Proceedings of ICEIPI 2026 Symposium: Inclusive Education, Cultural Transformation, and the Ethical Dimensions of Learning
DOI: 10.54254/2753-7048/2026.LD34078

Inverted Trauma Bonding: A Theoretical Discussion of a Post-Traumatic Phenomenon

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Abstract. This paper revisits the established framework of trauma bonding to examine a phenomenon that remains relatively underexplored in existing literature: when an abusive relationship becomes unstable, or when external circumstances no longer sustain a similar traumatic relational pattern, trauma bonding does not necessarily dissolve. Instead, it may transform into an internalized structure form within the subject. Previous studies have largely explained trauma bonding through power imbalance, intermittent reinforcement, and related relational or neuropsychological mechanisms. Yet clinical observation and broader social experience also suggest that certain bonding patterns may continue even in the absence of a stable abusive relationship. Such persistence appears to point toward a more internal psychic organization. Drawing on psychoanalytic theory, particularly Freud's later metapsychology and object relations perspectives, this paper proposes the concept of inverted trauma bonding as a post-traumatic phenomenon. The concept refers to a structural reversal in which an originally external traumatic relation, once internalized, begins to reorganize the subject's perception of reality and subsequent relationships from within. In this sense, the subject is no longer bound only to a concrete abuser, but to an internal relational matrix shaped by trauma. The paper argues that trauma may continue to operate as a relatively stable internal structure, modes of attachment, and relational fantasy even after the original abusive bond has weakened or ended. Through this discussion, the study seeks to deepen current understandings of trauma bonding and to broaden psychoanalytic reflections on the afterlife of traumatic relations.

Keywords: Inverted trauma bonding, Post-traumatic phenomenon, Internalization, Identification with aggressor

1. Introduction

Trauma bonding is commonly defined as an emotional attachment formed within abusive relationships, in which the abused person develops a persistent and often insurmountable bond with the abuser through cycles of harm and intermittent repair [1]. This concept has provided an important framework for understanding enduring attachment in contexts such as intimate partner violence, coercive control, and chronic relational abuse. It also illustrates how traumatic experiences may become embedded within the subject's emotional life and relational expectations.

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DOI: 10.54254/2753-7048/2026.LD34078

Existing studies have emphasized several mechanisms involved in trauma bonding, particularly power asymmetry, intermittent reinforcement, fear, attachment, and social isolation [2, 3]. More recent work has further integrated trauma bonding with the context of attachment trauma, dysregulated affect, and disturbances in self-organization. Recent clinical literature has also highlighted how relational trauma may persist across time as internal working models that continue to shape later relationships, even after the original abusive context has ended. These developments have significantly expanded earlier behaviorally oriented mechanism of trauma bonding.

At the same time, certain phenomena remain insufficiently theorized. In clinical settings and in social observation, one may notice subjects whose external abusive relationship has already weakened or ended, yet whose psychic life remains organized by a similar bond. This may appear as continuing emotional preoccupation with the abuser, persistent guilt, compulsive repetition of similar relational patterns, or a pathological need to rescue and protect a new object. In such cases, the bond seems no longer dependent upon the actual presence of the abusive other. Rather, it appears sustained by an internal structure.

This problem invites a return to psychoanalytic thinking on trauma, repetition, and internalization. Since Sigmund Freud's formulation of the compulsion to repeat in Beyond the Pleasure Principle, trauma has been understood not simply as an external event, but also as a psychic reality that returns through repetition when it has not been psychically worked through [4]. At the same time, attachment theory, particularly the work of John Bowlby, has shown that relational bonds have become structurally significant in the formation of internal emotional life [5]. From this perspective, external relationships and internal psychic structures cannot be sharply separated.

On this basis, the present paper proposes that trauma bonding may undergo a structural transformation when the original abusive relation loosens or collapses. To describe this phenomenon, this paper introduces the concept of inverted trauma bonding. This term refers to a form of bonding rooted primarily in internal relational organization rather than ongoing dependence on an external abuser. Through identification, repetition, fantasy, and symbolic reconstruction, the subject continues to reproduce the emotional logic of trauma.

The purpose of this paper is not to offer a closed or comprehensive theoretical model. Rather, it seeks to explore how traumatic relations may acquire persistence within the subject, how they continue to shape affective experience and later relational life, and how psychoanalysis may contribute to understanding the aftereffects of abuse beyond the moment of separation.

