



Emotional Security: Integrating Psychoanalysis, Family Systems, and Cultural Practices in the Kerala Context

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Abstract

This paper explores emotional security as a central process linking psychoanalytic theory, family systems, and cultural practices within the Kerala context. Drawing on Melanie Klein's object relations framework and Susan Isaacs' concept of unconscious phantasy, it traces how early defences and ambivalence shape lifelong patterns of anxiety, attachment, and relational stability. Integrating Davies and Cummings' Emotional Security Hypothesis (ESH) and its reformulations, the study highlights how parental conflict undermines children's sense of safety through distinct insecurity profiles, mediating both internalising and externalising symptoms. Contemporary research on trauma transmission, identity diffusion, and adverse childhood experiences (ACEs) is examined alongside cross-cultural studies from India, Spain, China, and Indonesia, underscoring how stigma, collectivist norms, and intergenerational scripts intensify vulnerability. The synthesis demonstrates that emotional insecurity is not reducible to attachment but operates as a broader regulatory system shaped by conflict, trauma, and cultural meaning-making. By situating psychoanalytic insights within family systems and indigenous practices, the paper argues for trauma-informed, culturally sensitive interventions in Kerala that foreground emotional security as a protective factor. Ultimately, it proposes that integrating psychoanalysis, systemic perspectives, and local traditions can foster resilience, belonging, and healthier developmental trajectories across generations.

Keywords: Psychoanalysis, Unconscious Phantasy, Parental Conflict, Trauma Transmission, Identity Diffusion, Mental Health

Introduction

One of the most important concepts in family systems theory, psychoanalysis, and developmental psychology is emotional security. It offers a conceptual framework for comprehending how kids and teenagers deal with trauma, conflict, and identity development. Fundamentally, emotional security is the feeling of security and stability people have in their relationships and inner lives. This sense of security—or lack thereof—influences how people handle stress, control their emotions, and form enduring bonds. The idea is not new; it has its roots in psychoanalytic traditions, especially in the writings of Sigmund Freud and his followers. However, it has developed into a multidisciplinary lens during the last century that connects cultural analysis, empirical research, and

clinical theory (Cummings & Davies, 1996). By highlighting that newborns deal with emotional challenges from birth rather than only bodily requirements or reflexive reactions, Melanie Klein enhanced Freud's theories. Through her method of play, Klein discovered that babies have persecutory anxieties: when they are uncomfortable, they don't only detect their discomfort; instead, they believe that something dangerous is assaulting them (Klein, 1996).

This realisation fundamentally changed our concept of baby psychology by implying that complex concerns and defences, rather than straightforward biological urges, are the starting point of emotional life. According to Klein, simple actions like feeding and being held help babies develop their initial meaningful bond with their mothers. However, when the breast is absent, when hunger is not satiated right away, or when soothing is delayed, the same mother who offers consolation also causes irritation. The newborn experiences ambivalence as a result of this duality, feeling both love and rage for the mother at the same time. This ambivalence, according to Klein, is a key aspect of early emotional life. Infants use psychological defences, including projection, introjection, and splitting, to deal with these contradictory emotions. These systems assist the baby in maintaining the notion of a "good mother" even in the face of perplexing or disappointing realities (Klein, 1959).

By expanding on unconscious fantasy—the mental form that innate impulses take—Susan Isaacs expanded on Klein's work. For instance, a hungry baby may feel threatened when the breast is absent or have breast hallucinations when it wants to be fed. According to Isaacs, these fantasies do not go away as people mature; rather, they continue to exist throughout life and show up in art, science, creativity, imagination, and even in subtle interpretations of the tone or behaviour of others (Isaacs, 1948). This viewpoint suggests that unconscious fantasy is a fundamental component of human subjectivity and emphasises the link between infantile experience and adult psychological development. The object relations hypothesis, which holds that internalising positive parental figures boosts empathy, personality stability, and healthy relationships, developed from Klein and Isaacs' observations (Winnicott, 1965). The Oedipus complex, which in turn affects identity formation and relational patterns, is greatly influenced by early experiences of rivalry and affection for both parents. Although projection can occasionally help comprehend people, when it is controlled by animosity, it can warp reality. Therefore, to maintain a cohesive sense of self and balance projections, positive experiences are crucial (Klein, 1952).

