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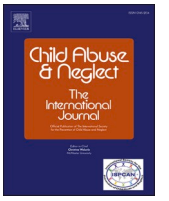

Relational patterns in four girls exposed to domestic violence: A case study

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ABSTRACT

Background: Domestic violence has a significant impact on the psychological development of children, shaping their internal relational models and coping strategies.
Objective: This study aimed to identify and characterize the relational patterns of four school-aged girls exposed to domestic violence and referred for child psychotherapy.
Participants and setting: Four girls aged 9 10, enrolled in a public school located in a socioeconomically disadvantaged area of Medellín, Colombia, participated in the study.
Methods: A qualitative embedded case study design was employed. Data collection included in-depth interviews, the Family Test by Lluís (1978), selected plates from the Children's Apperception Test (CAT), and the Operationalized Psychodynamic Diagnostics (OPD) system. Data were triangulated and analyzed using psychodynamic interpretative criteria.
Results: The participants exhibited insecure and hostile relational patterns, with parental figures perceived as threatening. Disruptions in ego functions such as impulse control, identity, and autonomy were observed. Defensive mechanisms including dissociation, repression, and fantasy were prominent, reflecting an overadaptive response to emotional distress.
Conclusions: Relational dysfunctions in these girls are not solely the result of isolated traumatic events but emerge from persistent exposure to family violence. Brief psychodynamic Psychotherapy proved valuable in identifying unconscious relational dynamics and guiding therapeutic interventions.

1. Introduction

From a psychodynamic perspective, a child's early relationships with family members play a critical role in forming their inner world. These experiences may make it more difficult to establish fundamental relationships in cases of domestic abuse, such as understanding how to deal with reliance, hostility, and associating with parental figures. The Oedipal conflict is a developmental stage in which the child arranges emotional attachments, rivalries, and identifications within the parental triangle, according to classical

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psychodynamic theory.

Early on, this influences the child's perception of both itself and other people. When the family environment is full of anger, anxiety, or instability, it may be harder to address these problems, which can lead to mixed-up object representations, defensive retreat, or antagonistic interaction patterns.

Domestic abuse has a significant impact on children's emotional development, according to numerous research. According to Graham-Bermann and Miller (2013), children who witness intimate partner violence are more likely to experience symptoms of post-traumatic stress disorder; however, these effects can be mitigated by parenting-focused therapies. According to Stein (2012), internalized relational models resulting from early maltreatment are linked to the loss of subjective agency and the acceptance of masochistic self-states. Shaw (2010) then came up with the term "pathological relational narcissistic system" to describe the spread of coercive relational patterns from one generation to the next. Recent studies show that when adults in charge of the home fight violently, it directly hurts the children. The caregivers' past experiences are very important in how this happens (Rita et al., 2024).

All of these studies show that early relationships are formed in situations where there is inequality, emotional neglect, or aggression. These situations create defensive structures that affect how people organize themselves. Alberto Eiguer (2010) contends that family violence arises as a reaction against the evolution of roles and norms within the contemporary family, thereby creating emotionally insecure environments. Violence, as Mark Bragin and Karin Bragin (2010) stress, not only causes direct trauma but also weakens the ability to think and learn.

In this line, Stein (2012), based on interviews with women in long-term abusive relationships, identifies important connections between childhood abuse, the lack of gender-dystonic emotions along an aggressive continuum (gender dysphoria), masochistic states of the self in adulthood, and the loss of agency. She also stresses the importance of integrating dissociated aggression and addressing gender inequalities in psychoanalytic intervention. Shaw (2010) characterizes exposure to parental narcissistic pathology as cumulative relational trauma that hinders the child's intersubjective development, delineating a "pathological relational narcissistic system" perpetuated by coercive projective mechanisms and "complementary moral defense."

From a psychodynamic relational standpoint, relational patterns are characterized as repetitive and enduring modes of interaction that signify the individual's desires, anxieties, and defenses in relation to others (Cierpka, 2008; Hernández, 2002; Tanzilli et al., 2021). When children are young, their early interactions with their key caregivers shape these patterns. These exchanges center on containment ability, maternal function, and mental stability (Pitillas Salvá, 2021; Bleichmar, 2005). Distorted bonding, low self-esteem, and an unorganized developing psychological apparatus (The Ego functions, object representations, and the interpersonal dimension with the external world) might result from these functions not functioning properly.

