

Difficulty in Emotion Regulation as a Mediator between Childhood Traumas and Interpersonal Dependency

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Abstract

This study aims to determine the mediating effect of difficulty in emotion regulation in the relationship between childhood traumas and interpersonal dependency levels of university students. The participants consisted of 458 university students (294 female (64.2%) and 164 male (35.8%) from various universities in Türkiye. The study used the "Demographic Information Form," "Childhood Traumas Scale," "Difficulty in Emotion Regulation Scale," and "Interpersonal Dependency Scale" for data collection. The data obtained in the research were analyzed using SPSS (Statistical Package for Social Sciences) for Windows 25.0 and AMOS (Analysis of Moment Structures) 23.0 program. This research is a descriptive study aiming to examine the relationships between childhood traumas, interpersonal dependency and difficulties in emotion regulation through relational screening and mediation analysis. "Reliability Analysis" was conducted to test the reliability of the scales, and "Confirmatory Factor Analysis (CFA)" was performed using the AMOS program to test the construct validity. Path analysis and mediation role were analyzed in line with the established model. Pearson correlation analysis results indicated that there are statistically significant and positive relationships between childhood traumas, emotion regulation difficulties, and interpersonal dependence. As a result of the structural model analysis performed, it was found that childhood traumas positively predicted interpersonal dependency. According to the findings of the mediation analysis, difficulties in emotion regulation have an indirect mediation effect on the relationship between childhood traumas and interpersonal dependency. Accordingly, seminars and trainings on the effects of childhood traumas can be organized within the psychological counseling centers of universities to raise awareness of students about these effects.

Keywords: University student, Childhood traumas, Interpersonal dependency, Emotion regulation



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INTRODUCTION

Trauma refers to all kinds of situations that occur as a result of the psychological, cognitive and physical experience that shakes, hurts and injures the individual. These experiences can also affect the individual's later lives. For example, the academic success of a student who has experienced a trauma in the past may be adversely affected (Toprakçı, 2017). On the other hand, traumatic experiences can also cause behaviors such as violence in the individual (Bodur ve Toprakçı, 2021). The scope of traumatic events ranges from a single childhood event to the accumulation of a series of stressful traumatic experiences that may occur throughout one's life, such as physical and sexual abuse, domestic or community violence, abduction or death of a parent, natural disasters, accidents, life-threatening illnesses, and related painful medical procedures (Pearlin, Schieman, Fazio and Meersman, 2005; Cicchetti and Toth, 2005). It is estimated that approximately one-third of the general population may be affected by the prevalence of childhood trauma (Scher, Forde, McQuaid and Stein, 2004; Kessler et. al., 2010). Child maltreatment includes all forms of physical and/or emotional maltreatment, sexual abuse, neglect, and commercial or other exploitation that result in actual or potential harm to the health, survival, development, or dignity of the child within the established relationship of responsibility, trust, and power.

All situations that harm the physical, social, and psychological development of children are examined under the category of abuse, while considering intercultural differences. *Physical abuse* is when an adult commits acts of physical violence that are likely to harm a child's health, dignity, and development, except in cases of accidents (Acehan, Bilen, Ay, Gülen, Avcı & İçme, 2013). *Sexual abuse* encompasses all behaviors of an adult or older person toward a child who has not completed psychosexual development and is legally a minor for sexual gratification, without the requirement of direct contact (Pulverman, Boyd, Stanton and Meston, 2017). However, *emotional abuse* is characterized by various verbal behaviors, such as threatening, mocking, humiliating, blaming, insulting, and devaluing, that put the child's mental and emotional integrity at risk, without having a physical quality (Berzenski & Yates, 2019).

On the other hand, studies consider childhood neglect as the situation in which some basic needs such as love, affection, nutrition, protection, education, and supervision that appear in developmental stages are not met or met incompletely (Zeanah and Humphreys, 2018). *Physical neglect* can be defined as the failure to meet needs such as shelter, nutrition, safety, hygiene, health, and basic care, essential for the child's development (Theodore, Runyan and Chang, 2007). *Emotional neglect* is the failure of the caregiver to meet the needs of the child such as love, attention, affection, and trust (Stoltenborgh, Bakermans-Kranenburg and Van Ijzendoorn, 2013). In abuse, the intention and active role played by the abusive person are at the forefront, while in neglect, a passive attitude is observed in which the needs of the child are not met and this distinguishes childhood abuse from neglect.

Related studies have shown that children are more vulnerable than adults in terms of evaluating events, producing coherent responses, and developing psychopathology as a result of traumatic experiences (Bremner and Vermetten, 2001; van der Kolk, 2005). A review of the literature shows that psychiatric disorders seen in adulthood are among the long-term consequences of traumatic childhood experiences (Kilpatrick, Ruggiero, Acierno, Saunders, Resnick, and Best, 2003; Higgins and McCabe, 2000). Research indicates that childhood trauma is a risk factor for most adult mental health disorders, including post-traumatic stress disorder (Jaye Capretto, 2020), depression (Gibb, Alloy, Abramson, Rose, Whitehouse, Donovan, Hogan, Cronholm and Tierney, 2001; Li, D'Arcy, and Meng, 2016), anxiety disorders (Choi and Sikkema, 2016), eating disorders (Afifi, Sareen, Fortier, Taillieu, Turner, Cheung and Henriksen, 2017; Monteleone, Cascino, Pellegrino, Ruzzi, Patriciello, Marone, De Felice, Monteleone and Maj, 2019), alcohol and substance abuse (Moran, Vuchinich, and Hall, 2004; Dube, Felitti, Dong, Chapman, Giles, and Anda, 2003; Elliott, Stohl, Wall, Keyes, Goodwin, Skodol, Krueger, Grant, and Hasin 2014), personality disorders (Lobbestael, Arntz and Bernstein, 2010) and psychotic disorders (Kaufman and Torbey, 2019; Bendall, Jackson and Hulbert, 2010).

Interpersonal dependence is one of the main motivations for individuals to establish and maintain supportive interpersonal relationships. An individual's self-perception, their expectations from others in

matters such as care and protection, and their ability to maintain the relationships they have established provide information about the level of interpersonal dependency (Bornstein, 2011). Interpersonal dependence refers to a set of thoughts, beliefs, feelings, and behaviors that revolve around the need for individuals to establish close relationships with, interact with, and trust other people. *Thoughts* refer to mental representations and evaluations about oneself, others, and one's relationship with others; *beliefs* refer to close relationships that one establishes in different ways and the value placed on the components of these relationships; *emotions* refer to positive and negative emotional experiences in the relationship; and *behaviors* refer to actions to maintain and sustain interpersonal closeness (Hirschfeld, Klerman, Gouch, Barrett, Korchin and Chodoff, 1977).

While structuring the measurement tool they developed for interpersonal dependence, Hirschfeld et al. (1977) identified three main components: emotional trust, lack of social self-confidence, and autonomy. *Emotional trust* refers to the individual's fear of losing the person they have a close relationship with, their need for emotional support, and their desire for attention and approval. *Social self-confidence* emphasizes the individual's ability to self-socialize, manage decision-making processes, and express oneself. *Autonomy* refers to the determining role of other people in an individual's life and explains the need for approval and intervention of others (Ulusoy, 2010).