Klein identified the paranoid-schizoid position and the depressive position as the two main positions in early development. Babies in the paranoid-schizoid position are unable to integrate objects and divide them into "all good" and "all bad." Envy, greed, and fear characterise this stage. When the baby learns that the "good" and "bad" mothers are the same person, the depressive posture appears around five or six months. Guilt, the need to mend emotional harm, and a more balanced emotional state are all introduced by this insight. According to Klein, these viewpoints persist into adulthood and have an impact on how people interpret novel events (Klein, 1996). While effective integration promotes resilience and emotional maturity, excessive mistrust or self-pity can make even small issues seem overwhelming. These psychoanalytic underpinnings serve as the basis for contemporary frameworks. Children actively participate in understanding and reacting to parental conflict, according to the Emotional Security Hypothesis. Children evaluate the meaning of conflict and modify their tactics accordingly, as opposed to being passive recipients of parental actions (Davies & Cummings, 1994). In a similar vein, the Social Defence System emphasises how kids create coping strategies to shield themselves from emotional trauma in familial settings. Constructive conflict promotes resilience, individuation, and healthy identity development, whereas destructive

conflict inhibits adolescent adjustment, according to numerous empirical studies (Cummings & Davies, 1996). Trauma research also shows how traumatic childhood events and unresolved connections shape identity dissemination, emotional control, and adult intimacy. These results highlight how vulnerability is passed down through generations: unresolved trauma in parents frequently shows up as emotional instability in children, creating generational cycles of misery (Rutter, 1987; van der Kolk, 2014).

Emotional security in collectivist societies is often linked to belonging to a group rather than to personal freedom. In addition to parental bonds, extended family, community, and cultural customs also contribute to children's sense of security. For example, spiritual practices, storytelling, and caregiving routines offer children symbolic tools to help them deal with conflict and anxiety. By incorporating these cultural aspects into developmental and psychoanalytic frameworks, we can gain a deeper understanding of emotional security in a variety of settings. When considered collectively, the literature highlights the critical need for studies that connect developmental psychology, psychoanalysis, and indigenous practices. Such research can shed light on how adolescent identity, emotional stability, and long-term relational health are shaped by the interplay of early defences, familial conflict, and cultural background. Unconscious fantasy, familial structures, trauma, and cultural narratives all influence emotional security, which is a dynamic process rather than just an individual characteristic. Scholars and practitioners can create more successful therapies that support resilience and relational well-being across generations by placing psychoanalytic insights within larger developmental and cultural contexts.

Materials and Methods

This study adopts a qualitative, integrative research design, combining psychoanalytic theory, family systems perspectives, and cultural practices to examine emotional security in the Kerala context. Rather than conducting primary data collection, the research synthesises existing theoretical and empirical literature to construct a multidimensional framework. The design is interpretive and interdisciplinary, aiming to bridge Western psychological models with indigenous cultural practices. Relevant literature was identified through systematic searches of academic databases, including JSTOR, PsycINFO, PubMed, and Scopus, using keywords such as emotional security, psychoanalysis, family systems, parental conflict, trauma transmission, identity diffusion, and Kerala cultural practices. Peer-reviewed articles published between 1946 and 2025 were prioritised, alongside seminal psychoanalytic texts and culturally specific studies. Inclusion criteria required that sources explicitly address emotional security, family conflict, or trauma in relation to developmental outcomes. Exclusion criteria eliminated studies lacking theoretical relevance or cultural applicability. The analysis proceeded in three distinct stages. First, classical psychoanalytic concepts were systematically mapped onto contemporary family systems models to identify both points of convergence and areas of divergence. Second, findings from collectivist societies were examined to demonstrate how cultural norms, social stigma, and ritual practices influence the development and maintenance of emotional security. Finally, these insights were adapted to the Kerala context, with particular attention to indigenous practices, family structures, and the social stigma surrounding divorce and marital conflict.

Turner & Barrett (1998) examined how adolescents react to marital conflict and linked it with the cognitive-contextual model by Grych & Fincham (1990) and the emotional-security model of Davies Cummings (1994). They demonstrate that when there is constant conflict, hostile, unresolved,

