

# Childhood Emotional Abuse, Caregiver Attachments, & Self-Worth: Mechanisms in the Cycle of Violence

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## ABSTRACT

The cycle of violence hypothesis holds that experiencing abuse in childhood increases the risk of perpetrating or experiencing violence, particularly in young adulthood. Research suggests that childhood maltreatment can increase children's risk for later violence, particularly in intimate relationships, by weakening their attachments to primary caregivers and lowering their sense of self-worth. Extant research has focused primarily on childhood physical abuse and exposure to intimate partner violence (IPV), leaving a gap in our understanding of if and how childhood emotional abuse (CEA) contributes to later violence. This study sought to fill that gap by evaluating if CEA predicted young adult IPV perpetration and victimization via compromised attachment to caregivers and self-worth. The current sample of 1,091 college students ( $M_{age} = 19.23$ ,  $SD = 1.65$ ; 68.4% female sex assigned at birth) was ethnically and racially diverse (i.e., 41.9% Asian, 26.5% Latine, 15.9% White, 5.9% Black, and 9.9% multiracial/other). Participants completed surveys in a research lab using a confidential online platform to assess their childhood maltreatment experiences, caregiver attachments, self-worth, and IPV perpetration and victimization. Multiple mediation analyses controlling for sex assigned at birth and childhood IPV exposure showed significant effects from CEA to IPV perpetration and victimization via decreased self-worth but not compromised attachment. Follow-up analyses by the sex assigned at birth showed an indirect pathway from CEA to IPV perpetration through compromised caregiver attachment for females. Consistent with prior data suggesting more substantial effects for females, CEA contributed to IPV victimization for females through decreased self-worth but not for males. These findings highlight the importance of considering sex-specific pathways from CEA to IPV. Our results also illuminate self-worth as a modifiable target of interventions to stem the cycle of violence and attachment security to prevent IPV perpetration among females.

**KEYWORDS:** attachment, emotional abuse, intimate partner violence, mediation, self-worth

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Liana Willis is a fourth-year Psychology/Law and Society major. She serves as a research assistant in the Youth Health and Development, the Social Neuroscience labs on campus, and the Adversity and Adaptation Lab under faculty mentor Tuppett Yates. After graduating, Liana plans to pursue a doctoral degree in community psychology to study violence prevention. She currently teaches an R'Course on campus entitled "Psychology of the U.S. Prison System" to fellow undergraduates.

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## INTRODUCTION

Scholars have proposed different theories to explain the effects of childhood maltreatment (i.e., before age 18) on later physical and mental well-being. The cycle of violence theory holds that experiencing childhood maltreatment increases the risk of perpetrating or experiencing violence in adulthood (e.g., Ehrensaft et al., 2003). Consistent with this theory, studies show that all forms of childhood maltreatment can predict later intimate partner violence (IPV; e.g., Curtis et al., 2022). However, fewer studies have considered the effects of childhood emotional abuse (CEA; i.e., acts that belittle, threaten, isolate, corrupt, or neglect children and their needs for emotional security; see Hibbard et al., 2012) on IPV perpetration and victimization. In a study of 184 adolescents, Zurbriggen et al. (2010) found that CEA was the strongest predictor of sexual aggression perpetration compared to other forms of maltreatment. However, other studies suggest that these findings may be sex-specific. For example, in a US survey of over 12,000 middle and high school students, CEA predicted IPV perpetration and victimization for females but not males (Richards et al., 2017). CEA remains underreported and understudied in maltreatment literature, likely due to the lack of a uniform legal definition and poor consensus around what constitutes CEA (Taillieu, 2016; Trickett et al., 2009). Thus, the present study filled these gaps by evaluating the cycle of violence hypothesis from CEA to later IPV as explained by two specific and modifiable developmental processes: attachment to caregivers and self-worth.

Attachment theory (Bowlby, 1973) posits that inconsistent or unresponsive caregiving, commonly experienced by maltreated youth, hinders the development of secure attachments in ways that compromise the safety and security of subsequent close relationships (e.g., Davies & Cummings, 1994; Reckdenwald et al., 2014). A sense of security increases children's capacities to regulate their emotions and behavioral expressions of emotion (Davies & Cummings, 1994), which is necessary for safely and successfully navigating conflict in

interpersonal relationships. Thus, we hypothesized that CEA would precipitate insecure attachments to caregivers that undermine later relational coping skills and perpetuate IPV.

