# ATTACHMENT TO DYSFUNCTIONAL FAMILY SITUATIONS: A PSYCHOLOGICAL AND SOCIOLOGICAL ANALYSIS

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### **ABSTRACT**

This article explores the complex phenomenon of attachment [1] to dysfunctional family situations, a phenomenon that cannot be fully understood without considering the intricate interplay between individual psychological factors and socio-cultural dynamics. Beginning with an analysis of the impact of early caregiving experiences on the formation of internal working models (IWMs) [2] and on psychological well-being [3] in adulthood, the article delves into the roles of familiarity, homesickness (Heimweh) [4], and fear of the unknown in perpetuating maladaptive dynamics, even when individuals are aware of their detrimental effects. Particular attention is given to the defense mechanism of splitting, often employed to cope with painful and contradictory family realities, but which can hinder the crucial process of individuation-separation [5]. The influence of intergenerational trauma [6] and projective identification [7] processes in the construction of pathogenic family ties is examined through a broad sociological lens. Specifically, it analyzes how socioeconomic factors, cultural norms, social support networks, and access to resources contribute to shaping family dynamics, either promoting or hindering the breaking of dysfunctional patterns and the pursuit of healthier relationships. This article aims to provide a holistic understanding of this phenomenon by integrating psychological insights with empirical evidence from sociological research. Finally, intervention strategies are proposed to foster autonomy and personal growth, enabling individuals to free themselves from the "family nest trap" [8] through both individual psychological work and a commitment to social empowerment and greater social equity. The article emphasizes the importance of narrative reconstruction [9] (Ricoeur, 1990) as a means of re-elaborating one's family history and constructing new, more adaptive meanings, and the ethics of care [10] (Gilligan, 1982) as a guiding principle for building healthy interpersonal relationships and a more supportive and inclusive society.

**Keywords:** Attachment, Intergenerational Trauma, Dysfunction

#### 1. INTRODUCTION

From birth, the family unit [11] plays a crucial role in developing Internal Working Models (IWMs) [12] — cognitive and affective schemas that shape social interactions [13] and psychological well-being throughout life (Ainsworth et al. (1978); Bowlby, J. (1969/1982)/, Main et al. (2005)). Early caregiving experiences characterized by responsiveness and affective attunement [14] from parental figures foster secure attachment [2], promoting healthy autonomy and the ability to form fulfilling interpersonal relationships. Conversely, insecure attachment [3], stemming from inconsistent, traumatic, or invalidating caregiving experiences, can compromise emotional regulation, stress resilience, and the capacity to form

meaningful bonds in adulthood (Mikulincer & Shaver (2007)). This article focuses on a specific manifestation of insecure attachment: attachment to pathogenic family situations marked by dysfunctional dynamics, conflict, abuse, or emotional neglect (Cassidy & Shaver (2016)). In such contexts, homesickness (Heimweh)[4], understood as an idealized longing for a familial past, can exert a powerful influence, anchoring individuals to negative relational patterns and dysfunctional self-representations, thereby impeding the individuation-separation process.

### 1) The Power of Familiarity, the Illusion of Control, and the Sociological Context

The human brain is intrinsically predisposed to seek familiarity and predictability as survival mechanisms (Wilson (2012)). This innate tendency, linked to the need to reduce uncertainty and maximize the feeling of safety, can explain why even in dysfunctional family environments, individuals may experience an illusory sense of security and control associated with the repetition of known problematic dynamics. This mechanism can be further reinforced by nostalgia, leading to an idealization of the past and a minimization or even denial of the negative aspects of family experiences (Hofer, 2004). Familiarity, therefore, can act as a sort of "emotional anesthetic", preventing individuals from confronting pain and suffering, thus hindering the process of change.

However, the psychological pull of familiarity is significantly amplified by sociological factors. From a sociological perspective, the family is the primary agent of socialization (Parsons & Bales (1955)), responsible for transmitting norms, values, and behavioral models to new generations. Dysfunctional family dynamics can be interpreted as the result of dysfunctional socialization processes, wherein maladaptive relational models are learned and internalized by children, influencing their IWMs and perpetuating transgenerational cycles of dysfunction (Bourdieu, 1977). For example, an individual raised in a family with an alcoholic parent might, as an adult, establish relationships with partners who have addiction problems. Unconsciously, the repetition of this relational dynamic offers an illusion of control and predictability, allowing the individual to avoid confronting the anxiety and helplessness experienced during childhood. Moreover, cultural norms and social expectations regarding family roles, hierarchy, and power dynamics can contribute to the genesis and maintenance of dysfunctional family situations (Hofstede (2001)). Cultures that emphasize blind obedience to parental authority or tolerate domestic violence as a form of discipline, for instance, can create fertile ground for abuse and neglect.