or involving the child directly, it leads to adjustment problems. These effects occur mainly through cognitive appraisals such as their perceptions of threat, self-blame, and their confidence in coping and the quality of their attachment relationships. Supportive friendships and secure attachment reduce risk. Age and gender influence vulnerability: younger adolescents are more vulnerable, girls tend to experience more serious internalising problems despite strong peer attachments, and boys rely on parent attachments. The authors argue that the combination of adolescent interpretations along with attachment quality is the strongest predictor of outcomes. Tomlinson (1991) has a slightly different viewpoint. Her study focused on adolescents who showed “unacceptable behaviour” even though their families qualified as “good enough” according to Winnicott’s standards. These households are generally responsible and middle-class. The problem, she says, arises from a repeating conflict cycle: parents see their child as vulnerable (commonly adopted kids or those thought to be fragile), and respond with overprotection, excusing actions, and entering into struggles for control. This reinforces vulnerability, and the cycle repeats. Mothers receive more blame, fathers distance themselves, and parents end up feeling powerless. This situation worsens when professionals rely on simple, linear explanations that assign blame. Tomlinson advocates for a two-way, multidimensional model in which both the adolescent and the family system share accountability. The central mechanism driving this cycle is the perception of vulnerability.

In their study, Thienemann et al.(1998), investigated 106 female teenage mental patients' defence mechanisms. Their findings aligned with previous research: mature defences tended to appear in families associated with cohesive, expressive, and recreational family contexts, whereas families characterised by conflict, high achievement pressure, and controlling environments were associated with immature defences. Although depression predicted defence style more strongly than family environment, the influence of family characteristics remained notable. Agreement between parent and adolescent reports underscored the validity of the results. The results are reinforced by the similar reports from parents and adolescents. The study concludes that family dynamics play a significant role in young people relying on mature or immature coping strategies. According to Scharf & Shulman (2006), how parents handle their teenagers is influenced by their own memories and conflicts from their own experiences. This is one of those works that merges theories of family systems, attachment theory, and psychoanalysis. When parenting teenagers, parents often relive their earlier struggles through projection, repetition, and rehearsal of unresolved conflicts. According to attachment theory, reflective functioning helps parents interrupt the cycles of harmful internal working models that are transmitted down through generations. Family systems theory incorporates concepts such as intergenerational scripts. Parents who are unable to reflect may unknowingly repeat past relationship patterns. Those who gain understanding can adjust and develop stronger bonds with their teenagers.

In a recent study, Burlakova et al. (2024) put forward how trauma plays a powerful role in shaping adolescents' views of their families. Traumatic events like abandonment, betrayal, violence, and humiliation essentially destroy one's sense of identity and safety. While disturbed attachment contributes to increased anxiety, mistrust, and interpersonal issues, supportive home environments can reduce some impacts. While conflict and broader societal pressures elevate risk, supportive family situations are beneficial. The authors talk about school programs, TF-CBT, family-based therapies, and other interventions that help teenagers rebuild trust and connection. Despite many teenagers reporting only low-to-moderate levels of effects, they discovered that trauma meaningfully alters family relations, indicating that targeted interventions can truly make a positive difference.

Building on earlier sections, the next set of readings explores how early-life adversity influences adult intimacy and family relationships. Jain & Tomar (2025) place particular emphasis on Adverse Childhood Experiences (ACEs) and how they emerge in adult romantic life. ACEs, occurring before age 18, commonly involve abuse, neglect, or dysfunctional home environments. The literature they reviewed repeatedly demonstrates that ACEs disrupt brain development, emotional regulation, and attachment processes, leading many individuals to enter adulthood with insecure attachment styles such as avoidant, anxious, or disorganised. These insecure tendencies shape how trauma is expressed in adult relationships, contributing to distance, mistrust, dissatisfaction, and struggles to maintain emotional closeness.

The study also points out the significance of emotional dysregulation. Individuals who learned early on to suppress emotions or rely on unhealthy coping have trouble dealing with conflict or emotional closeness. Low self-esteem and negative core beliefs (“I’m not worth love,” etc.) make boundaries difficult—they might allow excessive intrusion or, on the opposite end, shut down completely. High ACE scores are strongly related to reduced trust and more communication challenges. Childhood exposure to conflict also predicts adult loneliness, which undermines relationship satisfaction. On the other hand, emotional intelligence and supportive early experiences reduce some of these long-term risks. ACEs are also transmitted across generations; parents affected by ACEs often struggle with cohesion in their own families, which perpetuates cycles of dysfunction. Their overall argument is that ACEs are a major relational risk factor and that research needs to pay more attention to cultural and trauma-informed approaches.

