



Experiential avoidance mediates the link between maternal attachment style and theory of mind

Salome Vanwoerden^a, Allison H. Kalpakci^{a,b}, Carla Sharp^{a,b,*}

^aDepartment of Psychology, University of Houston, Houston, TX

^bThe Menninger Clinic, Houston, TX

Abstract

Theoretical and empirical models suggest a relation between attachment style and theory of mind (ToM) in childhood and adulthood; however, this link has not been evaluated to the same extent in adolescence. Additionally, these models typically fail to consider mechanisms by which attachment style affects ToM abilities. The present study sought to test a mediational model in which experiential avoidance mediates the relation between maternal attachment style and ToM. A sample of 282 adolescents ($M_{age} = 15.42$ years, $SD = 1.44$, 62.8% female) was recruited from an inpatient psychiatric hospital. Findings revealed that maternal attachment style in females was related to ToM, through experiential avoidance. Specifically, those with a disorganized maternal attachment were most likely to engage in experiential avoidant cognitive and emotional strategies, which in turn related to lower levels of ToM ability. Implications and areas for future research are discussed.

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1. Introduction

Theory of mind (ToM), as first defined by Premack and Woodruff [1], refers to the understanding that internal mental states such as beliefs, intentions, and desires drive observable behaviors. Mentalizing, a related construct, goes one step further to refer to the reflection on others' minds as well as one's own mind [2]. This is distinct from ToM, which usually refers to the reflection on the mind of others only [3]. These two constructs, along with other social cognitive processes, facilitate social competence and, consequentially, successful navigation of social interactions [4]. Both mentalizing and ToM are subsumed under the umbrella construct of social cognition, which refers to the mental processes involved in perceiving, attending to, remembering, thinking about, and making sense of the people in our social world [5], or the ability to understand ourselves and others as individuals with beliefs, feelings and personality [6]. Deficits in ToM have been shown to correlate with interpersonal problems in both psychiatric populations [7–9] as well as healthy populations [10,11].

Previous literature has shown the emergence of ToM to begin within the first year of life manifesting in joint attention, social referencing, and the perception of incongruity between the infant's emotional state and another's [12,13], but that variability in ToM abilities is present through the lifespan.

It is important to study ToM in adolescence as this developmental period is marked by changes in social behavior and cognitions including greater self-consciousness and increased complexity of peer relationships [14]. Additionally, cortical regions related to ToM functioning, specifically prefrontal regions (e.g. medial prefrontal cortex, superior temporal sulcus, and right dorsolateral prefrontal cortex), are still developing during adolescence [15,16]. Changes in these neural structures coupled with more complex social environments act to influence adolescents' social cognitive abilities. Moreover, because ToM is a central process in navigating the social world [10], it is crucial to understand psychological processes that may relate to individual differences in ToM performance, especially those that may account for atypical development of ToM.

One such process is attachment security. Specifically, in a model introduced by Fonagy [17], the capacity for ToM (also referred to as mentalizing) develops in the context of a secure early parent-child relationship. Building on Bowlby's [18]

* Corresponding author. Tel.: +1 713 743 8612.

E-mail address: csharp2@central.uh.edu (C. Sharp).

attachment theory, Fonagy and colleagues [19] suggested that in infancy, secure attachment relationships facilitate the capacity to tolerate and regulate negative emotional states and that mental states in others are independent from one's own.

The notion that attachment security may relate to individual differences in ToM is also underscored by Dykas and Cassidy [20] who posit that individuals with insecure working models of attachment defensively fail to process social information that has the potential of causing psychological pain. An insecure working model of attachment is developed over time when a caregiver repeatedly ignores or invalidates an infant's distress [21]. At this time, an infant develops an insecure representation of their caregiver, which generalizes to their future interactions with that caregiver. For instance, Main and colleagues [21] found that infant behavior in the strange situation task reflected the internal working model of attachment of that caregiver—secure infants sought out interactions with their caregiver when uncomfortable whereas infants with insecure working models of attachment did not. Additionally, disorganized attachment was found to be related to specific interaction patterns in a conflict discussion task between adolescents and their mothers [22]. Eventually, these representations generalize into a filter used in the processing of all social information; [20] specifically, when a child encounters potentially negative social information that previously led to suffering because of unmet needs (invalidation of distress by caregiver), their working model will provide a defense against this information by limiting cognitive access. Obsuth and colleagues [22] termed this process defensive exclusion. In these situations, an individual fails to fully process the emotional components of a situation that may cause distress. This is in contrast to an individual with a secure attachment representation who is able to process negative emotions in a more cognitively open manner because of previous experiences facilitated by their caregiver. Experiential avoidance or “an unwillingness to remain in contact with uncomfortable private events by escaping or avoiding these experiences” [23], ^(p1154) may represent one of these defensive mechanisms described by Dykas and Cassidy [20].

Experiential avoidance has never been tested as a mechanism in the relation between attachment and ToM. However, research has shown it to be a key construct in various forms of psychopathology including anxiety, borderline personality disorder, and eating disorders [24–26]. Experiential avoidance has been conceptualized as an emotion regulation strategy aimed at modifying the experience of overwhelming emotional states. Research shows that, despite the intent to reduce experience of negative emotional states, reduction in the experience of positive emotional states also occurs [27]. We found it important to integrate this construct into our model of relations between attachment and ToM due to its general effect of attenuating emotional experience. Therefore, the aim of the current study was to test a mediational model in which experiential avoidance mediated the relation

between attachment style and ToM. We hypothesized that certain attachment styles would be related to greater levels of experiential avoidance and subsequently, poorer ToM ability.

Our theorized relation between experiential avoidance and ToM is in line with research on neural representations of ToM processes. Research has shown that there are two separate ToM pathways: one utilized for affective state attribution and a separate, higher-order pathway to represent intention and beliefs [28]. Frith and Happe [29] showed that this second, higher-order pathway requires an individual to construct the mental experience of another by reflecting on their own similar experiences. If an individual lacks integrated memories of negative states due to a pattern of experiential avoidance, it is likely that their higher-order ToM pathway may be impaired. This is in line with behavioral research that has shown that the ability to reflect on the minds of others is assumed to partially depend on the ability to recognize and accept mental states in the self [30,31]. Without the proper use and reflection of mental states within one's own mind, this same reflection of others' mental states can similarly be impaired.

In sum, we sought to examine the relations between attachment, experiential avoidance and ToM. Based on the literature reviewed, we expected that experiential avoidance would have a mediational effect on the relation between attachment and ToM. An individual who, based on early attachment experiences, defensively excluded the processing of negative emotions would develop a cognitive schema that filtered the way social information was processed. Specifically, experiential avoidance would be utilized by this individual as a defense mechanism against unpleasant internal states. Subsequently, this would impair the processing and reflection of one's own and other's negative states leading to deficits in ToM functioning. This dynamic may be especially pronounced in adolescents who are undergoing a period of psychological and social transition.

In addressing this aim, we used the Movie for the Assessment of Social Cognition (MASC) [32] to specifically test higher-order ToM processes. This measure was developed as a naturalistic, video-based instrument that requires an individual to consider multiple dynamic indicators to infer a wide range of mental states. We tested these links in a clinical sample where we would be assured to find variability in attachment security, experiential avoidance, and ToM capacity. Demonstrating a mediational role for experiential avoidance in the relation between attachment security and ToM would provide a more fine-grained understanding of components of social-cognition in the attachment context.

2. Methods

2.1. Subjects

Adolescents were recruited from a 16-bed inpatient psychiatric unit that usually serves individuals with severe

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