So, child psychotherapy needs to deal with both symptoms and the way kids think about their relationships. The use of projective tools such as the Family Test (Lluís Font, 1978) and the Children's Apperception Test CAT (Bellak & Bellak, 1959), together with diagnostic systems like OPD (Cierpka, 2008), enables access to unconscious representations that shape the child's relationships with others and the self.

Despite the growing literature on domestic violence and psychological impact, there is a notable gap concerning the clinical application of the Dysfunctional Relational Pattern in the OPD manual to girls who have experienced violence. This study seeks to contribute to understanding that absence by characterizing relational patterns and self-functioning in a group of school-aged girls living in a highly vulnerable area of Medellín, Colombia, who were referred to child psychotherapy due to emotional and behavioral symptoms.

Drawing on clinical work with four girls who had lived in contexts of domestic violence and were referred to child psychotherapy by their school due to behavioral difficulties and emotional distress, and on the qualitative analysis of the collected materials, this study implemented a brief psychotherapy model to examine their relational patterns and their link to basic aspects of psychic functioning. In doing so, it seeks to answer the following research question: What are the characteristics of the relational pattern in girls living in a context of domestic violence?

A psychodynamic perspective was utilized to investigate unconscious relational configurations and internalized object representations that are not entirely accessible through behavioral or solely cognitive methodologies. A psychodynamic framework enables us to comprehend the relational matrix that shapes domestic violence in addition to its outward manifestations. This is because domestic violence affects how people see themselves, how they defend themselves, and how they interact with others. This method is especially appropriate for children, as symbolic expression through play and projection frequently uncovers underlying conflicts and emotional significances.

2. Methods

2.1. Participants

This study followed a qualitative phenomenological-comprehensive approach (Castillo Sanguino, 2020), using an embedded case study design in which the unit of analysis was the relational pattern across multiple cases (Urra Medina et al., 2014). The sample consisted of 10 to 15 children of both sexes between 9 and 10 years of age, but it was gradually reduced according to adherence to the psychological counseling; these children were enrolled in a public coeducational school with a population of 1.969 students, located in a socially vulnerable neighborhood in Medellín, Colombia, named Santo Domingo Savio, classified as belonging to a low socioeconomic stratum. This school was benefiting from a psychosocial support program.

Violence against children and teens is a serious issue in Colombia. Reports from the Instituto Nacional de Medicina Legal y Ciencias Forenses show that in 2024, there were 6197 cases of violence against minors across the country. On the other hand, 11,157 were

related to family violence, while many more involved personal violence and sexual abuse (Instituto Nacional de Medicina Legal y Ciencias Forenses, 2024). Large cities like Medellín have had numerous examples. These figures demonstrate that domestic violence continues to occur, which makes it even more crucial to understand how these events impact children's relationships and mental development.

We chose participants based on the following criteria: (1) they had been victims of one or more crimes; (2) they were currently enrolled in school; (3) they had written permission from a parent or legal guardian; (4) they did not have a cognitive deficit diagnosis; (5) they had been referred to child psychotherapy because of behavioral and emotional problems in a domestic violence setting; and (6) they agreed to participate, with their legal guardian's informed consent. In some cases, the information obtained was validated with mothers.

Finally, special ethical care was taken due to the sensitive nature of domestic violence and the involvement of minors. We obtained informed consent from legal guardians and sought assent from the children. Participants were told that the clinical material created during therapy was helpful on its own and could also be used for research. We strictly maintained confidentiality and anonymization procedures. Participation was voluntary. and families were assured that receiving therapeutic care was not dependent on taking part in the research.

2.2. Family system of the four girls in the study

2.2.1. CASE H

The family system is single-parent, consisting of the mother, a 17-year-old sister, and a 15-year-old brother. Additionally, she lives with her maternal grandmother with whom her mother has a hostile relationship. The father was never present in the upbringing. The minor has a violent relationship with her mother.

2.2.2. CASE E

Nuclear family consisting of the father, the mother, a 14-year-old sister, and a 17-year-old brother with whom the younger sister has a good relationship. Both parents have a history of all kinds of violent relationships within the family, including death threats from the father toward the mother.

2.2.3. CASE B

Reconstituted family consisting of the stepfather, the mother, and a sister of years old. The father figure, when present, exercised violence toward the mother, causing visible traumatic effects in the younger one's rejection of the biological father.

2.2.4. CASE A

Blended family, composed of the stepfather and the mother. The minor has 6 siblings who do not live with the mother. The minor has a tense and hostile relationship with the mother. She expresses having an adequate relationship with her stepfather. During the time spent with the father, she recounts various types of physical violence that the minor clearly remembers.

