the impact of childhood trauma on the personality of individuals in adulthood. Further research on physical and mental disorders related to childhood trauma, attachment style, and EI can be recommended to complement the results.

Keywords: adverse childhood experience; age; attachment style; emotional intelligence; gender

## INTRODUCTION

Individuals have various life experiences throughout their life span, each of which has a specific meaning, bot positive and negative. Adverse Childhood Experience (ACE) is one of the negative experiences stored in the brain's memory function and will continue into adulthood (Waite & Ryan, 2020). ACE can simply be understood as a painful experience that occurred in the first 18 years of the individual's life. More specifically, ACE can be viewed through four main categories: (1) emotional, physical, and sexual abuse; (2) neglect; (3) household dysfunction, consists of parents with mental disorders, parents involved in addiction, death of parents, and separation/divorce of parents; and (4) domestic violence and a history of imprisoned parents. The extent to which individuals experience ACE can be measured using the ACE questionnaire, which consists of 10 items on the scale of 0-10, to assess each of these categories, where the higher the score will represent a stronger ACE experience (Hart, 2014; Waite & Ryan, 2020).

In line with the ACE category above, we think that the ACE phenomenon in adult individuals in Indonesia is an interesting topic for further research. Data on violence against children and adolescents in Indonesia showed a high incidence rate. According to SIMFONI PPA data for January-June 2020, there were 3,087 cases of violence against children, consisting of 852 physical violence, 768 psychological violence, and 1,848 cases of sexual violence during the Covid-19 pandemic in Indonesia (the Ministry of Women's Empowerment and Child Protection [Kementerian Pemberdayaan Perempuan dan Perlindungan Anak-Kemen PPPA], 2020). This data was also supported by the results of a survey by the Witness and Protection Agency (Lembaga Perlindungan Saksi dan Korban [LPSK]) which found 206 cases in 2018. In 2019, this number increased to 350 cases of sexual abuse against children, or at least four cases of sexual abuse were handled in a week (LPSK, 2020). More than that, the Indonesian Child Protection Commission (Komisi Perlindungan Anak Indonesia [KPAI]) also

found a similar phenomenon in the period of January-October 2019, where cases of sexual violence against children in educational settings tended to increase, where there were 17 cases of sexual violence with 89 children, consisting of 55 girls and 34 boys (Pinandhita, 2020). Not only violence but divorce and separation of parents also became a source of stress and trauma in children. The data showed that divorce cases in Indonesia continue to increase from year to year. According to data from the Supreme Court Judicial Authority (Badan Peradilan Mahkamah Agung), there has been an increase in divorces since 2015, from 394,246 to 444,358 cases in 2018. Meanwhile, in mid-2020, the divorce rate has reached 306,688 cases (Prihatin, 2020).

Based on the data above, we found that experience Indonesian children traumatic events due to violence and parental divorce. This study aimed to conduct research that considers the psychological impact of ACE on the development of individual personality in adulthood, particularly in terms of how individuals perceive themselves and others. This research is inspired by many findings from previous studies related to ACE. Some of the research results found that individuals with ACE experiences have the potential to become victims or become perpetrators of violence in the future (Muniz et al., 2019; Waite & Ryan, 2020). More specifically, other studies have found that individuals with an ACE experience with an ACE score of 4 or more are at greater risk for maladaptive behaviors as adults, such as drug and alcohol addiction, smoking, and very passive behavior (Bryant et al., 2020; Giordano et al., 2014; Merrick et al., 2017; Rudenstine et al., 2018).

In the health context, Burke et al. (2011) found that individuals with ACE scores of four or more had a greater risk of having physical or psychological problems as adults. Several studies that look specifically at the impact of ACE on physical disorders found that individuals with ACE are at risk of

developing several physical diseases, such as liver, obesity, cancer, heart disease, diabetes, and other chronic disorders (Dube et al., 2006; Hughes et al., 2017; Monnat & Chandler, 2015). Moreover, studies in individuals with ACE have also found mental health problems in them as adults, such as excessive stress, sleep disturbances, depression, and suicide attempts (Chapman, 2011; Cheong et al., 2017; Merrick et al., 2017; Larkin et al., 2012). More specifically regarding stress and trauma conditions, previous studies also found that stress hormone in individuals with ACE is often excessive due to the difficulty in managing negative emotions that arise intensely and continuously in response to stressful and threatening situations. Conditions trigger that these hormones—such as rejection from parentscan ultimately make it more difficult for individuals to find adequate solutions, leading to symptoms of depression and anxiety (Iob et al., 2021; Paramita & Faradiba, 2020; Waite & Ryan, 2020).