Interpersonal dependence is more often associated with passive and submissive behaviors; individuals' thoughts of inadequacy and powerlessness cause them to need others. To control the possibility of a relationship not continuing, one may frequently resort to other-oriented behaviors and may make an intense effort to meet the wishes and expectations of the other person (Bornstein, 2011). Interpersonal dependence can manifest in adaptive or maladaptive ways. Although the need for help, support, and guidance from other people are at the forefront in both views, one can say that adaptive dependency involves flexible thinking and behaviors that are necessary for healthier interpersonal relationships (Bornstein, 2005). However, when the dependency becomes extreme, it can become pathological and pose a risk in interpersonal relationships. Dependent personality disorder, included in cluster C in DSM-5, is a psychiatric disorder that is seen with maladaptive levels of dependency and submissive behaviors on the axis of personality patterns (Bornstein, 1992; APA, 2022). Shaping interpersonal relationships based on a need for approval and support may create sensitivity to rejection and negative interpersonal cues (Alonso-Arbiol, Shaver and Yáñez, 2002). In interpersonal dependence, observations suggest that individuals present themselves as passive, compliant, and humble to the people they are in a relationship with; however, they can also show aggressive behaviors when the continuity of the relationship is threatened (Pincus and Wilson, 2001).

Thompson (1994) revealed that the concept of emotion regulation refers to the internal and external processes responsible for monitoring, evaluating, and changing one's emotional reactions to achieve one's goals. Gross (1998) defined emotion regulation by emphasizing its active role in processes such as which emotions individuals possess, when they exhibit these emotions, and how they experience and express them. The concept of emotion regulation refers to the individual's ability to maintain goal-oriented behaviors despite intense emotional experiences and various stressors, rather than the absence or suppression of negative emotions (Fruzzetti, Crook, Erikson, Lee and Worrall, 2008).

Emotion regulation difficulties refer to impairments in the areas of awareness and acceptance of emotions, the ability to control avoidance behaviors due to emotional experiences, and the use of functional strategies necessary to manage emotional experiences, which form the emotional functioning of individuals (Gratz and Roemer, 2004). Difficulties in emotion regulation can disrupt the individual's daily functioning and manifest themselves in a range of psychological disorders (Beauchaine and Cicchetti, 2019; Gross, 1998); these actions may take the form of social relations, controlling attention, and directing one's professional and educational life (Cole, Michel, and Teti, 1994). The diagnostic groups associated with difficulties in emotion regulation in the literature are depression (Joorman & Stanton, 2010), anxiety disorders (Cisler & Olatunji, 2012), post-traumatic stress disorder (Boden, Westermann, McRae, Kuo, Alvarez, Kulkarni, Gross and Bonn-Miller, 2013) and borderline personality disorder (Gratz et al., 2006).

Previous studies reported that difficulties in emotion regulation may be one of the potential consequences of childhood traumas (Burns, Jackson, and Harding 2010; Kim and Cicchetti, 2010).

Examinations of the relationship between childhood traumas and difficulty in emotion regulation, indicated that exposure to maltreatment in childhood can have a negative effect on the emotion regulation capacity, which develops in the early stages of life. In discussions related to the role of emotion regulation skills in developmental processes, some studies reveal the role of parenting characteristics and upbringing environment in the acquisition of this skill (Southam-Gerow and Kendall, 2002; Feng, Shaw, Kovacs, Lane, O'Rourke and Alarcon, 2008). Considering that perpetrators of childhood neglect and abuse often make up the environment in which the child is raised (i.e., family members and others close to the family), these individuals may have difficulty developing emotional awareness and understanding because they experience increased emotional stimulation rather than acquiring the necessary skills to tolerate and change their emotions (Thompson and Calkins, 1996).

Besides the negative effect of childhood traumas on emotion regulation and skills of creating functional responses, they can also lead to a lack of trust in interpersonal relationships by interfering with the individual's evaluation processes of internal and external events (Schimmenti, Passanisi, Pace, Manzella, Di Carlo and Caretti, 2014). From the perspective of close relationships, it is considered that traumatic experiences in childhood may be parallel with intense fears of establishing relationships, maintaining relationships and abandonment in adulthood. Studies have shown that individuals may have higher levels of anxiety and arousal (Kaplou and Widom, 2007; Jaffee, 2017) as a result of childhood maltreatment, and may show dependent characteristics with an increase in their need for external validation and reassurance in close relationships (Hill, Gold and Bornstein, 2001).

Childhood trauma is a highly prevalent and significant public health issue associated with lifelong physical and psychological consequences. Being able to infer the consequences of neglect and abuse in the context of abusive experiences in childhood is critical for understanding the antecedents and consequences of such maltreatment and for developing effective intervention methods. The main purpose of the study, along with revealing the relationship between individuals' childhood traumas and the level of dependency in the interpersonal dimension, is to identify the mediating role of emotion regulation difficulties in this relationship. *Although there are studies examining interpersonal dependency as a possible consequence of childhood traumas (Gibb, Alloy, Abramson, Rose, Whitehouse, Donovan, Hogan, Cronholm and Tierney, 2001; Tyrka, Wyche, Kelly, Price, and Carpenter 2009), it is noteworthy that studies investigating the variables mediating this relation are limited. Difficulty in emotion regulation is a risk factor for a number of psychopathologies, but also significantly affects psychosocial functioning. There are studies indicating that difficulties in emotion regulation mediate the relationship between childhood traumas and borderline personality traits and interpersonal problems (Herr, Rosenthal, Geiger, Erikson, 2013), later substance abuse (Wolff et. al., 2016), alcohol-related problems (Dutcher, Vujanovic, Paulus and Bartlett, 2017), and post-traumatic stress (Stevens, Gerhart, Goldsmith, Heath, Chesney and Hobfoll, 2013). From this point of view, it is thought that difficulties in emotion regulation may have an impact on the explanation of maladaptive patterns in interpersonal relationships of individuals who have experienced childhood maltreatment.

The questions sought to be answered in this study can be listed as follows:

1. Is there a significant relationship among childhood traumas, emotion regulation difficulty, and interpersonal dependence scores of the university students?
2. Is emotion regulation difficulty mediating the relationship between childhood traumas and interpersonal dependence scores of the university students?

METHOD

1. Design

This research is a descriptive study aiming to examine the relationships between childhood traumas, interpersonal dependency and difficulties in emotion regulation through relational screening and mediation analysis. These research designs are used to examine the relationships and/or the degree of relationships between two or more variables and to obtain information on cause and effect relationships (Fraenkel, Wallen and Hyun, 2012). The independent variable of the study is childhood

traumas, the dependent variable is interpersonal dependence, and the mediator variable is difficulties in emotion regulation.

2. Sample

458 university students, 294 (64.2%) of whom were female, and 260 (35.8%) were male, studying at universities in Ankara ($n = 88$), Diyarbakir ($n = 74$), Hatay ($n = 65$), Istanbul ($n = 114$), Izmir ($n = 58$), and Bursa ($n = 59$), in Turkey participated in the research. The main purpose of including university students in Turkey's crowded cities in the research is to increase the representativeness of the sample by reducing the cultural influence. When the distribution of university students participating in the research by age is examined, 65% ($n = 260$) were 18–21 years old, 29.8% ($n = 119$) were 22–25 years old, and 5.3% ($n = 21$) were 26 years old and above. Among the university students who participated in the study, 2% ($n = 0.4$), 28.4% ($n = 130$), 32.9% ($n = 150$), 16.8% ($n = 77$), 14.4% ($n = 66$), 5.7% ($n = 26$), and 1.5% ($n = 7$) were preparatory, first-year, second-year, third-year, fourth-year, fifth-year, and sixth-year students, respectively. Furthermore, 17.9% ($n = 82$), 75.5% ($n = 346$), and 6.6% ($n = 30$) of the students had low, medium, and high income.