3. Materials

Data collection involved open clinical interviews conducted within the framework of a brief psychotherapy intervention, as well as the application of two psychotechnical projective instruments.

3.1. The first instrument: the Family Test

Developed by Porot (1952) and adapted by Louis Corman (1978), based on free drawing. This clinical tool explores the child's subjective perception of family relationships, their position within the family system, and the emotional quality of these bonds.

3.2. The second instrument: the Children's Apperception Test CAT

In the study, we used specifically plates 1, 2, 3, and 7 by Bellak and Bellak (1959), analyzed following Murray (2014) interpretive protocol. The test aimed to explore parental object representations and underlying conflicts in the child-parent relationship, such as oral themes, sibling rivalry, identification, representation of parental figures, expressions of fear, aggression, and anxiety.

3.3. OPD-II: Operationalized Psychodynamic Diagnostic System

To analyze the relational patterns, the Operationalized Psychodynamic Diagnostic System OPD developed by Manfred Cierpka (2008) was employed. This identifies the patient's scenic-interactional relational dynamics and experiential perspectives through two complementary viewpoints: (A) how the patient repeatedly experiences significant others and reacts to them; and (B) how others including the evaluator experience and respond to the patient's relational offers, both conscious and unconscious. Given the age of the girls, the conceptualization of the relational pattern described in the OPD manual is observable in the narrative and behavior of the minors. For this reason, the manual was applicable.

The OPD further enables a dynamic relational formulation, detailing repetitive experiences toward others, the patient's reactions,

the (unconscious) relational offer, the responses unconsciously induced, and the patient's lived experience in relation to those responses. In addition, the manual incorporates presence absence and intensity scales for each descriptor analyzed, allowing for a systematic assessment of the observed relational themes.

4. Procedure

The process included short psychotherapy sessions that used the brief psychotherapy model and continued until the data were full. During these sessions, the psychotechnical projective tests were given and scored, and the results were combined with the stories from clinical interviews. The mothers of the four girls were also asked to confirm the results. The data was then sorted and examined using the OPD manual, allowing us to fully view each person's relationship structure.

Each participant and their legal guardian gave their complete consent. Ethical principles, including the freedom to quit at any moment, voluntary participation, and privacy, were pledged to be upheld. Permission to record audio when necessary was also included. The regulations governing the practice of psychology in Colombia are established by Law 1090 of 2006. Every step adhered to these guidelines. The data gathered was only utilized for educational and scientific reasons.

To triangulate the data, we employed three distinct sources: (1) projective material from the CAT and Family Test; (2) clinical narratives from psychotherapy sessions; and (3) structural analysis using the Dysfunctional Relational Pattern in the OPD manual. The complexity and coherence of the interpretations were enhanced by this triangulation, which allowed related motifs to be cross-checked across symbolic creations, verbal reports, and diagnostic formulations.

Instead of favoring one instrument, relational patterns were deduced from the convergence of recurring dynamics observed across various methods.

5. Results

The results presented in the study of the four girls, who have experienced domestic violence, are shown in three stages, beginning with the analysis of the Family Test, followed by the findings from the CAT, and concluding with the analysis of self-structure characteristics obtained during the brief psychotherapy sessions and open-ended interviews for the four cases, as shown below (Table 1).

Regarding the graphic plane, the direction of the drawings indicated a progressive trend, with no signs of regression. Two participants used broad strokes, suggesting vitality, and two showed firm lines. Three used the upper part of the page, implying imagination and idealization; one used the lower section, indicating possible depressive states.

The formal structure showed a predominance of straight lines and angles in all participants, suggesting submission to rules and inhibited spontaneity. This was complemented by stereotypical, static drawings. In terms of content, all participants used denial as a primary defense to resolve anxiety and hostility toward the parental figure associated with violence a dynamic later confirmed in follow-up sessions.

Superego anxiety was observed in two participants as fear of threatening figures: one omitted the violent father, and another drew the violent mother last and smaller than the other figures. In two others, guilt manifested in the omission of themselves in the drawing, perhaps a form of punishment for harboring hostile feelings toward abusive parents.

Table 1
Summary of family test results.