By seeing that ACE has an impact on physical and mental health, this study intended to further explore more about ACE by looking at the aspects of personality that are considered associated with ACE, as a childhood experience that impact adulthood. This study specifically aimed to explore adult attachment concerning the ACE category previously described. In addition, concerning consequences of stress and trauma situations, this study focused on aspects of personality, particularly emotional intelligence (EI). In individuals with ACE, we think that the development of EI competence in individuals can be related to how the attachment style is formed since childhood. In individuals with ACE, we think that the insecure attachment style will be more developed due to the experience of painful and frightening social relationships in childhood.

According to Mikulincer & Shaver (2007), attachments are formed during childhood and will permanently settle in the individual until adulthood. Privizzini (2017) stated that when

an individual has a negative relationship with a caregiver or significant others (insecure attachment), this situation will impact poor development in building relationships with other people when individuals become adolescents and adults. Conversely, during infancy, an individual who has a secure attachment relationship with a caregiver will positively impact in building relationships with other people when the individual becomes an adult. Several factors can support this. such as social competence communication between individuals. In line with this, in adult attachment theory, Mikulincer and Shaver (2007) suggested that attachment style is one aspect of personality that will develop throughout the life span of an individual, from childhood to adulthood. attachments in early life attachments attachments). in adulthood consist of secure and the insecure attachment style. Individuals need a secure attachment style to improve mental health, well-being, and individual life satisfaction. Meanwhile, the insecure attachment style is a situation where individuals are hesitant and anxious when dealing closely with other people (Mikulincer & Shaver, 2007). Insecure attachment style will tend to create relationships that can have the effect of depression and stress (Mikulincer & Shaver, 2007).

Attachment, both secure and insecure, plays an important role in developing a sense of self and others in individuals and how the brain functions to the schema regarding the sense of self and others. In general, it can be predicted that secure attachment will strengthen the development of individual personalities and the ability of individuals to build relationships with other individuals (Mikulincer & Shaver, 2007). Meanwhile, experiencing potentially forms an attachment disorder which is predicted to damage the child's personality development until they grow into adult individuals (Waite & Ryan, 2020). Thomson and Jaque (2017) found that individuals with ACE 4 or more had difficulty coping with trauma due to loss events in

adulthood and expressing past painful events. Individuals with ACE 4 and above may into insecure attachments adulthood, more related to resilience abilities, educational levels, and involvement in meaningful activities. In addition, Smith et al. (2016) and Dagan et al. (2018) found that the increasing experience of ACE will further inhibit the development of secure attachments during childhood. These children tended to have insecure attachments and experience more problems in their lives, especially those related to health issues. This pattern of behavior can continue into adulthood. The difference regarding how strong ACE formed a secure vs insecure attachment above attracted this study's attention to see the description of attachment in Indonesian individuals with ACE.

By applying the adult attachment theory framework, Dewi et al. (2016) specifically adapted the original ASQ (Attachment Style Ouestionnaire) into Bahasa Indonesia version to describe the attachment profile of adult individuals. In this measurement, each individual will have a profile that describes the level of each of the five attachment scales, namely Confidence (in self and others), Discomfort with Closeness. Need Approval, and Confirmation by Others, Preoccupation with Relationships, Viewing Relationships as Secondary. In line with the basic attachment theory, Confidence is a secure attachment, while the other four scales are insecure attachment. This study will use this ASO to create attachment profiles for individuals with ACE. As noted above, we considered that adverse experiences in childhood represented in the ACE category can hinder the development of secure attachment and, conversely, open up increased opportunities for insecure attachment to individuals.

This study considered that the importance of understanding self and others in the concept of attachment above can also be explained through the concept of EI as a theoretical concept that describes an individual's

emotional and social competence. More specifically, in the mixed-model theory of EI, EI can be seen in the concept of Emotional-Social Intelligence (ESI) which describes an individual's ability to determine effectively individuals understand themselves, understand others and their relationships, and can solve everyday problems Through the Emotional Quotient Inventory (EQ-i), this emotional and social ability or competence can be measured through five main competencies (scales), each of which consists of several more specific competencies (subscales): (1) Intrapersonal: Emotional Self- Awareness, Assertiveness, Self-Regard, Self Actualization, Independent; (2) Interpersonal: Empathy, Social Responsibility, Interpersonal Relationships; (3) Adaptability: Problem Solving, Real Testing, Flexibility; (4) Stress Management: Stress Tolerance and Impulse Control; and (5) General Mood: Happiness and Optimism (O'Connor et al., 2019).