Mills et al.(2021) refocus attention on adolescents again, especially how parental conflict has a powerful impact on parent–teen communication. They found that constructive conflict—calm conversations, problem-solving—can actually enhance relationships. But destructive conflict (hostility, withdrawal, yelling, verbal attacks) damages teens’ emotional security. This emotional insecurity then disrupts parent-adolescent communication, which plays a vital role in individuation, coping, and general psychological well-being. Their study with 225 families showed that emotional insecurity fully explained the entire process: destructive conflict led to insecurity, which in turn harms communication. They also reported that both mothers and fathers were affected similarly. The authors conclude that enhancing emotional security may be an effective way to improve communication issues and adjustment. From a systemic viewpoint, Cui et al.(2007) emphasise that parent–teen relationships are reciprocal, rather than one-way. Marital strain predicts teen behaviour problems—depression, delinquency, anxiety—but adolescent problematic behaviour also increases parental conflict. Their data from the Iowa Youth and Families Project (over 450 families) illustrated this cycle clearly. Using cross-lagged analysis, they found that marital conflict predicted adolescent troubles, but adolescents’ problems also increased the parents’ disagreements over child-rearing, which subsequently lowered marital satisfaction. Early adolescence (grades 7–9) emerged as a sensitive period. They argue strongly for interventions that target the entire family system because one piece can’t be fixed without influencing the others.

In a broad review, Tang (2025) synthesised studies on parental conflict and adolescent emotional problems and aggressive tendencies. The patterns match everything else: parental conflict predicts depression, social anxiety, emotional insecurity, and aggression, including physical hostility, rage, and antagonistic behaviour. These outcomes are mediated by how teens interpret conflict and by the quality of attachment they share with their parents. Low resilience and weak parent–child bonds worsen internalising symptoms, while strong bonds provide protection. Psychological traits

like hope, optimism, and basic psychological needs also buffer the impact. However, Tang notes that many studies rely too heavily on self-reports and cross-sectional designs, which limit causality. As a result, they call for longitudinal and culturally sensitive research. Septiyani & Kristiana (2025) reappear again in this section, stressing how ACEs shape young adult parenting practices, reinforcing power disputes, communication breakdowns, and confusion in family roles. They highlight studies showing that parents who carry ACE histories often show more stress, mental health issues, and harsh or emotional withdrawal, especially when economic hardship is present. But positive parenting during adolescence can disrupt these harmful patterns. The authors recommend trauma-informed, attachment-based family therapy. They also recommend more culturally specific research, particularly in Indonesia.

Blass & Erlich (1993) contribute an interesting psychoanalytic angle on parents of adolescents. They introduce something called “multiple identification,” where parents shift back and forth between identifying with their own parents and with their adolescent children. The adolescent’s drive for autonomy reactivates old unresolved conflicts in the parent. Through their group studies with parents of hospitalised teens, they found four stages: initial resistance, emergence of conflict/defence, working-through, and resolution. Parents who worked through their reactions actually benefited personally, which facilitated their child’s growth too. If they couldn’t work through it, old patterns of poor separation continued. Ultimately, adolescence becomes a kind of developmental challenge for both generations, with the potential to move forward or fall back. Iqra Yusuf et al.(2016) examined the link between interparental conflict, which affects adolescents’ emotional security, and self-discipline in adolescents. They found what most of the ESH-based research also shows: destructive conflict makes teens feel insecure, increases self-blame, and decreases coping efficacy and self-discipline. Constructive conflict and stable family environments, on the other hand, help strengthen emotional regulation. Notable gender patterns also emerged—girls tended to report higher emotional security and self-discipline but felt more threatened by the content of conflict, which matches with earlier findings that girls tend to internalise stress more.

Krishan & Kumar (2025), which came up briefly before, ties everything together on a more symbolic or philosophical level. They argue that early emotional wounds—neglect, unmet needs, parentification—shape a person’s deep inner distortions that disrupt love and intimacy. Using psychodynamic ideas and Jungian frameworks, they explain how children who learn to hide parts of themselves create a shadow and develop a persona that wins approval. As adults, these unacknowledged parts get projected onto partners, making it easy to confuse love and trauma-driven intensity. Trauma bonds then lead to repetition cycles where pain feels like connection. For healing to happen, the shadow has to be acknowledged and integrated so the true self can achieve individuation. Authentic relationships, they conclude, are possible only from a place of inner wholeness rather than needing someone else to complete you. When all these sources are put together, one theme is consistent: early relational experiences—whether as babies, in childhood, or adolescence—shape emotional security to identity development, coping strategies, conflict responses, and later romantic and parenting behaviours. Trauma, marital conflict, boundary problems, and insecure attachment can throw these processes for sure, but resilience, supportive caregiving, and the ability to reflect on one’s inner world can repair their impact. Across psychoanalytic, attachment, and developmental frameworks, the message is strikingly the same: family relationships are the primary “arena” in which emotional life is created, wounded, and potentially restored.