In this sense, nostalgia for the dysfunctional family can take the form of Sehnsucht, a nostalgic desire for an unattainable ideal projected onto a past that cannot be revived. The search for what is familiar, even if dysfunctional, can be interpreted as an attempt to manage anxiety and fear of the unknown, keeping the individual in a condition of developmental stagnation. This dynamic is often reinforced by a lack of social support, limited access to resources, and broader societal inequalities, which can make leaving the familiar, albeit painful, family environment even more daunting.

### 2) Maladaptive Relational Patterns: Inheritance of the Past, Intergenerational Trauma, and Societal Structures

Early attachment experiences lay the foundation for the relational models individuals adopt in adulthood (Bretherton (1992)). Maladaptive patterns learned

in the family, such as difficulty trusting, fear of abandonment, tendency toward self-devaluation, or assumption of victim or persecutor roles, can profoundly affect intimate, friendship, and professional relationships Bartholomew & Horowitz (1991). These patterns, internalized during childhood, operate unconsciously, influencing individuals' perceptions, emotions, and behaviors in interpersonal relationships, often leading them to recreate dysfunctional family dynamics in their adult lives.

Attachment to dysfunctional family situations is also significantly influenced by intergenerational trauma — the transmission of unresolved traumas from one generation to the next — which is deeply intertwined with social structures and inequalities. Sociological research highlights how historical and collective traumas, such as war, forced migration, or systemic discrimination, can influence family dynamics across generations (Danieli (1998)). For instance, parents who experienced abuse or neglect during childhood may unconsciously repeat similar dynamics with their children, perpetuating dysfunctional relational patterns. This phenomenon can be understood through the lens of projective identification [7], a defense mechanism described by Klein, involving the projection of unacceptable parts of oneself onto another person in an attempt to control or avoid confronting them. In dysfunctional families, projective identification can create complex and pathological relational dynamics, where family members become "trapped" in rigid and dysfunctional roles, hindering individuation and the construction of an autonomous identity. Furthermore, societal factors like poverty, social isolation, and exposure to community violence can increase the risk of traumatic experiences and contribute to the development of insecure attachment (McLoyd (1998)).

### 3) Identity and Belonging: The Need for Recognition, Narrative Construction of the Self, and Social Inequality

Family dynamics significantly influence the development of both individual identity and a sense of belonging (Erikson (1968)), representing the first social context where individuals experience recognition and confirmation of their existence, developing a sense of self in relation to others. However, when family experiences are negative, characterized by rejection, invalidation, or abuse, the need for belonging can induce individuals to preserve the bond with their family of origin, even at the expense of their own individuality and well-being. In such cases, returning, even if only mentally, to unhealthy family situations can be a way to reaffirm identity and feel part of a context, albeit dysfunctional (Baumeister & Leary (1995)). This mechanism is rooted in the fundamental human need to belong to a group and receive recognition.

The construction of identity can be analyzed through the lens of narrative, which is profoundly influenced by social context. According to Paul Ricoeur, P. (1990), individuals construct their identity by narrating their own history, integrating past experiences into the present and projecting themselves into the future. Narrative identity is not static but a dynamic process in continuous evolution, constructed through interpretation and re-elaboration of life experiences. However, access to resources for constructing a positive narrative is not equally distributed. Social inequalities, stigma, and discrimination can significantly limit an individual's ability to create a positive self-narrative (Bradley, & Corwyn (2002)). In situations of attachment to dysfunctional families, an individual's narrative may be fragmented or distorted, influenced by trauma and pathological family dynamics. The process of liberation can be facilitated by reconstructing a coherent and integrated narrative, allowing individuals to give new

meaning to their experiences, re-appropriate their own history, and overcome the negative self-perception and worldview internalized during childhood. This process can be supported through social policies promoting equal access to mental health services and social support programs.

## 4) The Fear of the Unknown, Splitting, Societal Constraints, and the Impetus for Change

The fear of the unknown can be a significant impediment to emancipating from attachment to problematic family situations. Abandoning old family dynamics means leaving one's "comfort zone" and confronting the uncertainty of the future (Lazarus & Folkman (1984)), generating anxiety and resistance to change. This fear can manifest as panic attacks, anxiety disorders, phobias, or avoidant behaviors. Individuals may experience a strong fear of losing family reference points, even if dysfunctional, and of being unable to cope with life's challenges independently.