Analytical dimension Response analysis Below is the translation maintaining the original table structure:	
Levels of analysis	Analysis of responses
Graphic level	In two of the patients, vital expression and expansiveness are observed; in the other two, there is inhibition of vital expression. All four show a tendency to withdraw into themselves, as well as inhibition of tensions and drives. Likewise, there is a loss of spontaneity and dominance of rules.
Use of the page	In three of the patients, use of the upper section of the page is observed, suggesting imagination and idealization. In all four patients, regressive tendencies are observed; only one uses the lower section of the page, which may suggest depressive states.
Formal structure of the group	In three of the patients, a rational-type formal group structure is observed, suggesting inhibited spontaneity and submission to rules; only one patient shows a sensory-type drawing, although combined with rational tendencies, suggesting inhibition of spontaneity but with the possibility of releasing tensions.
Content level	In all four patients, the defensive use of denial is observed to manage the anxiety generated by the violent situation. In three of the patients, a devaluation of parental figures protagonists of violent situations is observed; only one patient shows guilt regarding hostile feelings toward the violent and abusive parental object.
Projection level	In general, in all four patients, the level of projection in the drawings is superficial, although difficulty in recognizing the conflictive situation within the family environment is observed, expressed in the omission or distortion of certain characters.
Psychoanalytic interpretation	The level of projection is superficial insofar as there is no real differentiation between the real and the drawn family. In two of the patients, it is observed that they devalue themselves, which is expressed in the distortion or omission of themselves. In the other two girls, there is devaluation of other family figures such as the grandmother or father. This leads to the conclusion that two of the patients present superego anxiety derived from feelings of guilt originating in the negative feelings that characterize the bond with these figures. In some cases where there is no omission, there is distortion in the representation of the figure, perhaps as an attempt to diminish in fantasy the aggressive power of the object, without destroying it due to guilt.

None of the tests showed deep levels of projection. However, two participants omitted the family system, and the other two both omitted and distorted real representations of the parental figure. Denial of the real conflict appeared in the attitude and arrangement of the drawing scene, demonstrating a significant level of projection even if superficial also evident in their narratives.

In all four cases, there was a consistent devaluation of the abusive figures, appearing smaller, and an identification with the protective figure, shown first in the projected order. Narratives and drawings clearly showed that domestic violence caused deep internal distress, with denial serving as the main and basic coping mechanism for the difference between their real family and the family they internalized or fantasized (Fig. 1).

The following table summarizes the results from the Children's Apperception Test (CAT), based on the selected plates and projected aspects observed in the narratives (Table 2).

The CAT showed no major problems with orality toward parents, sibling rivalry, or trouble with frustration, satisfaction, or feeding. Two girls exhibited motivations focused on nurturing, caregiving, and fulfillment, whereas one demonstrated a propensity for oversight and surveillance. In terms of environmental forces, two participants saw affiliation and unity as being based on feeding, while another saw emotional harshness and rigidity. One story didn't have a clear ending, and the other showed a lot of inhibition, with parents taking on supervisory roles.

Some stories had endings that weren't clear, characters who couldn't act, and one story had a happy ending. Thematic elements encompassed care, unity, solitude, and emotional detachment. Interests centered on caregiving and control, frequently devoid of emotional warmth. These elements were cross-referenced with additional findings for a comprehensive understanding (Table 3).

There were five sessions in the therapy process, and the CAT was given in the second session. With the legal guardians' informed consent, all sessions were audio-recorded and transcribed. The material suggested that participants had low self-esteem, which often came from their parents' hostile behavior, which probably made them feel like they didn't belong or exist.

“A lot of pain… I feel sad, pain,” responded Participant E when asked how she felt during her parents' arguments. Because “he didn't love me… when my mom was pregnant with me… and when I grew up, then he did,” participant A stated she wouldn't take her father on a family vacation.

These quotes show how self-devaluation is exacerbated by early rejection.

Early separation from the mother-child dyad seems to have been caused by mothers' inability to act as “good enough objects” (Winnicott), endangering the girls' fundamental emotional stability. The most common protection strategies in these familial violence situations were dissociation, imagination, and repression. When asked, “Who is the least good person?” participant H said, “My mom… because…” (pause) I don't know… then responded, “because she pulls my hair when I don't obey.”

These anecdotes imply shortcomings in the maternal role, which may have their roots in the mothers' own painful pasts. Participant A's mother, for instance, stated: “They gave me away to another woman. I never said ‘I love you’ to anyone because no one ever said it to me.” It became evident from the interviews that neither the girls nor their parents found parenting to be rewarding, which interfered with the object relations necessary for normal self-development. Important aspects of the girls' internalized images were parental ambivalence, rejection, and hostility.