Shifting to modern research, Heider (2020) investigated what happens when parents divorce or separate. The studies are surprising but still depressing: children struggle with anxiety, insecurity, guilt, feeling responsible, and sometimes depression or low self-esteem. Teenagers might develop identity issues down the line. Behaviour-wise, kids withdraw or become aggressive, and trust issues often show up later in close relationships. School performance is affected too—grades drop, concentration gets harder, and absenteeism increases. Younger kids show separation anxiety or regress in their development, and adolescents sometimes rebel or engage in risky behaviours. Adults who experienced parental divorce later report difficulty with commitment or intimacy in relationships. Heider mentions that in countries like India, where divorce is still heavily stigmatised, this adds another layer of stress for kids because the social environment becomes judgmental and unsupportive. However, there are protective factors like cooperative co-parenting, supportive friends, and emotionally strong children. Initiatives within schools, therapy, and simply maintaining honest communication can reduce the impact. Overall, through the study, it was emphasised that governments and institutions must pay more attention to children's mental health during the separation of parents, especially in places where divorce still carries social stigma.

Carrying this forward, a central theoretical perspective that keeps coming up throughout the literature is Davies and Cummings' Emotional Security Hypothesis (ESH). Compared to Social Learning Theory or the Cognitive-Contextual model, ESH gives children's sense of safety the highest priority to parental conflict, mainly in terms of how it threatens their emotional security. They talked about three major systems working together: emotional reactivity, how children shield themselves from exposure to conflict, and the mental frameworks they form about family stability. Across a bunch of study designs—controlled experiments, longitudinal studies, and analyses involving multiple pathways—the pattern seen is that insecurity mediates conflict and leads to behavioural problems like depression and anxiety. One important point they make is that insecurity arising from marital conflict is not the same as attachment insecurity. They're related but distinct. A child can be securely attached to a parent but still feel insecure in a conflict between parents. And certain factors intensify these negative effects, like family instability or strict parenting. Meanwhile, family cohesion and healthy emotional expressiveness seem to lessen the effects of conflict. Predictably, the most damaging form of conflict is characterised by anger or aggression. Constructive conflict managed respectfully actually reduces the risks.

Expanding on this, Martin et al. (2014) later worked on ESH by adding an evolutionary foundation, calling the whole system the Social Defence System (SDS). This system is about children identifying and responding to interpersonal threats, not about preserving attachment bonds. Fear is at the centre of how this system shapes kids to cope in different patterns—by staying alert, isolating, avoiding, acting aggressively, or even stepping in to calm the situation. The updated theory outlines four insecurity profiles: secure, mobilising, dominant, and demobilising, each with specific family backgrounds and developmental trajectories. What was most damaging was the hostile and child-relevant forms of conflict, which had a long-term effect, including a distorted perception of threat, affected the physiological stress systems, and reduced the motivation for positive activities. Like this, EST-R contributed specifics and stronger explanatory power than the initial hypothesis. Following this trajectory, Davies and Forman (2002) carried this work forward by showing that children in high-conflict homes show a combination of internalising and externalising symptoms, which is consistent with the broader literature. However, their major contribution was establishing that insecurity isn't just a straight line; it comprises several distinct patterns or profiles. These include secure, preoccupied

(intense distress, vulnerable to internalising issues), dismissing (desensitised, associated with externalising), and masking (hiding distress with enduring susceptibility). Findings from multiple informants show that insecure groups demonstrate more destructive conflict and more psychological symptoms. Productive conflict supports a capacity to bounce back.

Highlighting this further, Harold et al. (2004) highlighted that couple disagreements predict child problems even more strongly than overall unhappiness in the marriage does. As per the Emotional Security Hypothesis, kids react not to the anger itself but to what the conflict indicates about family stability and how safe the family is going to be in the future. Insecurity mediates both immediate reactions and long-term patterns. Conflict over child issues and physical aggression are especially harmful; resolution of conflict, on the other hand, makes children feel more secure. Harold, Osborne, and Conger (1997) moved their focus to adolescents and found something interesting: adolescents' *interpretations* of conflict count more than exposure. Internalising symptoms were tied directly to how adolescents perceived the conflict, independent of parent-child hostility, while externalising symptoms were related to increased conflictual behaviour from parents. It was found that the link between conflict and parent-child hostility operates in both directions, especially for boys. This means adolescents aren't just passive reactors—they actively make sense of the situation and shape the dynamics themselves.