Given that children's self-worth also develops in the context of the early caregiving environment (Harter, 2012), we further hypothesized that CEA would undermine children's self-worth in ways that engender later IPV. Indeed, prior studies have found that similar constructs, such as self-image and self-esteem, mediate or partially mediate associations between childhood maltreatment and later relationship violence (Reckdenwald et al., 2014; Goodman et al., 2021).

The current study advanced research on CEA and IPV by evaluating specific mechanisms underlying hypothesized pathways from CEA to later IPV perpetration and victimization. Multiple mediation analyses evaluated our hypothesis that compromised attachments to primary caregivers and decreased self-worth would account for predicted positive correlations between CEA and later IPV. All analyses held childhood IPV exposure constant to evaluate the specific contribution of CEA to later IPV, given prior research showing high rates of comorbidity between IPV exposure and CEA (Hamby et al., 2010). Finally, given that previous studies suggested sex-specific CEA effects (e.g., Richards et al., 2017), we also explored the proposed mediation model separately for females and males. The present study focused on a sample of college students because young adulthood coincides with establishing serious relationships.

## METHOD

### Participants & Procedures

Participants were 1,091 college students (68.4% female sex assigned at birth;  $M_{age} = 19.23$ ,  $SD = 1.65$ ) drawn from a broader study of young adult adaptation among 2,709 undergraduates attending a large public university in Southern California. Participants were included in the current study

if they reported having had a romantic relationship of two months or longer. The sample was racially and ethnically diverse (i.e., 41.9% Asian, 26.5% Latino, 15.9% White, 5.9% Black, and 9.9% multiracial/other).

Students were recruited from introductory psychology courses and individually completed a confidential online survey in private computer cubicles under the supervision of a trained examiner. Participants were compensated with course credit for their participation. The university's Institutional Review Board approved all procedures for Socio-Behavioral Research.

## Measures

### *Maltreatment*

The Childhood Maltreatment Interview Schedule (Briere, 1992) assessed CEA and childhood IPV exposure. This measure has demonstrated validity in predicting long-term outcomes of child maltreatment (Briere & Runtz, 1990). CEA was evaluated with 14 items inquiring about participants' experiences of being yelled at, humiliated, criticized, and insulted by each caregiver. Each item was rated on a 7-point scale, with 0 representing "never" and seven representing "more than 20 times" ( $\alpha = 0.910$ ). The average score across caregivers was used to create a total CEA frequency variable for participants who rated two caregivers. Childhood IPV exposure included witnessing one caregiver physically assault the other as rated on a 7-point frequency variable, with one representing "once" and seven representing "more than 50 times."

### *Caregiver Attachment*

Participants completed the Inventory of Parent and Peer Attachment to assess their attachment to their primary caregiver(s) (Armsden & Greenberg, 2009). Participants rated each caregiver on 17 items across three broad attachment domains: mutual trust, communication quality, and anger or alienation. Items were rated on a 5-point Likert scale,

with one representing "almost never or never true" and 5 representing "almost always or always true" ( $\alpha = 0.896$ ).

### *Global Self-Worth*

Participants completed the Self-Perception Profile for College Students (Neeman & Harter, 1986). Global self-worth was indicated by six items asking students to select from two statements the one which best applied to them (e.g., "Some students are often disappointed with themselves" or "Other students are usually quite pleased with themselves"), followed by a 2-point scale about how strongly they identified with the statement. A score of 1 represented a rating of "sort of true for me" and a 2 represented a rating of "really true of me" ( $\alpha = 0.877$ ).

### *Young Adult Intimate Partner Violence (IPV)*

Participants completed the Conflict Tactics Scale (Straus, 1979) to assess their experiences of IPV perpetration and victimization in a relationship of two months or longer. Items were rated for psychological aggression (e.g., swearing at a partner), physical assault (e.g., pushing a partner), and sexual coercion (e.g., making a partner have unprotected sex). IPV perpetration and victimization were indicated by 23 items each ( $\alpha_{\text{perpetration}} = 0.851$ ;  $\alpha_{\text{victimization}} = 0.830$ ) using a 7-point frequency scale from 1 representing "one time" to 7 representing "21+ times."

### *Data Analytic Plan*

All analyses were completed using IBM SPSS 28. Predictors and covariates were examined to ensure normality assumptions were met before conducting analyses. IPV perpetration and victimization scores were log-transformed to reduce kurtosis. A multivariate analysis of variance (MANOVA) with post hoc Bonferroni-corrected comparisons assessed mean differences across study variables by the sex assigned at birth, race/ethnicity, and their interaction. Correlation analyses evaluated associations between predictors, outcome variables, mediators, and

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covariates. Multiple mediation analyses were conducted using PROCESS version 4.2 (Hayes, 2022) to assess pathways from CEA to IPV through attachment and self-worth while controlling for participant sex assigned at birth and childhood IPV exposure.