3. Data Collection Instruments

3.1. Demographic Information Form: The researchers prepared and applied the Demographic Information Form to determine the characteristics of the university students participating in the study, such as their gender, age, department of study, study year and income level.

3.2. The Childhood Traumatic Experiences Questionnaire (CTQ): CTQ is developed by [Bernstein, Fink, Handelsman, Foote, Lovejoy, Wenzel, Sapareto, and Ruggiero \(1994\)](#) to assess childhood traumatic experiences prospectively. The CTQ consists of 28 items and participants are evaluated with a 5-point Likert type (1 = Never and 5 = Very Often). The scale has five dimensions: emotional and physical neglect and emotional, sexual, and physical abuse. Moreover, the total score of the scale can be used to assess child maltreatment. [Sar, Ozturk and Ikkardes \(2012\)](#) translated the scale into Turkish and they reported that the Turkish form is valid and reliable ($\alpha = .93$). In this study, the reliability coefficient for the overall scale was found to be .94. According to the results of the confirmatory factor analysis applied, it was determined that the scale had acceptable fit values ($\chi^2/df = 3.12$, RMSEA=0.07, CFI =0.92, IFI = 0.92 and SRMR = .06).

3.3. The Interpersonal Dependency Inventory (IDI): IDI was developed by [Hirschfeld et al. \(1977\)](#) to evaluate the level of dependency on emotions, thoughts, and behaviors in relationships with people, to make decisions on their own, and to trust the people they value around them. The scale consists of 48 items in total and is graded between 1 = not at all appropriate and 4 = completely agreeable in a 4-point Likert structure. The IDI consists of three dimensions: emotional trust, lack of social self-confidence, and autonomy. [Ulusoy \(2010\)](#), researcher who adapted the scale into Turkish, found the reliability coefficients to be .75 for the overall scale. In this study, the reliability coefficient for the overall scale was found to be .73. In this study, according to confirmatory factor analysis, 9 items out of 44 items were removed from the scale because the factor load was low. After the improvement in the model, the fit indices of the final scale were determined as $\chi^2/df = 3.01$, CFI = 0.81, SRMR = .08 and RMSEA = 0.07.

3.4. The Emotion Regulation Difficulty Scale (DERS): DERS was developed by [Gratz and Roemer \(2004\)](#) to evaluate difficulties experienced in emotion regulation. The scale has a total of 36 items and consists of six subscales. These subscales are as follows: "not accepting emotional reactions, not understanding emotional reactions, lack of awareness of emotional reactions, having difficulty in controlling impulses when experiencing negative emotions, having difficulty in behaving purposefully when experiencing negative emotions, and limited access to effective strategies." Items are rated on a 5-point Likert type (0 = almost never, 5 = almost always); high scores indicate difficulty in emotion regulation. The DERS was translated into Turkish by [Rugancı and Gençöz \(2010\)](#) and the authors reported that the Turkish form is valid and reliable ($\alpha = .94$). In this study, the reliability coefficient for the overall scale was found to be .95. According to the results of the confirmatory factor analysis applied, it was determined that the scale had acceptable fit values ($\chi^2/df = 2.66$, RMSEA=0.06, CFI =0.91, IFI = 0.91 and SRMR = .07).

4. Data Collection Process

Before starting to collect data, approval was obtained from the Dicle University Social Sciences and Humanities Ethics Committee with the decision dated 25/03/2022 and numbered 256321. In the study, the participants permission was obtained through an informed consent form. The participants voluntarily participated in the study. The researchers organized the scales used in the study electronically through Google Forms and obtained the data online between March and April 2022. Participants took an average of 20-25 minutes to complete the study. While the scales were administered to the participants, the order of the scales was changed to reduce the effects of fatigue and habituation.

5. Statistical Analysis

The data obtained in the research were analyzed using SPSS (Statistical Package for Social Sciences) for Windows 25.0 and AMOS (Analysis of Moment Structures) 23.0 program. "Reliability Analysis" was conducted to test the reliability of the scales, and "Confirmatory Factor Analysis (CFA)" was performed using the AMOS program to test the construct validity.

Path analysis and mediation role were analyzed in line with the established model. We tested normality assumption through skewness and kurtosis scores. Compliance with the normal distribution can be examined with the Q-Q Plot (Chan, 2003). Brown (2006) recommended that a range of -3 to + 3 for skewness and -10 to + 10 for kurtosis is appropriate. All skewness and kurtosis scores of the variables met these criteria (see: Table 1). We calculated the means, standard deviations, and maximum–minimum scores of the variables. Moreover, Cronbach alpha scores of the variables used in this study was calculated.

In order to examine the associations of variables, Pearson correlation coefficients were used. When the correlations between the variables are examined, it is seen that the factor loads of the items are above 0.30 and all correlation relations are significant. According to the results of the measurement model of the scales, when the correlations between the items are examined, it is seen that the factor loads of the items of childhood traumas, difficulty in emotion regulation and interpersonal dependency scales are above .30 and all correlation relationships are significant.

Finally, the mediation of difficulties in emotion regulation in the relationship between childhood maltreatment and interpersonal dependency was tested. In order to perform SEM, the data set must provide a multivariate normal distribution (Byrne, 2001). In this context, multivariate extreme values were examined with Mahalanobis distance values. The Mahalanobis criterion based on the relationship between observations is recommended for the detection of outliers in multivariate and high-volume data sets with near-zero or negative-valued observations (Johnson & Wichern, 1992). As outliers increase the value of error variance, they also affect the power of statistical tests. For this reason, outliers were examined before statistical tests and it was checked whether they were present in the data sets. The presence of outlier-outliers was determined by the Mahalanobis method and multiple normality criteria were met.

FINDINGS

First, we calculated Cronbach's alpha internal consistency scores, means, standard deviations, and skewness–kurtosis scores. The internal consistency coefficients of all the scales used in the study are over .70. Moreover, we tested normality assumption through skewness and kurtosis scores. All kurtosis and skewness scores of the scales met the normality assumption criteria. Table 1 displays Cronbach's alpha internal consistency scores, means, standard deviations, and skewness–kurtosis scores.

Table 1. Cronbach's alpha, mean and standard deviation, and skewness–kurtosis scores of the variables

Variable	A	Min	Max	Mean	Sd	Skewness	Kurtosis
Difficulties in emotion regulation	.938	44.00	180.00	99.79	26.70	.238	-.538
Childhood traumatic experiences	.870	25.00	102.00	39.50	15.65	1.68	2.66
Interpersonal dependency	.868	67.00	159.00	109.41	26.69	.223	.126

The Pearson zero-order correlation analyses showed that difficulties in emotion regulation variable is significant and positively correlated with childhood traumatic experiences ($r = .150, p < .01$)

and interpersonal dependency ($r = .570, p < .01$). Moreover, there is also significant association between childhood traumatic experiences and interpersonal dependency ($r=.318, p<.01$). Inter-correlations between the studied variables are presented in Table 2.