Adding cultural context, Vlachynská et al. (2017) looked into Spanish adolescents and showed that emotional security, individual perspective, and parenting practices work together to anticipate adaptation. Nurturing parenting and consistent resolution of conflict minimise risk. Destructive conflict—aggressive physical behaviour, high intensity, unaddressed concerns, and child-related content—leads to shame, distress, and self-blame. Again, emotional security serves as a central process. Reinforcing this point, Davies and Martin explored the reformulated ESH and emphasised that perception has a greater impact on harm than the frequency of conflict. Supportive relationships and consistent resolution buffer these effects. According to Crockenberg and Forgays (1996), emotion theory is introduced to clarify these processes. Using Grych and Fincham's stress/appraisal model, they outline how kids make sense of conflict depending on their objectives. Anger commonly occurs when kids feel they can still reach their goals, leading to behavioural externalisation. Sadness arises when they feel the achievement of goals is blocked, leading to internalisation. Gender differences are notable: girls often report more depressed mood and social withdrawal, partly because of conventions and sometimes greater paternal negativity. Boys, identifying more with fathers, exhibit more externalising. In their limited study of 30 families, children truly appraised parental conflict quite accurately, not only copying behaviour, but also apprehended emotional variation and made significant differences between parents' conduct.

The next set of readings leans more toward how trauma and defences work—both in childhood and adulthood. Jean Knox (2003) provides a summary that compares psychoanalytic, Jungian, and attachment perspectives, and she genuinely does a pleasant job unifying them. Classical psychoanalysis traditionally thinks trauma is mainly about the repression of memories or impulses. Yet modern approaches that are influenced by attachment theory suggest that it's more about evading distressing emotions rather than the memory itself. According to Knox, issues of attachment, separation, and care in early life are core to trauma mechanisms. Klein spoke about early, acute defences like splitting and projective identification, suggesting that they stemmed from fears rooted in what she termed the "death instinct." Alternatively, Jung reinforced dissociation, splitting the psyche into separate complexes, which modern trauma research has linked to how, in PTSD,

memories become dissociated. Attachment theory contributes another element, which describes defences as tactics for regulating emotion rooted in early experiences. For example, distance regulation in infancy (such as avoidant or preoccupied attachment) is adopted as a strategy in later life.

Knox further explains that internal working models—a kind of mental templates for bonds—shape how a person judges safety and threat. These models give rise to defensive strategies like avoidance, amplified response, or disorganisation. She stresses that defences involve keeping distressing material out of awareness, though it still affects behaviour. Unconscious fantasy acts as a safeguard, helping to modulate overwhelming emotions and preserve a sense of continuity or “healthy narcissism.” Overall, her synthesis shows that defences are relational, develop over time, and are embedded in the brain’s structure, all working to help manage affect in the face of trauma or insecure caregiving. Deepening this view, Wurmser (1996) talks about repetitive cycles that follow trauma—how unresolved trauma settles in unconscious patterns and ends up repeating in relationships or everyday behaviours. These repetitions are not accidental; they act as defences, part of the communication of unresolved pain. People oscillate between wanting to master the traumatic experience and fearing re-experiencing it, leading to profound inner conflicts. Wurmser traces this to dissociation, repression, and the need to integrate. He suggests that therapy has to break these entrenched cycles by improving emotional regulation and fostering new relational patterns that help people move beyond the compulsion to repeat.

Continuing with identity development, Gander et al. (2024/2025) explore how identity diffusion in adolescents is traced back to unresolved attachment. Identity diffusion reflects a fragmented or unstable sense of self, kind of like not having a clear story of who you are. The researchers compared psychiatric inpatients with community adolescents using the AAP (Adult Attachment Projective) and AIDA (Assessment of Identity Development in Adolescence). As expected, the clinical adolescents displayed markedly higher levels of unresolved attachment and identity diffusion, and those labelled as the “unresolved” subgroup demonstrated the most serious identity problems. What really stood out in the findings is that unresolved attachment predicted identity diffusion only among clinical adolescents but not in nonclinical ones, which suggests that attachment-related trauma (abuse, neglect, etc.) particularly affects adolescents who are already vulnerable or experiencing psychological difficulties. Adolescents’ borderline personality disorders had the most severe identity diffusion. Consequently, the authors emphasise attachment-focused therapy for these adolescents, which fits the mechanisms they describe.