O'Connor et al. (2019) stated that EI—the ability to manage emotions and social relationships—can have a positive impact on physical and mental health. More than that, EI also impacts individual personality development, such as social skills, stress levels, depression, and anxiety. About attachments, Zysberg et al. (2019) found that the level of EI in individuals is related to their attachment style. When individuals have a secure attachment style, individuals will easily recognize facial expressions from others as a signal to respond appropriately. This study was supported by Bonab and Koohsar (2011) who found that individuals with insecure attachments tend to find it is challenging to recognize the meaning of other people's facial expressions and then respond appropriately. Therefore, more specifically, individuals with a secure attachment style were predicted to have adequate EI in attention and mood repair dimensions. Conversely, individuals with an insecure attachment style were predicted to have a low EI for attention and mood repair. Several studies have found relatively consistent results that the secure-insecure attachment style can predict the level of EI (Abbasi et al., 2016; Bonab & Koohsar, 2011).

We find that the results of the above studies have not considered the impact of traumatic experiences on attachment development that can predict EI and this will be the aim and novelty of this study. We hypothesize that an individual's traumatic experience (ACE) will form an insecure attachment style, which will then impact the development of EI as an individual's personality competency. We were inspired by several previous studies that considered ACE as an important factor for the development of EI in individuals. For example, Swopes et al. (2013), found that individuals who experience ACE and develop Post Traumatic Stress Disorder (PTSD) have difficulty managing emotions. In addition, Cloitre et al. (2019) found that EI is a factor that mediates the relationship between ACE experiences with PTSD, depression, and physical health. In the theoretical framework of EI traits, Espinosa and Rudenstine (2018) found that EI traits will significantly predict personality traits in individuals who have experienced trauma, both in childhood and adulthood, while Cloitre et al. (2019) found emotion regulation mediates relationship between ACES and physical and mental health.

By looking at the relationship between the experience of ACE, attachment style, and EI both conceptually and empirically, this study aimed to examine the relationship between attachment style and EI in individuals who had an adverse childhood experience (ACE). using the adult attachment theory framework (Dewi et al., 2016) and the BarOn EI theory, this study looked at the relationship of each scale of the Five Attachment Style and the Total EI, 5 EI composite-scales (domains), and 15 EI subscales that have been described above, in individuals with an ACE score between 1-10. In line with the research objectives, the main hypothesis in this study is that there is a relationship between the Five Attachment Styles and the Total EI. To be

more specific, this study makes several minor hypotheses: There is a relationship between the Five Attachment Styles and the Five EI domains (Intrapersonal, Interpersonal, Adaptability, Stress management, and General Mood).

## **METHOD**

## Research design

This study applied a quantitative method as it was conducted to test and analyze the statistical data set. More specifically, this study aimed to see the relationship between the two variables, namely attachment style and EI in individuals with ACE.

# **Participants**

The population of this study was adult Indonesians. To be more specific, the characteristics of the participants were the early and middle adults, both men and women, and had an ACE score of 1-10. By using a non-probability sampling method and purposive sampling (Taherdoost, 2016), data collection in this study consisted of two stages: (1) of the 507 potential participants who filled in the Gform link, we chose participants who had an ACE score of 1-10 and (2) we got 480 participants with an ACE score of 1-10 as research participants. The ACE score describes the types of ACE experiences in which each type of ACE has the same potential to affect the individual's life. In the context of trauma, a single experience or one type of ACE that is perceived as traumatic can affect individual's life (Waite & Ryan, 2020).

## Measurements

In order to investigate attachment style and EI in adult individuals who have experience of ACE, this study used three questionnaires:

1. Indonesian version of Adverse Childhood Experiences (ACE) Questionnaire (Felitti et al., 1998) with a reliability coefficient of .6 (Paramita & Faradiba, 2020), which contains 10 items to measure 10 categories of ACE,

which are more specifically describes family dysfunction, violence. and abandonment through a score of 1 (Yes) or 0 (No). The higher the ACE score, the stronger the ACE experience. Sample item: "Do your parents or other adults in the house often... curse, insult, humiliate, or embarrass you? or Act in a way that makes you afraid of being physically hurt?"