Table 2. Associations among variables

Variables	1	2	3
1. Difficulties in emotion regulation	-	.150**	.570**
2. Childhood traumatic experiences	-	-	.318**
3. Interpersonal dependency	-	-	-

** $p < .01$

In order to test the mediating role of difficulties in emotion regulation in the relationship between childhood traumas and interpersonal dependency, mediator model analysis was performed using the AMOS program. In the model, childhood traumas were considered as the independent variable, difficulties in emotion regulation as the mediator variable, and interpersonal dependence as the dependent (outcome) variable for analysis (See Figure 1 for the path coefficients of the analysis results).

In order to test the fit of the data with the research model, the model fit was measured by χ^2 test, χ^2 /df ratio, RMSEA (Mean Square Root of Errors Approach), CFI (Comparative Fit Index), TLI (Tucker-Lewis Index) and SRME. In the path analysis, model fit values are at an acceptable level ($\chi^2/df = 2.41$, RMSEA = .05, CFI = .81, TLI = .81, SRMR = .08).

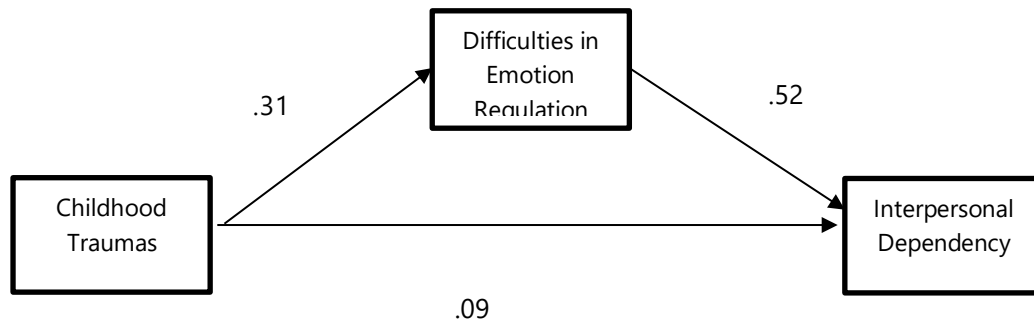


Figure 1. Mediation model for childhood maltreatment and interpersonal dependency via difficulties in emotion regulation.

Before examining the mediating role of difficulties in emotion regulation in the created model, it was examined whether childhood traumas had an effect on interpersonal dependency. The effect of childhood traumas on interpersonal dependence was found to be statistically significant and positive ($\beta=0.251, p<0.05$). In order to test the mediation model created, the bootstrap coefficient was determined as 5000 and the 95% confidence interval was taken as basis. The fact that the values in the 95% confidence interval do not include 0 according to the results of the model shows that difficulties in emotion regulation has a mediating role in the model ($\beta = .164, p<.05, CI = .016/.213$).

After it was decided that difficulties in emotion regulation had a mediating effect, it was examined whether the direct effect was significant in order to decide on the type of this mediator role. As a result, it was concluded that the direct effect was significant, but the value of the effect decreased ($\beta=0.087, p<0.05$) and it was decided that the mediating effect was indirect (see Table 3 for mediation analysis results).

Table 3. The mediating role of difficulties in emotion regulation in the effect of childhood traumas on interpersonal dependency

Effect		β	SE	T	P	Result
1. Childhood Traumas → Interpersonal Dependence		0.251	0.031	5.541	***	Accepted
2. Childhood Traumas → Difficulties in Emotion Regulation → Interpersonal Dependence	Direct Effect	0.087	0.028	2.126	***	Accepted
	Indirect Effect	0.164				Significant
				CI (0.116, 0.213)		

DISCUSSION, CONCLUSION AND SUGGESTIONS

In this study, mediating role of emotion regulation difficulty in the relationship between childhood traumas and interpersonal dependency levels of university students was examined and observations suggest that there were significant relationships between the variables. According to the findings, there are positive correlations between childhood traumas, interpersonal dependence, and emotion regulation difficulty. As a result of the mediation analyses applied, the study obtained significant findings regarding the mediating role of emotion regulation difficulties in the relationship between childhood traumas and interpersonal dependence.

The result of the correlation analysis found a significant and positive correlation between childhood traumas and emotion regulation difficulty. Consistent with the current findings, there are existing studies that put forward the negative effects of childhood traumas on emotional response regulation and the possibility of successful parental modeling in managing emotional reactions (Calkins and Hill, 2007) and the development of functional emotion regulation strategies (Burns, Jackson, and Harding 2010). Similarly, previous research found that the acquisition of skills to produce functional responses to challenging and stressful events (Berzenski, 2019) and to cope with negative emotions are impeded by maltreatment such as neglect and abuse (Messman-Moore, Walsh and DiLillo, 2010). Furthermore, finding suggested that emotion regulation difficulties may mediate the correlation between childhood traumas and symptoms of depression (Crow, Cross, Powers and Bradley, 2014), alcohol problems (Dutcher, Vujanovic, Paulus and Bartlett; 2017), substance use disorder (Kahl, Holl, Grundmann, Lotzin, Hiller, Schroeder, Schulte, Barnow and Schäfer, 2020), and eating disorders.

This study revealed that difficulties in emotion regulation increases with an increase in childhood neglect and abuse. One can say that during a child's unique search for security, the patterns of neglect and abuse that threaten the child's sense of self and security may be related to the unsafe evaluation of the environment and thoughts of inadequacy (Kendall-Tackett, 2002; Taillieu, Brownridge, Sareen, and Afifi, 2016). Emotion regulation is seen as a protective skill for mental health that is acquired during the developmental process. It can be argued that child maltreatment poses a threat to recognition, understanding, and regulation of emotion. Maltreated children may experience levels of stimulation that can create difficulties in managing and processing negative emotions. Patterns of neglect or abuse can prevent the creation of a supportive environment for children to learn constructive strategies to regulate their emotional state in the face of negative emotions. The absence of an environment where one can experience emotions and safely test potential responses may explain the setbacks in emotion regulation skills later in life.

According to the findings of the study, another variable that is significantly and positively associated with childhood traumas was interpersonal dependency. Accordingly, the tendency for interpersonal dependency increases with childhood neglect and abuse. Previous studies suggest that childhood experiences may lead to dependency tendencies in interpersonal relationships due to their impact on individuals' self-worth, individualism, and their perception of trust and stability in the world (Bornstein, 2005; Reyome and Ward, 2007). There are certain studies that reveal the explanatory effect of sexual (Hill, Gold, and Bornstein, 2001; Lobbestael, Arntz and Bernstein, 2010) and physical (Lobbestael, Arntz and Bernstein, 2010; Johnson, Smailes, Cohen, Brown and Bernstein, 2000) abuse on interpersonal dependency (Kane & Bornstein, 2017). In parallel with the findings of the current study, Allen and Lauterbach (2007) found that the presence of repetitive childhood traumas is associated with a high level of dependency in interpersonal relationships.