Septiyani & Kristiana (2025) approach the issue from a different angle by exploring how young adults with ACEs (Adverse Childhood Experiences) encounter conflict in parenting. Their review (covering literature from 2015–2025) applies Family Conflict Theory to explain the pattern: early trauma disrupts emotional regulation and leads to dysfunctional coping, which then shows up in parenting. The common themes are power imbalance, communication rupture, and unclear roles. Intergenerational transmission research shows that parents with ACE histories often repeat old patterns through harshness, withdrawal, or inconsistent emotional availability. A major protective factor they highlight is positive parenting in adolescence, which can soften the impact of early trauma. A supportive relational network also makes a meaningful difference. Conversely, economic hardship amplifies everything, heightens family conflict and increases the risk of psychological difficulties in children. The authors recommend ACE screening and using trauma-informed and family-oriented interventions. They also observe that their review is distinctive in foregrounding Asian contexts,

particularly Indonesia, where research is still growing. Anant & Raguram (2005) return to the theme of family therapy with adolescents, especially those with conduct disorders, highlighting how marital conflict contributes to wider family dysfunction. It overlaps with a broader conflict literature: unresolved marital issues influence parenting patterns, which then shape adolescent behavioural difficulties.

From a developmental standpoint, Xiang et al. (2019) examine how marital dissatisfaction and its influence on parenting can lead to problematic separation-individuation in Chinese adolescents. In plain terms, they found that marital dissatisfaction affects parenting and adolescents' ability to develop independence. They observed that mothers' marital dissatisfaction increases parenting stress, which then leads to two types of psychological control: one that keeps teens dependent and another that pressures them to achieve. Dependency control fostered over-dependence in adolescents, while achievement control predicted unhealthy patterns of dependence. Parenting stress was the key link. Cultural context matters here too—within collectivist cultures, problematic dependence tends to be more common. Notably, gender didn't alter the findings. Vanwoerden, Kalpakci, & Sharp (2017) examined the connection between boundary problems in the parent-child relationship and the development of borderline personality disorder in adolescents. While childhood abuse isn't considered necessary or sufficient for BPD, boundary violations—patterns like enmeshment, role reversal, intrusiveness, or spousification—were considered strong predictors. These patterns undermine the development of independence and secure attachment, both of which are crucial during adolescence. Drawing on evidence across developmental stages, the researchers show that role reversal and guilt-inducing parenting can predict later BPD symptoms, and failures of parental protection come up repeatedly in adult reports. Ultimately, they argue for multidimensional, relationship approaches to studying adolescents because past research relies on too narrow models.

Results and Discussions

From the review of literature, when put together, it is clearly visible that the importance of the role of early family relationships, emotional security, trauma and family friction when faced in repeated patterns shapes psychological development across the lifespan. Various interrelated themes are seen rather than isolated findings.

Early family relationships are the basis of emotional security

According to traditional psychoanalytic ideas by Melanie Klein and Susan Isaacs, infants absorb emotional experiences through unconscious fantasising, splitting, projection, and introjection. How objects are represented internally impacts their emotional regulation and interpersonal functioning in the later stages. They are shaped by early relational experiences. According to recent developmental research, the children's emotional security depends on the quality of early caregiving, home consistency, and the control of fear and anxiety in the home environment. Fragmented care leads to emotional discomfort, whereas secure early interactions develop ego strength, empathy, and stability in relationships.

Parental Conflict and Emotional Insecurity as Central Mechanisms

A child's emotional security is affected by hostile parental conflict and unresolved child-related conflict. Children see parental conflict as a danger to family security. Those who face interpersonal parental discord often develop negative perceptions of family bonds,

heightened emotional volatility, and maladaptive coping mechanisms. Positive interpersonal outcomes guided by respect, resilience, and resolution promote stronger relational bonds, adaptive coping, and emotional stability.

Trauma, Attachment Insecurity, and Protective Coping Mechanisms

The reviewed literature demonstrates that early traumatic experiences such as emotional neglect, abuse, parental separation, and boundary violations leave lasting psychological imprints. These traumatic experiences disrupt attachment security and give rise to the development of defensive adaptations, including dissociation, projection, avoidance, and the repetition of dysfunctional relational patterns over time. Across the lifespan, unresolved attachment trauma can lead to diffusion, emotional dysregulation, reduced intimacy, and greater susceptibility to mood disorders, substance abuse, personality pathology, and relational dysfunction.