Fear of change can be intensified by the defense mechanism of splitting [6], which involves categorizing the world into "good" and "bad" to avoid the anxiety provoked by ambivalence. This can hinder detachment from the family of origin, as individuals may cling to the idealized positive aspects while denying the negative ones, thus preventing a realistic view of the situation and subsequent estrangement. Furthermore, societal factors such as limited social mobility, lack of social safety nets, and precarious economic conditions can make leaving a dysfunctional family even more daunting. Splitting can also manifest in interpersonal relationships, leading to oscillations between idealization and devaluation of others, as a way to manage the ambivalence and anxiety associated with intimacy. These psychological dynamics are often compounded by societal constraints that make it difficult for individuals to break free from dysfunctional family ties.

### 5) Towards Liberation: A Path of Personal Growth, Trauma Healing, and the Ethics of Care in a Social Context

Liberation from attachment to unhealthy family situations requires active commitment from the individual and can be facilitated by personal growth and, when necessary, psychotherapeutic support. Trauma healing is fundamental, allowing individuals to process negative past experiences and free themselves from their limiting effects on an emotional, cognitive, and behavioral level.

Effective interventions must address not only individual psychological factors but also the broader social context. This includes advocating for social policies that reduce socioeconomic inequalities, improve access to mental health services, and provide support for families in need (e.g., affordable housing, quality education, job training, and accessible childcare).

Key strategies for fostering personal growth and building healthy relationships include:

- Awareness: observing and recognizing one's dysfunctional patterns of thought, emotions, and behaviors. This involves developing greater selfawareness, understanding one's needs and limits, and recognizing the influence of past family experiences on one's way of being and relating to others. Social support networks and community education programs can play a crucial role in fostering this awareness.
- Processing Emotional Wounds: addressing and overcoming negative past experiences, ideally with the support of a mental health professional.

Psychotherapy can offer a "safe container" in which to explore pain, process trauma, and develop more adaptive coping strategies. Through the therapeutic relationship, individuals can experience a new model of relationship based on trust, acceptance, and empathy, fostering healing and growth. Access to affordable and culturally sensitive mental health services is crucial.

- **Cognitive Restructuring:** questioning negative beliefs about oneself and the world, replacing them with more realistic and positive thoughts. This involves identifying and modifying dysfunctional thoughts, cognitive distortions, and limiting beliefs that keep individuals trapped in negative relational patterns. Cognitive restructuring can help develop a more objective view of oneself and reality, fostering self-esteem and confidence.
- Building New Relationships: creating meaningful bonds based on trust, respect, and reciprocity. Learning to choose partners and friends who offer emotional support and security, fostering personal growth and psychological well-being. New relationships can provide opportunities to experience healthier and more functional relational models, helping to modify maladaptive internal patterns.
- Cultivating Self-Love: learning to accept and love oneself unconditionally, developing self-esteem and self-efficacy, and recognizing one's value and abilities. Self-love is essential for personal growth and building healthy relationships. Learning to love and accept oneself, with all one's limits and imperfections, is a fundamental step in breaking free from past conditioning and living an authentic life.

In this perspective, the importance of the ethics of care, as described by Gilligan (1982), must be emphasized. Liberation from pathological attachment can be seen as an act of self-care, allowing individuals to recognize their needs and build relationships based on reciprocity and respect. The ethics of care highlights the importance of responsibility, empathy, and compassion in interpersonal relationships — values that can guide individuals in their liberation from pathological attachment and in constructing an authentic self and meaningful relationships. These values must also be promoted at a societal level, fostering a culture of care and support that helps individuals break free from dysfunctional cycles.

### 2. CONCLUSION

Attachment to unhealthy family situations can significantly hinder personal growth and psychological well-being, limiting individuals' ability to develop a stable and autonomous sense of self and build fulfilling interpersonal relationships. However, through awareness, processing emotional wounds, building new, healthy relationships, and with appropriate support — including social support and access to resources — it is possible to break free from this "nest trap" and embark on a path of change. Research in psychology emphasizes the importance of interventions aimed at promoting emotional security and developing secure attachment as the foundation for a fulfilling and meaningful life. The process of individuation-separation [7] from the family of origin, though potentially painful, is a crucial step toward realizing one's authentic self and building an adult life free from dysfunctional relational patterns. Narrative reconstruction and the ethics of care are invaluable tools in this journey of growth and healing, helping individuals redefine their history and build relationships based on reciprocity and respect. Integrating

psychological interventions with social policies that address systemic inequalities is crucial for creating lasting change and promoting the well-being of individuals and families. Building a more just, equitable, and supportive society that prioritizes the well-being of families and children is a collective responsibility requiring commitment from everyone — from individual citizens to institutions, from mental health professionals to policymakers.