- 2. Indonesian version of the Attachment Style Questionnaire (ASQ) by Dewi et al. (2016), consisting of 40 items on a scale of 1 (strongly disagree) 6 (strongly agree), which will produce a profile of five scale scores (domain) of attachment style with varying reliability coefficients (Dewi et al., 2016), namely Confidence in self and others (.64), Discomfort with Closeness (.63), Need for Approval and Confirmation by Others (.51), Preoccupation with Relationships (.71), and Viewing Relationships as Secondary (.59). Sample item: "I feel confident that people will be there for me when I need them".
- 3. BarOn Emotional Quotient Inventory (EQi) Indonesian version (Dewi et al., 2015). EQi consisting of 133 items on a scale of 1 (very rarely or incorrectly for me) to 5 (very often true or correct for me) measures the Total EI, five EI composite scales, and 15 EI subscales (O'Connor et al., 2019). Sample item: "It's hard for me to enjoy life." The reliability coefficient for the Indonesian version of EQ-i is .94 with varying reliability coefficients in each domains and subscales (Dewi et al., 2015), namely (1) Intrapersonal (.87): Self Emotional Awareness (.57),Assertiveness (.40), Self-Regard (.65), Self Actualization (.59), and Independent (.77), (2) Interpersonal (.77): Empathy (.57), Social Responsibility (.55), Interpersonal Relations (.67), (3) Adaptability (.79): Problem Solving (.57), Real Testing (.64), Flexibility (.65), (4) Stress Management (.77): Stress Tolerance (.60) and Control Impulse (.78), and (5) General Mood (.74): Happiness (.69) and Optimism (.62).

In complying with policies related to the Covid-19 Pandemic, this study implemented

online data collection using the google forms (Gform) format. This form contains an introductory section, informed consent, demographic data, and the three questionnaires mentioned above. The Gform link was spread through the WhatsApp, Line, and Telegram applications.

# Data analysis

Pearson Product Moment Correlation statistical analysis technique was used to analyze the data of this study.

## RESULT AND DISCUSSION

Based on the results of a descriptive analysis of 480 participants (230 male and 250 female), aged 19-45 years (M = 23.33; SD = 5.03), with an ACE score of 1-10 (M = 5.19; SD = 2.90), it was found that Confidence (M = 20.57; SD = 4.00) is the attachment style domain that has the lowest score compared to the other four domains. These results can be seen from the attachment style profile in Table 1.

**Table 1.** Descriptive Statistic of Attachment Style

Descriptive Statistic of Attachment Style							
Attachment	M	SD					
Style							
Confidence	20.57	4.01					
Discomfort	36.23	5.10					
N for A	32.68	3.67					
Preoccupation	41.96	4.26					
R as S	37.01	3.54					

Note. Confidence = Confidence to Self and Other; Discomfort = Discomfort with Closeness; N for A = Need for Approval and Confirmation by Other; Preoccupation = Preoccupation with Relationship; R as S = Relationship as Secondary (ASQ; Dewi et al., 2016).

Meanwhile, the EI measurement result produced a profile of 5 composite scales as shown in Table 2. Based on the EI profile, we found that, overall, participants with ACE have relatively the same level of EI competence for the five scales. However, participants had Adaptability competence (M = 88.36; SD = 14.92) and Stress Management

competence (M = 88.87; SD = 14.92) which tended to be lower than the other three EI scales.

**Table 2.**Descriptive Statistic of Emotional Intelligence

Emotional Intelligence	M	SD
(EI)		
Total EI	89.77	14.38
EI Scales (Domains)	91.89	12.89
1. Intrapersonal	95.52	14.74
2. Interpersonal	88.36	14.92
3. Adaptability	88.87	14.92
4. Stress Management	97.74	13.65
5. General Mood	99.90	13.04

Based on the profiles above, we then carried out further analysis to see the relationship between variables in this study, following the main hypothesis that there is a relationship between the Five Attachment Styles and the Total EI. The result showed that each of the Attachment Styles are statistically significant in the association with Total EI, r range of .021-.576. This means that H0 is rejected. According to the hypothesis described above, we also see associations between each of the five attachment styles and five EI domains as shown in Table 3.

Concerning the relationship between attachment style and EI, we found similar results that are consistent with previous theories and findings where attachment style can influence an individual's emotional and social abilities (Abbasi et al., 2016; Bonab & Koohsar, 2011; O'Connor et al., 2019). In individuals with ACE, the relationship between attachment style and EI can be said to be consistent with the results of previous studies.