2. Existing theoretical frameworks of trauma bonding and their limits

2.1. Classical definitions of trauma bonding and its formation

Trauma bonding generally refers to an attachment bond formed between an abused person and an abuser under circumstances of sustained power imbalance and intermittent reinforcement [1]. Within such relationships, the abused subject often develops a strong sense of loyalty or emotional dependence despite the destructive nature of the bond. This paradox has become central to contemporary clinical and theoretical understandings of abusive attachment.

More broadly, attachment itself plays a foundational role in psychological development. The primary function of attachment lies in the creation of a stable emotional tie with a caregiver through which safety, continuity, and regulation may be secured. From this perspective, trauma bonding may be understood not as the opposite of attachment, but as a pathological deformation of an otherwise necessary relational function [5].

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Existing literature has identified several recurring conditions associated with trauma bonding: external threat, fear, intermittent reward following episodes of abuse, attachment, and social isolation. These factors help explain why subjects may remain psychologically tied to abusive others even when the relationship is consciously experienced as harmful.

At the same time, such conditions do not fully account for every manifestation of trauma bonding. In some relational situations, the abusive figure does not appear as a single stable person, but as a shifting, functional, and displaced presence reproduced through later relationships, fantasies, or internal expectations. In these cases, the subject remains trapped within a compelled relational pattern even when the original bond has altered or disappeared.

For this reason, trauma bonding should not be viewed purely as a behavioral phenomenon. Its deeper significance lies in the long-term shaping of psychic structure, including affect regulation, patterns of attachment, self-representation, and expectations of intimacy [6]. What appears externally as repeated harmful attachment may internally reflect a more enduring and sophisticated internal structural configuration of relational life [5].

The present paper approaches this problem through psychoanalytic and trauma theory to examine a particular post-traumatic transformation of the bond: a form in which the original abusive relation no longer functions primarily from outside but continues through the subject's internal structure.

2.2. Limits of existing accounts: secondary phenomena after the collapse of the external bond

Further inquiry into trauma bonding has often emphasized its addictive quality. Neuropsychological approaches describe the alternation of abuse and reward as a cycle capable of producing physiological dependence through stress systems, arousal pathways, and reward mechanisms. In particular, the dopaminergic logic of incentive salience has been used to explain why subjects may continue to seek emotionally damaging relationships [2]. Empirical studies of relationship dynamics also suggest that intermittent reinforcement deepens attachment because unpredictable reward often intensifies emotional investment. The occasional return of tenderness, remorse, or affection may sustain hope and reinforce the subject's bond to the abuser [1]. Yet such persistence should not be confused with pleasure in any simple sense. The subject often remains because leaving carries its own psychic and practical costs: fear of retaliation, loss of attachment, collapse of meaning, or renewed confrontation with loneliness and helplessness. The cycle of violence and reward repeatedly elicits fundamental needs for survival, recognition, and emotional continuity.

These perspectives make an important contribution to explaining why trauma bonds endure. However, they are less able to account for a further question: why does a relational pattern sometimes persist even after the external abusive relationship has ended? Why does the subject continue to recreate similar bonds, or remain psychically organized around the absent abuser?

From the standpoint of psychic structure, the persistence of trauma bonding suggests that something more than behavioral conditioning is at work. What was once sustained externally may, through internalization, become self-perpetuating. To understand this shift, one must examine not only reinforcement and attachment, but also identification, repetition, unconscious fantasy, and the internal afterlife of trauma itself [6].

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3. A psychoanalytic account of trauma bonding: toward an integrated view

3.1. Repetition compulsion and the death drive

From a psychoanalytic perspective, Sigmund Freud's later concept of the Death Drive (Thanatos) may help explain why abused subjects sometimes turn away from available help and thereby deepen their own isolation. In Freud's earlier formulations, human behavior was largely organized around the pleasure principle: the tendency to seek pleasure and avoid unpleasure. Yet this framework proved insufficient to explain traumatic symptoms after war, as well as the repetitive return of traumatic scene within transference, psychic life, and dream [4].

The introduction of the Death Drive (Thanatos) marked Freud's attempt to confront this paradox. Psychoanalysis thereby moved beyond a simple model of instinctual discharge toward a more complex account of inner conflict, repetition, and destructive tendencies. This shift also broadened the psychoanalytic understanding of trauma by placing external events and internal drives in dynamic relation to one another.

More specifically, traumatic experiences may obstruct the outward investment of libido. Under the combined pressure of external trauma and internal drive conflict, the subject may be forced to create temporary pathways through which blocked psychic energy can be discharged. Identification often serves this function. When such identifications become fixed and enduring, they may 'crystallize' into pathological internal structures [4].