### 3. FOOTNOTES

- 1) Attachment theory: developed by John Bowlby starting in the 1950s, this theory emphasizes the importance of the bond between the child and caregiving figures (primarily the mother) for psychological development and survival. Bowlby, influenced by ethological theory and psychoanalysis, hypothesized that children are inherently driven to seek proximity to their attachment figures when faced with danger or stress, demonstrating an innate need for safety and protection.
- 2) Secure attachment develops when the child experiences responsive and supportive interactions with caregiving figures, who adequately respond to their physical and emotional needs, providing a safe and predictable environment. Children with secure attachment feel safe exploring the world, knowing they can rely on attachment figures when needed, and they develop healthy self-confidence and trust in others, which is reflected in their ability to establish healthy and fulfilling interpersonal relationships in adulthood.
- 3) Insecure attachment develops when interactions with caregiving figures are inconsistent, unpredictable, or rejecting, leaving the child in a state of insecurity and uncertainty regarding the availability and reliability of attachment figures. Children with insecure attachment may develop anxiety, insecurity, difficulty regulating emotions, and difficulty trusting others. There are different types of insecure attachment, including anxious-preoccupied attachment, avoidant-dismissing attachment, and disorganized attachment, each with specific characteristics and implications for psychological and relational development.
- **4) Heimweh** is a complex emotion that includes sadness for the separation from one's place of origin (home, family, friends) and the desire to return. Often associated with an idealization of the past, homesickness can manifest with varying intensity and can be influenced by individual, social, and cultural factors. In German, the corresponding term is Heimweh, which literally means "home-ache". Homesickness, in this context, can be interpreted as a form of attachment to the familiar, a psychological refuge in which the individual tries to recreate previous living conditions, even if these were characterized by dysfunction and suffering.
- **5) Individuation-separation** is a psychological process, described by Mahler, through which the child gradually develops a sense of self separate and distinct from the mother, acquiring greater autonomy and independence. This process begins in early childhood and concludes in adulthood, with the formation of a stable and integrated identity. In situations of attachment to dysfunctional families, the process of

- individuation-separation can be hindered, with negative consequences for psychological and relational development.
- 6) **Splitting,** described by Klein, consists of separating the positive and negative aspects of oneself, others, or experiences to avoid the anxiety stemming from ambivalence and complexity. Splitting can lead to a distorted view of reality, where people or situations are seen as entirely good or entirely bad. This mechanism can hinder individuation-separation, as the individual tends to idealize the family of origin and deny the negative aspects of family experiences.
- 7) **Projective identification** is a defense mechanism, also described by Klein, involving the projection of unacceptable or unwanted parts of oneself onto another person, in an attempt to control them or avoid confronting them. In dysfunctional families, projective identification can create complex and pathological relational dynamics, in which family members "trap" each other in rigid and dysfunctional roles, hindering individuation and personal growth.
- **8)** "Nest trap" refers to the metaphorical trap that keeps individuals bound to their dysfunctional family environments, preventing them from achieving full autonomy and independence.
- **9) Narrative reconstruction** is the process of re-interpreting and reorganizing one's life story, particularly in relation to past experiences. It's a therapeutic tool that helps individuals make sense of their past and create a more coherent and empowering self-narrative.
- **10) Ethics of care** is a moral framework, developed by Carol Gilligan, that emphasizes empathy, responsibility, and interconnectedness in relationships, contrasting with ethics based on abstract moral principles and individual rights. It highlights the importance of caring relationships and the responsibilities they entail.
- **11)The family nucleus** refers to the core family unit, typically consisting of parents and their children, forming the fundamental building block of family structures.
- **12)IWMs** (Internal Working Models) are mental representations developed in early childhood based on interactions with primary caregivers. They are cognitive and affective schemas that guide individuals' expectations, interpretations, and behaviors in social relationships.
- **13)Social relationships** encompass the connections and interactions an individual has with others, including family, friends, romantic partners, and acquaintances. Social and emotional development is profoundly shaped by the interplay of individual experiences and environmental influences.
- **14) Affective attunement**, the caregiver's capacity to accurately perceive and respond to a child's emotional cues, fosters a sense of security and promotes healthy emotional development.

### **CONFLICT OF INTERESTS**

None.

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