Anxiety, sobbing, melancholy, female rivalry, and behavioral issues were prevalent symptoms in all of the cases. Significant interpersonal difficulties occurred in three of the instances; pathological theft from the mother occurred in one; school-related disciplinary troubles occurred in another; and low academic performance occurred in one.

In an attempt to find emotional compensation, these disordered actions could be symbolic demands made of the disappointing parental objects. Following a triangulation of the data from the Dysfunctional Relational Pattern in the OPD manual, in-depth interviews, and projective tests, it was determined that the girls had experienced two types of violence: one in which they were victims and another in which violence was used as a tactic to maintain a false sense of stability in a dysfunctional family system.

In terms of ego functions, there were issues with impulse control, self-identity, self-esteem, and autonomous function. Impulse control and frustration tolerance were clearly lacking, particularly when it came to thievery as a symbolic forceful release. There were no significant instances of misbehavior.

Stressful circumstances negatively impacted participants' self-perceptions, resulting in feelings of inadequacy or unworthiness. Academic performance showed that cognitive processes were impacted in one case, although this was not generally applicable. Guilt and internalized animosity toward parental figures affected superego functioning, which ranged from labile to severe.

Overall, the ongoing dynamics of domestic violence inside the family were more responsible for the emotional trauma than individual violent incidents.

It is significant to notice that many facets of the minors' psychological lives are revealed in the findings description. When taken as a whole, these insights enable us to comprehend the traits of their relational patterns and how these patterns represent the particular ways in which the minors engage with their surroundings. This comprehension also implies a method for operationalizing subjective components in order to interpret observed behaviors.

The research topic was answered by uncovering patterns of relationships that happened over and over again in different circumstances. Through cross-case analysis, the study found a pattern that included self-devaluation, fear of losing the object's affection, protective distancing, ambivalent perceptions of parental figures, and the use of antagonism or submission to preserve relational bonds. The essential features of the relational pattern in this situation are represented by these components, which are consistently seen across instruments and therapeutic interactions.

6. Discussion

The study's findings show that the participants have a devalued self, which is indicative of early psychic structuring errors in the

Lista de ítems del eje «Relación»

El paciente vivencia repetidamente que él respecto a los otros… Los otros (también el evaluador), vivencia(n) repetidamente que el paciente…	Temas relacionales	El paciente vivencia repetidamente que los otros… Los otros (también el evaluador) se vivencian repetidamente respecto al paciente, que…
O □ 1. les da demasiados espacios de libertad/deja hacer solo	conceder libertad	O □ 1. le dan demasiada libertad, lo dejan hacer
O □ 2. los dirige poco, evita influir	dirigir a otros	O □ 2. lo dirigen poco, evitan influir
O □ 3. los admira, idealiza	valorar a otros	O □ 3. lo admiran, idealizan
O □ 4. se disculpa, evita reproches	responsabilizar a otros	O □ 4. lo disculpan, evitan reprocharlo
O □ 5. los ahoga con su afecto	demostrar afecto	O □ 5. lo ahogan con su afecto
O □ 6. evita agresiones y armoniza,	demostrar agresividad	O □ 6. evitan agredirlo y armonizan
O □ 7. los cuida demasiado/se preocupa demasiado,	cuidar a otros	O □ 7. se preocupan demasiado por él y cuidan demasiado
O □ 8. los asedia, importuna sin tacto	establecer contacto	O □ 8. lo asedian, importunan sin tacto
O □ 9. les da pocos espacios de libertad, se entromete	conceder libertad	O □ 9. no le dejan espacios de libertad, se entrometen
O □ 10. los domina, controla/exige	dirigir a otros	O □ 10. lo dominan, controlan/exigen
O □ 11. los descalifica, desvaloriza, avergüenza	valorar a otros	O □ 11. lo descalifican, desvalorizan, avergüenzan
O □ 12. les hace reproches/culpa	responsabilizar a otros	O □ 12. le hacen reproches/culpan
O □ 13. les retira el afecto	demostrar afecto	O □ 13. le retiran el afecto
O □ 14. los ataca/daña	demostrar agresividad	O □ 14. lo atacan/dañan
O □ 15 los descuida/abandona	cuidar a otros	O □ 15 lo descuidan, abandonan
O □ 16. los ignora, desatiende	establecer contacto	O □ 16. lo ignoran, desatienden
O □ 17. exige espacios de libertad y autonomía	desenvolverse	O □ 17. exigen espacios de libertad y autonomía
O □ 18. porfía, se opone	adaptarse	O □ 18. porfían, se oponen
O □ 19. se enaltece, se coloca en el centro de interés	valorarse	O □ 19. se enaltecen, se colocan en el centro de interés
O □ 20. rechaza toda culpa	reconocer la culpa	O □ 20. rechazan toda culpa
O □ 21. se pierde a sí mismo, se confunde cuando le demuestran afecto	abrirse al afecto	O □ 21. se pierden a sí mismos, se confunden cuando les demuestra afecto
O □ 22. se protege poco, se expone al peligro	protegerse	O □ 22. se protegen poco de él, se exponen al peligro
O □ 23. se apoya, se aferra	apoyarse	O □ 23. se apoyan en él, se aferran
O □ 24. no pone límites, permite demasiada cercanía	permitir contacto	O □ 24. no ponen límites, permiten demasiada cercanía
O □ 25. evita la autonomía, busca ser guiado	desenvolverse	O □ 25. evitan la autonomía, buscan ser guiados
O □ 26. se sobreadapta/se contiene/desiste	adaptarse	O □ 26. se sobreadaptan/se contienen/desisten
O □ 27. se descalifica, se desvaloriza	valorarse	O □ 27. se descalifican, se desvalorizan
O □ 28. se culpa a sí mismo	reconocer la culpa	O □ 28. se culpan a sí mismos
O □ 29. se cierra/huye cuando otros le demuestran afecto	abrirse al afecto	O □ 29. se cierran/huyen cuando les demuestran afecto
O □ 30. se protege mucho de ataques, está alerta	protegerse	O □ 30. se protegen mucho de sus ataques, están alerta
O □ 31. se apoya poco, se muestra poco necesitado	apoyarse	O □ 31. se apoyan poco, se muestran poco necesitados
O □ 32. se retira, se cierra, se va	permitir contacto	O □ 32. se retiran, se cierran, se van