The results showed that there is no association between Confidence with Interpersonal (r = .078, p = .087), Discomfort with Intrapersonal (r = -.059, p = .199), and Discomfort with Adaptability (r = -.086, p = .059). The results seemed to support the theory and findings about the connection between age and attachment style wherein the older people

potentially have more secure rather than insecure style (Mikulincer & Shaver, 2007) as well as between age and EI development wherein the older people potentially have a more adequate EI competence (O'Connor et al., 2019). We found that maturity possibily plays as another important role in the relationship between Attachment Style and EI Indonesians with ACE experience. Moreover, with ACE  $\geq$  4 (M = 5.19: SD =2.90), we consider that ACE has a direct impact on participant's EI and comes up with the idea to look about it further later. Hughes et al. (2017) explained that individuals with ACE experiences are more vulnerable to physical and mental illness due

physiological developmental and adaptation abnormalities. They also have problems related to persistent health-risk behaviors. Walsh et al. (2019) found that ACE causes academic problems, poverty, unemployment. Additionally, ACE affects individual's medical condition, drug use and drinking, suicide attempts, depressed mood, risky sexual behavior, poor diet, violence victim. hallucinations. anxiety. and psychological distress (Metzler et al., 2017; Petruccelli et al., 2019). In the EI concept, these previous studies can be explained that ACE itself potentially has a direct impact on emotional and social intelligence individuals.

**Table 3.**Correlation Result of Five Attachment Styles and Total EI (Total and Five Domains)

		Total EI	Intra	Inter	Adapt	SM	GM
Confidence	r	.155**	.204**	.078	.120**	.072	.092*
	p	.001	.000	.087	.009	.116	.045
Discomfort	r	121**	059	146**	086	170**	093*
	p	.008	.199	.001	.059	.000	.043
N for A	r	.359**	.327**	.271**	.307**	.208**	.397**
	p	.000	.000	.000	.000	.000	.000
Preoccupation	r	.576**	.491**	.740**	.399**	$.229^{**}$	.525**
	p	.000	.000	.000	.000	.000	.000
R as S	r	.508**	.373**	.729**	.385**	.216**	.377**
	p	.000	.000	.000	.000	.000	.000

*Note*. Intra = Intrapersonal; Inter = Interpersonal; Adapt = Adaptability; SM = Stress Management; GM = General Mood; Confidence = Confidence to Self and Other; Discomfort = Discomfort with Closeness; N for A = Need for Approval and Confirmation by Other; Preoccupation = Preoccupation with Relationship; R as S = Relationship as Secondary (ASQ; Dewi et al., 2016).

Besides, with regard to possible cultural effects on Attachment Styles and EI competence, we think that Interpersonal, Intrapersonal, and Adaptability competence of Indonesian people possibly is more formed and influenced by Indonesian culture rather than individual characteristic—in this case is Attachment Style. In the cultural context, Indonesian people grow and develop in the Eastern cultural heritage that, for generations, has tended to be collectivistic and put the family as the foremost external environment to gain a sense of security as a member of a

group. Strong bonds of affection among family members seem to lay a critical basis for the development of emotional expression and social ability of Indonesians such forgiveness and harmony. Thus, a strong interrelationship, interdependent an orientation, a mutual dependency, social tolerance. harmony, a more balanced exchange of support, and filial obligation are the general characteristics of the Indonesians (Haliim, 2018; Kurniati et al., 2020). considering Indonesia is a multi-ethnic country, some ethnic values in Indonesia could represent more an individualistic tendency that mostly can be found in Western society.

The result also shows that Confidence Style is not associated with Stress Management (r = .072, p = .116). According to Hazan and as Shaver's as well Bartholomew's conceptualization of adult attachment style, Confidence can be categorized as secure attachment style (Dewi et al. (2016). According to the theory of attachment, internal working model of attachment —consist of many factors such as individual's frame of thinking, past experience, maturity, emotion regulation skill, beliefs—influences individual in responding stress in life along lifespan. To be more specific, insecure attachment adults view stressful situation and negative emotions with suppressing, seeking for more attention and protection from others. or sustaining and intensifying stress and with fear. worries about emotions abandonment, and doubts about their self-& Shaver, 2007). In efficacy (Mikulincer view of that, the result of this study showed that there is many other factors that potentially contribute to stress management skill of individual. Further study that focuses more on the internal working model of attachment rather than Attachment Style may have an additional explanation about the relation between attachment and EI.

We also consider this finding interesting to be investigated further in Indonesian culture, which tends to be collectivistic and consists of various ethnic groups who have different social patterns. If it is related to the results of this study which show that ACE is related to EI. further research that includes a crosscultural approach in Indonesia is still relevant and interesting. This can be related to how people Indonesia voung in develop independence and the ability to act according to reality, influenced by traditional and modern cultural values that currently exist simultaneously in Indonesia. Of course, adverse experiences can also be influenced by cultural values in the family and society.

## CONCLUSION

As previously stated, it can be concluded that ACE is an actual phenomenon in Indonesian society, especially in the younger generation. With existing ACE experiences, individuals can develop attachment styles that tend to be insecure and this will be related to the development of individual emotional and social competence (EI). Therefore, apart from further research, developing an intervention program for preventive and curative purposes is also required.

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