Adolescence as a critical window for emotional security and identity development

Adolescents constitute a developmentally sensitive group with heightened vulnerability during which earlier experiences become more pronounced. A consistent body of research indicates that adolescents' perceptions of parental conflict and family instability are linked to later internalising outcomes such as anxiety and depression, and externalising outcomes including aggression and delinquency. Emotional insecurity plays a central mediating role in the relationship between family conflict and adolescent adjustment, shaping identity formation, self-control, and coping capacity. Gender based differences have also been evident, with girls tending towards internalising difficulties and boys towards externalising behaviours, both of which are deeply shaped by the emotional tone of their family environments.

Cultural and Contextual Patterns in the Kerala Setting

Evidence from Kerala underscores the critical role of family-centred emotional security in promoting mental health. Studies spanning community settings, clinical populations, and disaster-impacted populations demonstrate that familial interdependence, shared roles, and relational connectedness deeply shape emotional regulation, resilience, and recovery. Conversely, Kerala-based research consistently shows that parental conflict, childhood trauma, and transmission of distress across generations are associated with adverse mental health outcomes among children, adolescents, and adults. Escalating rates of mental illness and suicide further reflect the psychological burden associated with emotional insecurity in the context of evolving family structures.

Conclusion

The findings of this review underscore the role of emotional security as a unifying framework that connects early caregiving experiences, family conflict, trauma exposure, and later mental health consequences. Across multiple theoretical perspectives and cultural settings, family relationships consistently function as the primary setting where emotional experiences are cultivated, challenged, and in some cases repaired. One of the most important contributions of the literature reviewed is a notable synthesis between attachment-based

developmental theories and psychoanalytic theory in conceptualising emotional security. Core psychoanalytic ideas such as unconscious dynamics, internalised relational representations and defensive functioning closely parallel contemporary attachment-based models of emotional regulation, suggesting consistency across theoretical traditions. The emotional security hypothesis and its subsequent revisions provide a compelling explanation by prioritising children's internal perceptions of safety and threat. This approach helps clarify why similar levels of conflict can produce markedly different psychological outcomes depending on family cohesion, emotional attunement, and the approaches used to manage and resolve conflict.

The body of research reviewed indicates that childhood trauma, when unresolved, continues to influence emotional regulation, identity consolidation and relationship patterns into adolescence and adulthood. Classical psychoanalytic concepts such as repetition, dissociation and defensive coping are increasingly validated by current research within contemporary trauma and attachment literature. The transmission of trauma across generations, particularly as manifested in parenting practices and family conflict dynamics, underscores how emotional insecurity persists unless it is addressed through reflective processes and targeted therapeutic intervention. Evidence from studies conducted in Kerala highlights specific dimensions of emotional security. The collectivistic orientation in the region has provided protective elements such as mutual dependence, shared caregiving and emotional support, helping to reduce psychological strain. However, accelerating sociocultural changes, including the prevalence of nuclear families, academic and migration-related pressures, and increasing mental health challenges, have weakened longstanding traditional supports. In this shifting landscape, unresolved family conflict and early trauma play a vital role in emotional insecurity, adolescent distress, and elevated risk of suicide.

The existing body of empirical evidence demonstrates the adoption of family-based interventions that are sensitive to trauma and cultural context. Preventive efforts that promote emotional security, such as supporting parents through counselling, strengthening families and early recognition of childhood adversity, offer the promise of long-term psychological well-being. In the Kerala social work context, this evidence underscores the importance of moving beyond individual-level models and adopting broader strategies that address family systems, intergenerational distress and patterns of emotional exchange within the household.

The present analysis highlights emotional stability as a key mechanism connecting trauma, family discord, early caregiving environments and long-term mental health outcomes. Research spanning psychoanalytic, attachment, developmental and culturally informed perspectives, family relationships emerge as the primary context in which identity formation, emotional regulation and resilience are shaped. Evidence from Kerala further suggests how collectivist family structures can operate as both protective and vulnerability-related systems, particularly in the context of rapid social change and rising mental health concerns. While the work offers a rich theoretical and contextual understanding, it is constrained by dependence on previously published studies, many of which are based on self-report measures and cross-sectional designs. The absence of original empirical data restricts causal inference, and the

region-specific focus may restrict generalizability. Accordingly, future research should focus on longitudinal and mixed-method methodologies, culturally grounded perspectives and intervention-focused studies that examine family-centred and attachment-based practice. In social work and mental health contexts, strengthening emotional stability at the family level continues to be central to effective prevention and treatment efforts.

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