Bornstein (1993) suggested that the parent-child relationship may be among the factors that may play a role in explaining interpersonal dependence. The closeness and safety of the relationship established with the caregiver, and the caregiver's responsiveness toward their needs are early attachment interactions that affect internal working models of attachment styles. The closeness provided by the attachment figure forms the basis for the cognitive and emotional representation of other people and the relationships established with them, especially for the representation of individuality (Bowlby, 1982; Alexander, Anderson, Brand, Schaeffer, Grelling, and Kretz, 1998). Based on the intrinsic model of attachment, it can be concluded that exposure to neglect and abuse by parents and people in one's close circle leads to a faulty perception of trust toward other people (Dye, 2018). When a child seeks

closeness to an attachment figure, the need for protection and support that is met supports a sense of security and the bond established serves as a buffer for anxiety (Bowlby, 1982; Nolte, Guiney, Fonagy, Mayes, and Luyten, 2011).

Accordingly, one can say that consistent and responsive care that meets the child's physical and emotional needs and interactions that do not meet the child's needs and involve fear can be associated with secure and insecure attachment, respectively (Ainsworth, 1989; Hesse & Main, 2006; Friend, 2012). According to some studies, childhood maltreatment is one of the causes of insecure (Frigerio et al., 2013) and disorganized attachment (Cicchetti and Barnett, 1991). The difference between the two concepts can be clarified as follows— attachment involves behaviors characterized by a search for closeness and that are directed toward a special person while dependent behavior aims to seek help from those whom the individual sees as caregivers and involves feelings, thoughts, and behaviors (Ainsworth, 1972; Bornstein, 1992). Interpersonal dependency, as set forth with its dimensions by Bornstein (2011), is not described just as passivity and submissiveness; it can be characterized as reactance and aggressiveness in possible refusal or abandonment situations. Insecure/disorganized attachment patterns may be one of the factors that reinforce the belief that other people's behaviors are unpredictable. Dependency can be seen as a strategy to control ongoing anxieties or negative expectations about the continuity of the relationship.

Another question that this study seeks to answer is whether there is a mediating effect of difficulty in emotion regulation in the significant relationship between childhood traumas and interpersonal dependence. Findings suggest an indirect mediating effect of emotion regulation difficulty between childhood traumatic experiences and interpersonal dependence. Considering the critical early impact of interactions with caregivers, maltreatment such as neglect and abuse may be a risk factor for socio-emotional development. Although challenging interpersonal and individual situations may present themselves throughout life, individuals form patterns of adaptive responses in the early stages of development. Interruptions during the expected acquisition of certain skills in early childhood due to traumatic experiences can have various physical, social, and psychological consequences. The role of emotion regulation in individuals' assessment and response generation processes can indirectly affect interpersonal interactions (Fischer and Manstead, 2008). Certain studies show that individuals subjected to maltreatment during their childhood can experience difficulties in their interpersonal relations in adulthood (Bailey, Moran and Pederson, 2007; Paradis and Boucher, 2010) and impairments in interpersonal functioning (Poole, Dobson and Pusch, 2018; Christ, de Waal, Dekker, van Kuijk, van Schaik, Kikkert, Goudriaan, Beekman and Messman-Moore, 2019). In addition, in a review study conducted by Bornstein (2012) examining the societal costs of interpersonal dependency, it was revealed how dependency can be a risk factor for physical diseases, health care utilization and expenditures, global and domain-specific functional impairment, violence toward others, victimization by others and self-harm. As stated, although there are studies examining the costs in the interpersonal context, studies focusing on the role of childhood experiences in explaining dependency are very limited. From the perspective of attachment theory, there are studies showing that childhood traumas are associated with insecure (Baer, 2006; Lo, Chan and Ip, 2019) attachment patterns. Considering the potential damage to secure attachment processes, maltreatment experienced in the early stages of life is thought to affect dependency tendencies and interpersonal interactions in adulthood. There are studies indicating that early attachment styles are associated with social media addiction (D'Arienzo, Boursier, Griffiths, 2019), sex addiction (Kotera and Rhodes, 2019) and substance use (Fairbairn, Briley, Kang, Fraley, Hankin and Ariss, 2018). Considering the critical importance of emotion regulation skills for addiction (Padykula and Conklin, 2010; Liese, Kim and Hodgins, 2020) and quality of social interactions (Lopes, Salovey, Côté, Beers, Petty, 2005), the aim of the present study is to contribute to revealing the consequences of childhood traumas in the interpersonal context with the effect of emotion regulation difficulties.

The findings from the present study have implications for research and mental health professionals. According to the research findings, difficulties in emotion regulation partially mediate the explanatory effect of childhood traumas on interpersonal dependency. Based on this finding, it can be said that the dependency tendency in the interpersonal relationships of individuals who have experienced traumatic events in childhood increases due to the difficulties they experience in emotion regulation. This finding of the study may offer a perspective for the inclusion of emotion regulation skills

in interventions aimed at increasing the functionality of interpersonal relationships of individuals who have experienced childhood trauma. Additionally, conducting individual and group psychological counseling practices in psychological counseling and guidance centers of universities for the possible maladaptive consequences of childhood maltreatment may be meaningful in terms of treatment. In the context of psychological counseling practices, it is thought to be important to consider the negative dimensions of childhood traumas such as interpersonal dependence or difficulty in emotion regulation that may occur in adulthood. Considering the negative effects of childhood traumas on the psychological well-being of individuals in individual psychological counseling practices, studies can be carried out to improve this situation. In this context, it is thought that training and seminars to be given to families at different school levels within the scope of school psychological counseling aimed at preventing childhood traumas are extremely important.

The current study examined the mediating effect of difficulty in emotion regulation in the relationship between childhood traumas and interpersonal dependence. Future studies can expand the model by considering other variables that may mediate this relationship. The scope can be expanded by including interpersonal emotion regulation, defined as emotion regulation through social interactions, into the model. This study has some limitations that affect the generalization of the results. Perhaps the most important limitation that may affect the generalizability of the results is that the sample consists of university students. In future studies, studies can be repeated with individuals with different age and demographic characteristics. The information collected on childhood maltreatment was based on individuals' retrospective interpretations of events. It is worth considering that self-reports can be influenced by several factors, such as social desirability and recall difficulties. There are limited studies related to interpersonal dependency in the literature and in future studies, the effects of attachment styles, parenting attitudes, and personality traits on interpersonal dependency as well as childhood traumas can be investigated as it may contribute to the literature. In terms of the generalizability of the study, it may be useful to study with a sample group from different parts of Türkiye and including different age groups. This study collected data on the interpersonal dependence variable through self-report scales. In future studies, interpersonal dependence can be investigated within the framework of qualitative research design. For a better understanding of the current research variables, Online Photovoice (OPV) method can be used instead of traditional quantitative research methods, which allows the participants to express themselves in a wider scope and to examine the variables within the influence of the relevant context and culture (Tanhan and Strack, 2020). This study evaluated the data collected on childhood traumas on a total score; future studies can investigate the predictive effect of emotional abuse and emotional neglect on interpersonal dependence. Specifically, the effect of emotional neglect in childhood on interpersonal functionality and the quality of established close relationships can be investigated to contribute to the literature. In addition, it may be meaningful to consider difficulties in emotion regulation in individuals who have experienced childhood maltreatment as a factor that can increase the effectiveness of interventions for functionality in interpersonal relationships.