Fig. 1. Dysfunctional relational pattern template.

Table 2
Summary of the Children's Apperception Test (CAT).

Categories of analysis	Plate 1	Plate 2	Plate 3	Plate 7
Motives, tendencies, and feelings of the protagonist	The motivation refers to caregiving and the nurturing function.	They refer to the conflict and rivalry of the parents within the family environment.	The protagonist's tendencies are aggressive, hostile, and destructive toward others (children).	The tendency is to destroy and swallow the other.
Forces of the protagonist's environment	The forces and motivations of the environment refer to emotional affiliation but with some degree of tension.	They are related to rivalry, hostility, and parental conflict.	The forces are aggression, domination, and destructive tendencies.	Fear, danger, threat, and death.
Results, outcome	The final result is passively resolved, simply oriented toward growing and being with others.	It is the reconciliation of the conflicting forces (parents) and, therefore, of the characters involved in the conflict.	It is the annihilation of the weakest.	It is the annihilation and destruction of the weak, unable to defend themselves.
Themes	They are related to motherhood, caregiving, loneliness, and emotional distancing.	The themes present are related to parental rivalry and hostility between the parents. Fear of aggression and punishment.	Aggressiveness, destruction, and power over others.	Aggressiveness, destruction, defenselessness, and annihilation.
Interests	The protagonist's interest refers to maternal care, supervision without emotional tone in that exchange, like an empty bond.	The protagonist's interest is related to recognition, to being visible to others.	To show that you have power over other people.	Power, control, and killing the other person.

Table 3
Summary of self-structure characteristics.

Characteristics	Aspects of self-functioning
Symptoms	Anxiety, Stealing, Sadness, Crying Female rivalry Persecution, Depression Indiscipline, Aggression toward peers Low academic performance
Levels of anxiety	Fear of losing the love of the object
Defensive resources	Fantasizing, Repression, Dissociation Undoing
Superego	Labile, Normative, Severe
Ego functions	Self-identity and self-esteem, as well as controlling and regulating impulses Cognitive processes that work on their own.

adult's role as a self-object. Kohut (1977) asserts that early experiences of parental validation and mirroring shape the self. The girls in this study were unable to create a parental ideal with which to positively identify because the moms (and occasionally the violent environment enabled by fathers) were unable to fulfill the holding and idealizing functions. Rather, they absorbed weak, undervalued, and emotionally deficient images (Fonagy & Target, 2002).

It is important to clarify that the biological parents did not play a significant role in the process, as some live with stepfathers or only with their mothers, meaning that the biological parents are not the current caregivers of the minors.