On this basis, the subject may become governed by repetition compulsion. Through repeated enactments, the traumatic scene is recreated in later relationships and emotional life. These repetitions may constitute an unconscious attempt to bind unavoidable injury, to transform passive suffering into active form, or to inscribe trauma within a bearable and viable psychic order. Yet the process often fails. Instead of resolving trauma, repetition may strengthen the subject's sense of victimization and reinforce rigid, pathologically organized forms of self-experience.

What cannot be psychically relinquished continues to return in symptoms. The inability to cease repetition may arise when frustrated libido merges with secondary aggression and turns back upon the self. In this sense, the abused subject may unconsciously remain loyal to destructive bonds, not because they are desired in any ordinary sense, but because they have become psychically tied to the logic of return, stillness, and the wish to end conflict through submission.

3.2. The psychoanalytic meaning of intermittent reinforcement

At the same time, the abuser's occasional gestures of care may reactivate Eros. Tenderness after cruelty, apology after humiliation, or sudden intimacy after emotional distance may motivate hope and restore attachment. Thus, the subject becomes suspended within the relationship: unable either to destroy the self completely or to leave the bond altogether.

The power of intermittent reinforcement lies not merely in behavioral reward, but in its capacity to mobilize unconscious fantasies of repair. Each moment of kindness may be experienced as proof that the loving object still exists and can finally be recovered. The subject therefore remains attached not only to the actual abuser, but also to the fantasy of the transformation of abuser's images, or of the relationship's eventual absolution.

In this way, the abusive relationship often contains a split object world: one part cruel and persecutory, another part idealized and longed for. The alternation between these positions deepens psychic confusion and strengthens attachment.

DOI: 10.54254/2753-7048/2026.LD34078

Research has also suggested that relational trauma may involve internal splitting. One part of the self identifies with the victimized position, while another identifies with the aggressor. Through this process—classically described by Anna Freud as identification with the aggressor—the abusive relationship may be reproduced within the psyche itself [7, 8].

In ordinary social life, these two positions are interactive, rather than independent: A subject may consciously experience themselves as injured while unconsciously adopting the attitudes, judgments, or modes of domination associated with the aggressor. Identification with victimhood may contain a hidden rationalization of aggression, while identification with the aggressor may reshape how one's own suffering is remembered and interpreted. Trauma bonding therefore persists not only between people, but also as an internal relation between split psychic positions [8].

3.3. Two modes of identification: identification with the aggressor and the construction of the injured self

Based on the preceding discussion, different forms of identification should be reconsidered. The first and more familiar path is identification with the aggressor. In many traumatic relationships, this movement may be difficult to avoid. This is apprehended through its alternative: if the subject were to direct aggression openly toward the abusive other, the likely consequence could be further danger, retaliation, or psychic collapse. Under such conditions, direct opposition may become experienced as impossible.

Identification therefore offers another route. As one of the earliest forms of emotional bonding, it may reappear under conditions of regression, when more differentiated forms of desire or agency have been damaged. In this context, identification functions as a defense against destruction. If aggression were to fall entirely upon the self, psychic disintegration might follow. By identifying with the aggressor, the subject gives form and location to otherwise overwhelming destructive forces.

Such identification may also universalize what was originally a singular traumatic experience. The subject begins to treat violence, humiliation, or domination as though they were natural features of all relationships. In phenomenological terms, this may soften the immediacy of traumatic pain; in dynamic terms, it may render the traumatic organization more stable and less visible.

Recent empirical work has similarly suggested that trauma bonding is not maintained by violence alone. Processes such as empathy may mediate attachment to the abusive other. In particular, cognitive empathy may lead the subject to understand the abuser from within the abuser's own perspective, thereby strengthening rationalization, self-blame, and continued attachment [9].

A second mode of identification may be directed not toward the aggressor, but toward an absent or missing figure. The precise origin of this figure need not be determined here. It may derive from fragmented memories, idealized images, unmet developmental needs, or the negative outline produced by the lack of what aggressor fails to provide What matters is that the subject posits a vacant place: an imagined figure of rescue, justice, tenderness, or protection.

Yet this path is often difficult to sustain within traumatic conditions. In the closed dyad of abuser and abused subject, no reliable third position may be available. There is no substitute object, no effective symbolic support, and often no realistic avenue of resistance. For this reason, identification with a missing or protective figure may remain weak, repressed, or only partially formed.

Nevertheless, when the original external bond begins to loosen, this second mode may re-emerge. Even after the abusive relationship, trauma bonding does not necessarily disappear; rather, it may return in altered form within the subject's inner configuration. What was once a suppressed wish for

DOI: 10.54254/2753-7048/2026.LD34078

rescue or transformation may become newly active and seek expression through later relationships, moral projects, or compulsive forms of care.