Çocukluk Çağı Travmaları ile Kişilerarası Bağımlılık Arasındaki İlişkide Duygu Düzenleme Güçlüğü'nün Aracı Rolü

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Özet

Bu çalışmanın amacı, üniversite öğrencilerinin çocukluk çağı travmaları ile kişiler arası bağımlılık düzeyleri arasındaki ilişkide duygu düzenleme güçlüğü'nün aracılık etkisini belirlemektir. Araştırmaya Türkiye'deki çeşitli üniversitelerden 458 üniversite öğrencisi (%64,2) 294 kız ve 164 erkek (%35,8) katılmıştır. Araştırmaya ait veriler "Demografik Bilgi Formu", "Çocukluk Çağı Travmaları Ölçeği", "Duygu Düzenleme Güçlüğü Ölçeği" ve "Kişiler Arası Bağımlılık Ölçeği" kullanılarak toplanmıştır. Bu araştırma, çocukluk çağı travmaları, kişiler arası bağımlılık ve duygu düzenleme güçlükleri arasındaki ilişkileri ilişkisel tarama ve aracılık analizi yoluyla incelemeyi amaçlayan betimsel bir çalışmadır. Araştırmada elde edilen veriler SPSS (Statistical Package for Social Sciences) for Windows 25.0 ve AMOS (Analysis of Moment Structures) 23.0 programları kullanılarak analiz edilmiştir. Ölçeklerin güvenilirliğini test etmek amacıyla "Güvenilirlik Analizi", yapı geçerliliği test etmek için Amos programı kullanılarak "Doğrulayıcı Faktör Analizi (DFA)" yapılmıştır. Kurulan model doğrultusunda yol analizi ve aracılık rolü analiz edilmiştir. Pearson korelasyon analizi sonuçları çocukluk çağı travmaları ile duygu düzenleme güçlüğü ve kişiler arası bağımlılık arasında istatistiksel olarak anlamlı ve pozitif yönde ilişkiler olduğuna işaret etmektedir. Yapısal model analizi sonucunda, çocukluk çağı travmalarının kişiler arası bağımlılığı olumlu yönde yordadığı bulunmuştur. Yapılan aracılık analizi bulgularına göre duygu düzenlemede güçlüklerin çocukluk çağı travmaları ve kişilerarası bağımlılık arasındaki ilişkide dolaylı aracılık etkisi olduğu görülmüştür. Buna göre üniversitelerin psikolojik danışmanlık merkezleri bünyesinde çocukluk çağı travmalarının etkileri ile ilgili seminerler ve eğitimler düzenlenerek bu etkiler konusunda öğrencilerin bilinçlenmeleri sağlanabilir.

Anahtar Kelimeler: Üniversite öğrencileri, Çocukluk çağı travmaları, Kişilerarası bağımlılık, Duygu düzenleme



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Genişletilmiş Özet

Problem: Travma, bireyi psikolojik, bilişsel ve bedensel olarak sarsan, inciten, yaralayan türden yaşantısı sonucu ortaya çıkan her türlü durumu ifade etmektedir. Söz konusu yaşantılar bireyin sonraki yaşantılarını da etkileyebilmektedir. Örneğin geçmişinde travma yaşamış bir öğrencinin akademik başarısı bundan olumsuz etkilenebilmektedir (Toprakçı, 2017). Öte yandan travmatik yaşantılar bireyde şiddet uygulama gibi davranışları da meydana getirebilmektedir (Bodur ve Toprakçı, 2021). Travmatik olayların kapsamı, tek bir çocukluk olayından fiziksel ve cinsel istismar, aile içi veya toplum içi şiddet, bir ebeveynin kaçırılması veya ölümü, doğal afetler, kazalar, yaşamı tehdit eden hastalıklar ve ilgili ağırlı tıbbi prosedürler gibi kişinin hayatı boyunca meydana gelebilecek bir dizi stresli travmatik deneyimin birikimine kadar uzanır (Pearlin, Schieman, Fazio ve Meersman, 2005; Cicchetti ve Toth, 2005). Çocuğa yönelik kötü muameleler; güven, güç ve sorumluluk ilişkisi içinde çocuğun sağlığına, hayatta kalmasına, gelişmesine veya onuruna fiili veya potansiyel zararlarla sonuçlanan her türlü fiziksel ve/veya duygusal kötü muameleyi, cinsel istismarı, ihmali ve ticari veya diğer sömürüyü içerir. Bu çalışmada çocukluk travmaları kapsamında ele alınan kötü muameleler fiziksel istismar, cinsel istismar, duygusal istismar, fiziksel ihmal ve duygusal ihmaldir. Çocukluk çağı istismarında istismar eden kişinin niyeti ve oynadığı aktif rol ön planda iken, ihmalde çocuğun ihtiyaçlarının karşılanmadığı edilgen bir tutum gözlenir ve bu durum çocukluk istismarını ihmalden ayırmaktadır. İlgili araştırmalar, çocukların travmatik yaşantılar sonucunda olayları değerlendirme, tutarlı tepkiler üretme ve psikopatoloji geliştirme açısından yetişkinlere göre daha savunmasız olduklarını ortaya koymuştur (Bremner ve Vermetten, 2001; van der Kolk, 2005).

Bireyin benlik algısı, bakım ve korunma gibi konularda başkalarından beklentileri, kurduğu ilişkileri sürdürme becerisi kişiler arası bağımlılık düzeyi hakkında bilgi vermektedir (Bornstein, 2011). Kişiler arası bağımlılık, bireylerin diğer insanlarla yakın ilişkiler kurma, etkileşimde bulunma ve onlara güvenme ihtiyacı etrafında dönen bir dizi düşünce, inanç, duygu ve davranışı ifade eder. Düşünceler; kendisi, başkaları ve kişinin başkalarıyla ilişkisi hakkındaki zihinsel temsillere ve değerlendirmelere atıfta bulunur. İnançlar; kişinin farklı şekillerde kurduğu yakın ilişkileri ve bu ilişkilerin bileşenlerine verilen değeri ifade eder. Duygular; ilişkideki olumlu ve olumsuz duygusal deneyimleri ifade eder, davranışlar ise kişiler arası yakınlığı sürdürmek ve sürdürmek için yapılan eylemleri ifade eder (Hirschfeld vd.,1977). Kişiler arası bağımlılık, uyumlu veya uyumsuz şekillerde ortaya çıkabilir. Her iki görünümde de diğer insanlardan yardım, destek ve rehberlik ihtiyacı ön planda olsa da uyumlu bağımlılığın daha sağlıklı kişiler arası ilişkiler için gerekli olan esnek düşünme ve davranışları içerdiği söylenebilir (Bornstein, 2005). Kişiler arası bağımlılık daha çok pasif ve boyun eğici davranışlarla ilişkilendirilmektedir. Bireylerin yetersizlik ve güçsüzlük düşüncelerinin başkalarına yönelik beklenti ve ihtiyaçlarını şekillendirmesi, ilişki kurma, ilişkiyi sürdürme ve ilişkinin devam etme olasılığını kontrol etmek için sıklıkla ötekine yönelik davranışlara başvurusuyla ve karşısındakinin istek ve beklentilerini karşılamak için yoğun çaba sarf etmesiyle sonuçlanabilmektedir (Bornstein, 2011). Kişiler arası ilişkileri onay ve destek ihtiyacına göre şekillendirmek, reddedilmeye ve kişiler arası olumsuz ipuçlarına karşı duyarlılık yaratabilir (Alonso-Arbiol, Shaver ve Yárnoz, 2002).