One commonality across all the cases was the existence of interpersonal issues, particularly with peers and superiors. Dysfunctional relational patterns that were previously formed in the household are replicated in these interactions, which are often marked by conflict and emotional stress. Due to early dynamics of rejection and devaluation experienced with main caregivers, some individuals showed significant rivalry with peers of the same gender (Ghent, 1989; Willock, 1986).

According to psychodynamic theory, a parent's capacity to regulate their own emotions is crucial to their child's development (Bleichmar, 2005; Hoffman et al., 2015). Relational patterns characterized by distrust, animosity, or emotional retreat result when parents are unable to recognize and meet their children's emotional needs. As a result, the females transferred these behaviors to school, where they perceived interactions with teachers or peers as intimidating or invalidating. These impressions caused defensive emotional responses, which in turn strengthened their sense of rejection or isolation (Klein, 1996).

There was no discernible pattern of academic performance impairment linked to exposure to domestic violence. There was only one person who had to repeat a grade due to low grades. The detrimental effects of domestic and social violence on learning processes, particularly with regard to memory, attention, and mentalization, have been highlighted by studies such as Bragin and Bragin (2010). However, because of the small sample size and individual variations, the current study is unable to establish a generalized relationship (Hofmann & Weinberger, 2013; Siegel, 2020).

The worry of losing the affection of parental items was another issue that frequently surfaced, and it was strongly associated with emotional insecurity. Growing up in a dangerous and emotionally unstable setting causes this type of anxiety (Cierpka, 2008). To cope with their suffering, the girls employed defensive techniques such dissociation, repression, and imagination (Lyons-Ruth et al., 2013;

Şar, 2020).

Dissociation happened a lot when the father or mother was seen as violent. The participants oscillated between viewing these figures as either protective or threatening, signifying a disjointed internal structure of relational representations.

According to the OPD manual's definition of conflict, there are three conflicts in the case of the girls in the study: (1) the desire for protection versus autonomy; (2) the conflict of self-worth; and (3) the Oedipal conflict.

In the first fight, the girls really wanted their parents to take care of them and keep them safe, but at the same time, they wanted to be independent to protect themselves from emotional harm. These conflicting needs were apparent in therapeutic sessions, especially in accounts of unfulfilled emotional requirements and actions employed to preserve relational connections, even when they were aggressive or hazardous.

The girls' attempts to be seen and heard by their parents were a big part of the self-worth conflict. But people often didn't care, criticized them, or turned them down, which made them defensive and made them feel like they were to blame, angry, and emotionally withdrawn. People reacted in the same way to these responses, which made them feel even more unloved or unappreciated. This dysfunctional relationship perpetuates cycles of devaluation and exclusion, which lowers self-esteem and results in symptoms like anger, anxiety, or behavioral issues.

In one instance, the traditional parent-child relationship (father-mother-daughter) was transferred to a school, making the Oedipal conflict extremely evident. In a new triangle between a teacher and a classmate, the participant pictured themselves as the third person excluded. Her tale demonstrated that she craved affection and attention, but she was also upset because no one paid attention to her. This recreation of the initial exclusion demonstrated that issues with relationship affirmation and self-esteem persist in the classroom.

These findings demonstrate that the participants' relationships are intricate strategies for adjusting to their harsh upbringing. Domestic abuse is a relational situation that alters people's thoughts and emotions rather than a single devastating incident. It always affects the child's superego development, ego integration, and defense mechanisms, causing them to feel uneasy, furious, and self-conscious. Therefore, the child's social interactions are an integral part of who they are and not only an indication of a problem. In addition to being indicators of unresolved conflict, symptoms also serve as a means of maintaining connections that, despite their harmful nature, provide a tenuous sense of stability that results from growing up in a dangerous and conflict-filled home or environment.

The theoretical assertions in the introduction are directly supported by these findings. The girls' tales and projective works, which demonstrated relationship patterns in which attachment links remain strong via submission, antagonism, or emotional withdrawal, aligned with Stein's (2012) concept of losing agency and Shaw's (2010) concept of the pathological relational narcissistic system. Domestic violence was a structural relational matrix that altered people's self-perception and self-organization, not only a sequence of isolated painful incidents. Moreover, by employing the OPD manual to this particular population, the current study aids in bridging the clinical gap recognized in the literature, providing an operationalized insight into the organization of unconscious relational dynamics in girls subjected to ongoing family violence.