For this reason, the internal life of trauma cannot be reduced to a simple opposition between victim and aggressor. Alongside identification with the aggressor, there may persist another line of desire: the wish to restore, save, or redeem what was once abandoned. It is precisely this reactivated and distorted movement that becomes central to the phenomenon described here as inverted trauma bonding.

4. Inverted trauma bonding: a theoretical model of a post-traumatic phenomenon

4.1. From dependence on an external relationship to the operation of internal structure

Based on the foregoing discussion of traumatic internalization, the present paper proposes a structural transformation that may occur when the original abusive bond changes or weakens. Classical accounts of trauma bonding primarily describe a subject's attachment to a concrete external object—the abusive other—upon whom emotional life becomes organized. The bond is sustained through fear, intermittent reward, hope, and the subject's continued attachment to the relationship.

Yet when this external object is no longer an active and enduring presence—through separation, death, geographical distance, or other forms of rupture—the internalized traumatic structure does not necessarily disappear. In some cases, it undergoes a reversal.

The term inverted trauma bonding refers to a post-traumatic condition in which the original configuration of external abuse and internal drive activation is transformed into a mode of functioning driven largely from within. Rather than remaining attached only to a particular abuser, the subject's internal traumatic organization begins to seek, select, or construct objects in the external world that can sustain its pre-existing psychic logic.

The subject is therefore no longer merely the passive bearer of a bond but becomes an active participant in its unconscious reproduction. This activity should not be confused with conscious choice; it is structured repetition, in which the psyche searches for forms through which an earlier traumatic organization may continue to operate.

One characteristic expression of this inverted bond may be the fantasy of pathological rescue. The subject becomes intensely attached to an object imagined as vulnerable, endangered, damaged, or in need of rescue. Through caring for, protecting, or sacrificing for this object, the subject appears to occupy the position of rescuer rather than victim.

At the level of manifest behavior, this may seem opposite to the original abusive position. Yet at the level of psychic structure, the same traumatic logic persists. The subject remains bound to suffering, asymmetry, urgency, and compulsive emotional investment. The external roles have changed, but the underlying psychic organization remains intact.

In this sense, inverted trauma bonding represents not recovery from trauma, but its reorganization. The subject reverses positions in fantasy while continuing to inhabit the same emotional architecture.

4.2. Traumatic environment: failure of the public symbolic order and isolation

Environmental conditions also play a decisive role in the formation and persistence of trauma bonds. Among these conditions, isolation is especially important. Trauma bonding is not limited to relationships of two individuals in a confined and isolated setting. It may also develop within

DOI: 10.54254/2753-7048/2026.LD34078

ordinary intimate relationships, family structures, and social environments where formal social contact exists, but meaningful protection is absent.

Consider a subject who has long suffered violence from an intimate partner. They may speak with friends or relatives, and others may tell her that the abuser's behavior is unacceptable or punishable, or that she should leave. Yet despite such advice, she may remain unable to separate psychologically or practically from the relationship.

The issue here is not simply whether social others are present. Rather, it concerns the failure of collective action and the inability of the surrounding symbolic order to intervene effectively in the subject's lived reality. This articulates with what trauma theorists have described when noting that bystanders may unwittingly intensify injury. What the victimized subject often requires is not neutral commentary or moral opinion, but concrete action capable of interrupting the abuser's control [3].

For this reason, isolation should not be understood only as physical separation. It may also be public or symbolic isolation: the subject's experience that no effective third position exists from which protection, recognition, or justice can arrive.

Within this framework, trauma cannot be reduced to abusive acts alone. Trauma may also arise from the failure of institutions, communities, and protective others to perform their containing function. What should have served as shelter instead becomes absent, inert, or indifferent, and thus creating institutional betrayal [10].

As a result, the subject may generalize this abandonment to law, authority, and social life more broadly. Under such circumstances, seeking help then appears futile or dangerous. The subject becomes trapped between two forms of coercion: the direct domination exercised by the abuser, and the silent indifference of the wider symbolic order.

This dual experience deepens attachment to the traumatic bond. The abusive relationship, however destructive, may seem more real and affective than a world experienced as absent or unresponsive.

4.3. The mechanisms of inverted trauma bonding

To say that the suffering of the abused subject has no symbolic or linguistic meaning does not mean that the suffering goes unnoticed. Rather, it means that the existing symbolic order does not grant it legitimacy. Language fails to provide an adequate place through which trauma may be narrated, recognized, and psychically contained.