Thompson (1994), duygu düzenleme kavramının, kişinin hedeflerine ulaşmak için duygusal tepkilerini izlemekten, değerlendirmekten ve değiştirmekten sorumlu iç ve dış süreçleri ifade ettiğini ortaya koymuştur. Gross (1998) duygu düzenlemeyi, bireylerin hangi duygulara sahip oldukları, bu duygular ne zaman sergiledikleri, bunları nasıl deneyimledikleri ve ifade ettikleri gibi süreçlerdeki aktif rolüne vurgu yaparak tanımlamıştır. Duygu düzenleme kavramı, olumsuz duyguların yokluğu ya da bastırılmasından çok, yoğun duygusal deneyimlere ve çeşitli stresörlere rağmen bireyin amaca yönelik davranışlarını sürdürebilmesini ifade etmektedir (Fruzzetti vd., 2008). Duygu düzenlemedeki zorluklar, bireyin günlük işleyişini bozabilir ve çeşitli psikolojik bozukluklarla kendini gösterebilir (Beauchaine ve Cicchetti, 2019; Gross, 1998). Bu durum, sosyal ilişkiler, dikkati kontrol etme ve kişinin profesyonel ve eğitim hayatını yönlendirme süreçlerini olumsuz etkileyebilir (Cole, Michel ve Teti, 1994).

Çocukluk çağı travmaları duygu düzenleme ve işlevsel tepkiler oluşturma becerileri üzerindeki olumsuz etkisinin yanı sıra bireyin içsel ve dışsal olayları değerlendirme süreçlerine müdahale ederek kişiler arası ilişkilerde güven eksikliğine de yol açabilmektedir (Schimmenti vd., 2014). Yakın ilişkiler açısından bakıldığında, çocuklukta travmatik yaşantıların, yetişkinlikteki yoğun ilişki kurma, ilişkiyi sürdürme ve terk edilme korkularıyla paralel olabileceği düşünülmektedir. Araştırmalar, çocuklukta kötü

muamele sonucunda bireylerin daha yüksek kaygı ve uyarılma düzeylerine sahip olabileceğini (Kaplow ve Widom, 2007; Jaffee, 2017) ve yakın ilişkilerde dış doğrulama ve güvence ihtiyacındaki artışla bağımlı özellikler gösterebileceğini göstermiştir. (Hill, Gold ve Bornstein, 2001). Çocukluk çağı travmalarının olası bir sonucu olarak kişiler arası bağımlılığı inceleyen çalışmalar olmasına rağmen (Gibb vd., 2001; Tyrka vd., 2009) bu ilişkiye aracılık eden değişkenleri araştıran çalışmaların sınırlı olması dikkat çekicidir. Araştırmanın temel amacı, bireylerin çocukluk çağı travmaları ile kişiler arası boyuttaki bağımlılık düzeyleri arasındaki ilişkiyi ortaya koymakla birlikte, bu ilişkide duygu düzenleme güçlüğü'nün aracı rolünü tespit etmektir.

Yöntem: Araştırmanın örneklemini üniversite öğrencileri oluşturmaktadır. Çalışma grubu Ankara, Diyarbakır, Hatay, İstanbul, İzmir ve Bursa'da öğrenim gören 458 üniversite öğrencisinden oluşmaktadır. Katılımcıların %64,2'si (n=294) kadın, %35,8'i (n=164) erkek; %65'i (n=260) 18-21, %29,8'i (n=119) 22-25 ve %5,3'ü (n=21) 26 yaş ve üzeridir. Araştırmada veri toplama araçları olarak Çocukluk Çağı Travmaları Ölçeği, Kişiler Arası Bağımlılık Ölçeği ve Duygu Düzenlemede Güçlükler Ölçeği kullanılmıştır. Araştırmada elde edilen veriler, Windows 25.0 için SPSS (Statistical Package for Social Sciences) ve AMOS (Analysis of Moment Structures) 23.0 kullanılarak analiz edilmiştir. Ölçeklerin güvenilirliğini test etmek için "Güvenilirlik Analizi", yapı geçerliğini test etmek için AMOS programı kullanılarak "Doğrulamalı Faktör Analizi (DFA)" yapılmıştır. Normallik varsayımını çarpıklık ve basıklık puanlarıyla test edilmiştir. Değişkenler arasındaki ilişkiler Pearson korelasyon analizi ile test edilmiştir. Son olarak kurulan model doğrultusunda yol analizi ve aracılık rolü analiz edilmiştir.

Bulgular: Pearson Momentler Çarpımı Korelasyon analizi sonucunda, duygu düzenlemede güçlüklerin çocukluk çağı travmaları ($r = .150, p < .01$) ve kişiler arası bağımlılık ($r = .570, p < .01$) ile anlamlı ve pozitif yönde ilişkili olduğu görülmüştür. Çocukluk çağı travmaları ile kişiler arası bağımlılık arasında da anlamlı ve pozitif yönde bir ilişki olduğu görülmüştür ($r=.318, p<.01$). Yapılan yol analizinde model uyum değerlerinin kabul edilebilir düzeyde olduğu bulunmuştur ($\chi^2/df = 2.41, RMSEA = .05, CFI = .81, TLI = .81, SRMR = .08$). Oluşturulan modelde duygu düzenleme güçlüğü'nün aracı rolü incelenmeden önce çocukluk çağı travmalarının kişiler arası bağımlılık üzerinde etkisi olup olmadığı incelenmiştir. Çocukluk çağı travmalarının kişiler arası bağımlılığa etkisi istatistiksel olarak anlamlı ve pozitif bulunmuştur ($\beta=0.251, p<0.05$). Oluşturulan aracılık modelini test etmek için bootstrap katsayısı 5000 olarak belirlenmiş ve %95 güven aralığı esas alınmıştır. Model sonuçlarına göre %95 güven aralığındaki değerlerin 0 içermemesi duygu düzenleme güçlüğü'nün modelde aracı rolü olduğunu göstermektedir ($\beta = .164, p<.05, CI = .016$ / .213). Sonuç olarak doğrudan etkinin anlamlı olduğu ancak etkinin değerinin düştüğü ($\beta=0,087, p<0,05$) ve aracı etkinin dolaylı olduğuna karar verilmiştir.

Sonuç ve Öneriler: Bu çalışmada, üniversite öğrencilerinin çocukluk çağı travmaları ile kişiler arası bağımlılık düzeyleri arasındaki ilişkide duygu düzenleme güçlüğü'nün aracı rolü incelenmiştir. Yapılan analizler sonucunda değişkenler arasında anlamlı ilişkiler olduğu görülmüştür. Uygulanan aracılık analizleri sonucunda çocukluk çağı travmaları ile kişiler arası bağımlılık arasındaki ilişkide duygu düzenleme güçlüğü'nün aracı rolüne ilişkin bulgular elde edilmiştir.