From a clinical perspective, these findings reaffirm the importance of understanding symptoms as active relational configurations. Therapeutic interventions ought to concentrate on reconfiguring the therapeutic alliance as a secure relational environment, facilitating the child's development of novel internal representations of self and others that are less intimidating, more cohesive, and emotionally supportive (Price et al., 2004; Toth & Gravener, 2012).

In this sense, the present study points to parental responsibility in establishing dysfunctional patterns in children, which is why care and intervention programs should be aimed at protecting children, but also at improving the relational offer that parents make to their children in their upbringing.

In this case, the relational pattern is the main way to look at how domestic violence affects people's mental health. The OPD-based analysis shows that these patterns are not fixed traits, but flexible arrangements that family systems create together and show up in different relationships. This point of view changes the focus from individual symptoms to the processes that shape relationships, which helps with diagnosis and therapy.

7. Conclusions

The relationship patterns of girls who have experienced domestic abuse were described in this study, demonstrating how these events leave a lasting impact on their relationships and have a significant impact on their mental development. The folks who took part reported that the family environment was frightening, emotionally unpredictable, and lacking in structure. This dynamic is a recurring pattern in the family system that affects both parents and children, hence sustaining hostile interactions that frequently arise in a variety of settings, including educational institutions. The participants exhibit a relational pattern marked by emotional disengagement, defensive animosity, and conflicting feelings toward others. This implies that the girls' interactions with peers and authority figures are impacted by their internalization of violent family dynamics.

Because they lacked self-object supplies and were in relationships that did not provide them with emotional support and care, the most evident result was harm to their self-identity and self-esteem. The conclusion is that relational violence, which is the only kind of interaction through which the girls believe they are recognized or acknowledged by their parental figures, is what causes emotional injury rather than isolated violent acts.

Peer rivalry, confrontation with authoritative people, and stealing are examples of dysfunctional behaviors that may be seen as adaptive reactions to this deeply ingrained social pattern. The way people interacted with one another certainly affected their self-development and ego functions, particularly impulse control, identity, self-esteem, and independence, even though there was no clear correlation between domestic violence and poor academic achievement. Dissociation, suppression, and imagination are examples

of defensive mechanisms that have been recognized as coping methods for the anxiety caused by a dangerous home situation.

There was no clear structural profile linked to domestic violence in terms of superego functioning, indicating that this variable does not directly influence its composition. Other issues that influenced the girls' interactions with others included low self-esteem, unfulfilled care needs, and feeling inadequate in the eyes of significant others.

Finally, this study demonstrates the value of brief psychodynamic therapy that emphasizes parent-child connections for diagnosis and treatment, particularly in cases of extreme weakness. To improve the comprehension of the child's immediate environment and boost therapy efficacy, caregivers must be included in the clinical approach.

For future studies, this comprehensive view of the phenomenon may provide new insights into understanding the psychological consequences for minors as survivors of hostile and threatening environments.

7.1. Implications and limitations

There are numerous implications for theory, practice, techniques, and research from this study. The results potentially show how exposure to domestic abuse throughout childhood can be internalized as long-lasting relationship patterns that affect one's self and other views. The results highlight the need for therapeutic approaches that concentrate on parent-child relationships and family interactions by showing that disruptive or conflictual behaviors in children exposed to violence should be examined through the framework of relational dynamics and emotional instability. For a thorough examination of relational patterns, the study highlights the importance of combining clinical data, projective approaches, and psychodynamic perspectives like the OPD manual. In the end, the results highlight the need for more studies using larger and more diverse samples as well as longitudinal approaches that look into the development of relational patterns and the protective factors that might improve resilience in children exposed to domestic violence.

Despite these modifications, there are still certain issues with the current study that should be brought to light. One major issue in society that negatively impacts children's mental health is domestic violence. However, there are a few issues with this study that should be noted. Although the small sample size (four cases) limits the findings' generalizability, it made it possible to fully understand the participants' subjective experiences.

CRediT authorship contribution statement

Robinsson Cardona Cano: Supervision, Methodology, Conceptualization. **Tomás Jaime Quevedo Zapata:** Writing – original draft, Validation, Investigation, Formal analysis, Data curation, Conceptualization. **Blanca Nubia Patiño Salazar:** Validation, Supervision, Formal analysis. **Jerri Alejandro López-Sánchez:** Writing – review & editing, Writing – original draft, Validation, Investigation, Conceptualization.

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Declaration of competing interest

The author declares no conflicts of interest.

Data availability

Data will be made available on request.

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