This leads to a further dimension that may be described, cautiously, as the instinct toward expression. This term is not used here as a formal drive concept, but as a way of naming a clinical observation: traumatic pain often exceeds available language. Even when the subject speaks about abusive experience, something remains unspoken, bodily, affective, and unresolved.

One may think here of residues of experience that are prior to coherent narration. These are not simply memories hidden in the unconscious, waiting intact to be recalled. Rather, they may be traces of pain left where symbolization has failed. The tension generated by these unsymbolized remnants seeks discharge, form, or representation.

Expression, in this sense, is not itself a symbolic order;rather it is the pressure that demands one-a drive toward the realization of symbolization. Language, gesture, fantasy, bodily action, and relational enactment may all become provisional materials through which what has not been symbolized attempts to take shape.

From this perspective, identification serves an important function. It offers an imaginary route through which blocked psychic energies may be directed. Identification does not resolve trauma, but it temporarily organizes what would otherwise remain diffuse and overwhelming.

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Trauma should therefore be understood not only as a single event, but as a history that continues to seek form. Once reactivated, the subject may narrativize and stabilize earlier fragments of experience through new relational scenarios. Because the public symbolic order has historically failed the subject, these new forms often develop outside shared reality and instead rely upon private psychic constructions.

Within inverted trauma bonding, two principal currents may be observed. With respect to Eros, psychic investment may be directed toward the fantasy of rescue. The chosen object appears as someone who must be saved, protected, or healed. Yet unconsciously, this object often stands in the place of the subject's own abandoned self.

At the same time, destructive currents may also seek expression. Here one may observe what could be called a pathological martyrdom: self-sacrifice, moral persecution, compulsive suffering, or the insistence that pain must be borne for love to exist. Through these formations, aggression returns in disguised form.

Fantasy becomes crucial because it grants legitimacy to a private symbolic order. It creates a scene in which the subject may act out unresolved trauma while experiencing these actions as necessary, moral, loving, or protective.

Thus, a subject may sincerely believe that they are rescuing another person while unconsciously repeating the logic of domination. Care becomes intrusive control. Protection becomes coercion. Devotion becomes an attack upon autonomy.

What was once suffered from the outside is now reproduced from within.

Finally, the maintenance of this inverted bond does not appear to depend primarily upon intermittent reinforcement in the classical sense. Rather than operating through fluctuating reward, it often functions through structural stability. The subject repeatedly reorganizes reality so that external relations fit an already established internal design.

For this reason, inverted trauma bonding may be compared to a finely adjusted lock. It holds so long as external people and situations can be arranged to fit the internal pattern. But when reality changes—when the chosen object asserts independence, refuses rescue, or no longer occupies the assigned role—the structure begins to loosen.

At such moments, previously repressed wishes and anxieties may rise toward consciousness. In response, the subject may engage in urgent restorative actions: accusations, moral pressure, bodily agitation, emotional outbursts, or renewed attempts to force the other back into the protected position.

These reactions are not random. They are attempts to maintain both the external bond and internal symbolic order, which has come to rely on the former for its coherence.

In this sense, the fixation of inverted trauma bonding lies less in uncontrollable impulse than in a largely unconscious commitment to maintaining a traumatic form of relational life.

5. Conclusion

This paper argues that trauma bonding should not only be understood as an attachment maintained through an ongoing abusive relationship; rather, traumatic relational patterns often persist after the external bond ends.

The present discussion proposes the concept of inverted trauma bonding as a post-traumatic phenomenon. The term refers to a structural reversal in which an originally external abusive relation becomes internalized and subsequently reorganizes later perception, attachment, fantasy, and relational conduct from within. Therefore, the inversion occurs not solely in subject's behaviors, but also within the subject's internal psychic structure.

DOI: 10.54254/2753-7048/2026.LD34078

The theoretical value of this concept lies in extending trauma bonding beyond a purely interpersonal model toward a structural and psychical understanding of traumatic persistence. It may also help illuminate clinical phenomena such as compulsive rescue fantasies, repeated attachments, moralized self-sacrifice, and the unconscious reproduction of domination through care.

At the same time, the present discussion is primarily theoretical and intended as an internal framework. The proposed model requires further clinical comparison, empirical examination, and dialogue with contemporary trauma studies, attachment theory, and relational psychoanalysis.

Ultimately, traumatic bonds may end externally without ending psychically. To understand their afterlife within the subject is therefore essential for any more comprehensive theory of trauma, attachment, and recovery.

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