Korelasyon analizi sonucunda çocukluk çağı travmaları ile duygu düzenleme güçlüğü arasında anlamlı ve pozitif bir ilişki bulunmuştur. Benzer şekilde önceki araştırmalar, zorlu ve stresli olaylara işlevsel tepkiler üretme (Berzenski, 2019) ve olumsuz duygularla başa çıkma becerilerinin edinilmesinin, ihmal ve istismar gibi kötü muamele tarafından engellendiğini ortaya koymuştur (Messman-Moore, Walsh ve DiLillo, 2010). Mevcut çalışmanın sonuçları, çocuklukta ihmal ve istismarın artmasıyla birlikte duygu düzenleme güçlüğü'nün arttığını göstermektedir. Çocuğun kendine özgü güvenlik arayışı sırasında, çocuğun benlik ve güvenlik duygusunu tehdit eden ihmal ve istismar örüntülerinin, çevreyi güvensiz değerlendirme ve yetersizlik düşünceleriyle ilişkili olabileceği söylenebilir (Kendall-Tackett, 2002; Taillieu vd., 2016). Duygu düzenleme, gelişimsel süreçlerde kazanılan ruh sağlığını koruyucu bir beceri olarak görülmektedir. Çocuklara kötü muamelenin duyguların tanınması, anlaşılması ve düzenlenmesi için bir tehdit oluşturduğu ileri sürülebilir. Kötü muamele gören çocuklar, olumsuz duyguları yönetmede ve işlemede zorluklar yaratabilecek düzeyde uyarılma yaşayabilirler. İhmal veya istismar, çocuklukta olumsuz duygular karşısında duygusal durumu düzenlemeye yönelik yapıcı stratejiler öğrenilmesi için destekleyici bir ortamın oluşmasını engelleyebilir.

Araştırmanın bulgularına göre, çocukluk çağı travmaları ile anlamlı ve pozitif yönde ilişkili olan bir diğer değişken kişiler arası bağımlılıktır. Buna göre, kişiler arası bağımlılık eğilimi, çocukluk çağı ihmal ve istismarı ile artmaktadır. Önceki çalışmalar, çocukluk yaşantılarının, kişilerin öz-değeri, bireyselliği ve dünyadaki güven ve istikrar algısı üzerindeki etkileri nedeniyle kişiler arası ilişkilerde bağımlılık eğilimlerine yol açabileceğini öne sürmektedir (Bornstein, 2005; Reyome ve Ward, 2007). Alan yazında cinsel (Hill, Gold ve Bornstein, 2001; Lobbetael, Arntz ve Bernstein, 2010) ve fiziksel (Lobbetael, Arntz ve Bernstein, 2010; Johnson vd., 2000) istismarın kişiler arası bağımlılığı açıklayıcı etkisi olduğuna işaret eden çalışmalar mevcuttur (Kane & Bornstein, 2017). Allen ve Lauterbach (2007) mevcut çalışmanın bulgularına paralel olarak tekrarlayan çocukluk çağı travmalarının kişiler arası ilişkilerde yüksek düzeyde bağımlılıkla ilişkili olduğunu bulmuşlardır. Bornstein (1993), ebeveyn-çocuk ilişkisinin kişiler arası bağımlılığı açıklamada rol oynayabilecek faktörler arasında olabileceğini öne sürmüştür. Bakım verenle kurulan ilişkinin yakınlığı ve güvenliği ve bakım verenin ihtiyaçlarına karşı duyarlılığı, bağlanma stillerinin içsel çalışan modellerini etkileyen erken bağlanma etkileşimleridir. Bağlanma figürünün sağladığı yakınlık, diğer insanların bilişsel ve duygusal temsillerinin ve onlarla kurulan ilişkilerin, özellikle de bireyselliğin temsillerinin temelini oluşturur (Bowlby, 1982; Alexander vd., 1998). İçsel bağlanma modeline dayanarak, anne-baba ve yakın çevre tarafından ihmal ve istismara maruz bırakılmanın, diğer insanlara yönelik güven algısını olumsuz etkileyebileceği söylenebilir (Dye, 2018).

Çocukluk çağı travmaları ile kişiler arası bağımlılık arasındaki ilişkide duygu düzenleme gücünün aracılık etkisine ilişkin bulgular, çocukluk travmatik deneyimleri ile kişiler arası bağımlılık arasında duygu düzenleme gücünün dolaylı bir aracı etkisi olduğunu göstermektedir. Alanyazında bu ilişkiye aracılık eden değişkenleri araştıran bir çalışma olmaması dikkat çekicidir. Bakım verenle kurulan etkileşimlerin erken dönem etkileşimlerinin kritik etkisi göz önüne alındığında, ihmal ve istismar gibi kötü muameleler, sosyo-duygusal gelişim için bir risk faktörü olabilir. Zorlayıcı kişiler arası durumlar yaşam boyu görülebilse de, çocukluk çağı travmaları gelişimin erken aşamalarında oluşan uyumlu tepkiler üretebilmeye yönelik becerileri olumsuz etkileyebilmektedir. Bireylerin stresli olaylar sonucu değerlendirme ve yanıt oluşturma süreçleri, kişiler arası etkileşimleri dolaylı olarak etkileyebilir (Fischer ve Manstead, 2008). Bazı araştırmalar, çocukluk döneminde kötü muameleyle maruz kalan bireylerin yetişkinlikte kişiler arası ilişkilerinde güçlükler (Bailey, Moran ve Pederson, 2007; Paradis ve Boucher, 2010) ve kişiler arası işlevsellikte bozulmalar (Poole, Dobson ve Pusch, 2018; Christ vd., 2019) yaşayabileceğini göstermektedir. Mevcut çalışmanın bulguları, çocukluk çağı travmalarının bireylerin kişiler arası bağımlılık düzeyleri üzerindeki etkisini duygu düzenleme güçlükleri ile birlikte açıklayarak alanyazına katkı sağlayabilir.

Araştırma bulgularının olası sonuçlarına ek olarak, bazı sınırlılıklar da mevcuttur. İlk olarak, çocuklukta kötü muameleyle ilişkin toplanan bilgiler, bireylerin olayları geriye dönük yorumlamalarına dayanmaktadır. Öz bildirim ölçeklerinin sosyal istenirlik ve hatırlama güçlükleri gibi çeşitli faktörlerden etkilenebileceği göz önünde bulundurulabilir. Mevcut çalışma, çocukluk çağı travmaları ile kişiler arası bağımlılık arasındaki ilişkide duygu düzenleme gücünün aracılık etkisini incelemiştir. Gelecekteki çalışmalar, bu ilişkiye aracılık edebilecek diğer değişkenleri dikkate alarak modeli genişletebilir. Araştırmanın genellenebilirliği açısından Türkiye'nin farklı bölgelerinden ve farklı yaş gruplarını içeren bir örneklem grubu ile çalışmak faydalı olabilir. Bununla birlikte, üniversitelerin psikolojik danışmanlık merkezleri bünyesinde çocukluk çağı travmalarının etkileri ile ilgili seminerler ve eğitimler düzenlenebilir. Psikolojik danışma uygulamaları bağlamında çocukluk çağı travmalarının yetişkin dönemde ortaya çıkabilecek kişiler arası bağımlılık ya da duygu düzenleme gücünün gibi olumsuz boyutlarının dikkate alınmasının önemli olduğu düşünülmektedir.

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