## RESULTS

### Descriptive Statistics

A MANOVA revealed mean differences by the sex assigned at birth (Wilks'  $\lambda = 2.757$ ,  $p = 0.012$ ) and race/ethnicity (Wilks'  $\lambda = 4.911$ ,  $p < 0.001$ ), but not their interaction (Wilks'  $\lambda = 1.393$ ,  $p = 0.096$ ; see **Table 1**). Follow-up univariate ANOVAs showed that males reported stronger caregiver attachment, while females reported more IPV perpetration and victimization. There were significant differences across racial/ethnic groups regarding childhood IPV exposure, CEA, caregiver attachment, and self-worth. Participants who identified as multiracial/other reported more childhood IPV exposure than White and Asian participants. Asian and multiracial/other participants reported more CEA than White participants, while White and Latine participants had higher attachment scores than Asian and multiracial/other participants. Black and Latine participants reported higher self-worth than Asian participants, while White participants reported higher self-worth than Asian and multiracial/other participants.

	Participant Sex		Participant Race/Ethnicity				
	Female <i>M</i> ( <i>SD</i> )	Male <i>M</i> ( <i>SD</i> )	Asian <i>M</i> ( <i>SD</i> )	Latine <i>M</i> ( <i>SD</i> )	White <i>M</i> ( <i>SD</i> )	Black <i>M</i> ( <i>SD</i> )	Multi/other <i>M</i> ( <i>SD</i> )
IPV exposure	.57 (1.34)	.31 (.84)	.38 (1.06)	.60 (1.32)	.28 (.90)	.64 (1.39)	.76 <sup>2,3</sup> (1.45)
CEA	42.14 (20.19)	40.54 (19.89)	43.31 <sup>3</sup> (21.01)	38.22 (18.38)	38.36 (18.15)	42.55 (19.21)	47.50 <sup>3</sup> (20.68)
Caregiver Attachment	89.28 <sup>1</sup> (20.34)	92.73 (17.15)	87.04 (19.10)	93.72 <sup>2,4</sup> (18.62)	96.14 <sup>2,4</sup> (19.57)	89.81 (17.16)	86.52 (20.69)
Self-worth	18.14 (4.38)	18.55 (3.96)	17.32 (4.07)	18.92 <sup>2</sup> (4.38)	19.46 <sup>2,4</sup> (4.11)	19.59 <sup>2</sup> (4.12)	17.92 (4.08)
IPV Perpetration	3.42 <sup>1</sup> (.31)	3.37 (.29)	3.41 (.31)	3.41 (.31)	3.39 (.26)	3.40 (.28)	3.43 (.34)
IPV Victimization	3.41 <sup>1</sup> (.33)	3.38 (.32)	3.39 (.31)	3.40 (.31)	3.43 (.34)	3.35 (.29)	3.45 (.39)

CEA = Childhood Emotional Abuse. IPV = Intimate Partner Violence. <sup>1</sup>significant differences from males. <sup>2</sup>significant differences from Asians. <sup>3</sup>significant differences from White. <sup>4</sup>significant differences from multiracial/other.

**Table 1.** Descriptive Statistics for Study Variables by Participant Sex and Race/Ethnicity

### Bivariate Statistics

CEA correlated positively with childhood IPV exposure, IPV perpetration, and IPV victimization and negatively with caregiver attachment and self-worth. Caregiver attachment and self-worth were positively correlated with IPV perpetration and negatively correlated with victimization. IPV perpetration and victimization were positively correlated.

### Mediation Analyses

Controlling for participant sex assigned at birth and childhood IPV exposure, multiple mediation analyses showed significant indirect effects from CEA to IPV perpetration (**Figure 1**;  $B = 0.0005$ ,  $SE = 0.0002$ , 95% CI [0.0002, 0.0009]) and victimization (**Figure 2**;  $B = 0.0005$ ,  $SE = 0.0002$ , 95%

Variable	1	2	3	4	5	6
1. IPV exposure	—					
2. CEA	.22** .24** .14**	—				
3. Global self-worth	-.03 -.04 .02	-.30** -.30** -.29**	—			
4. Caregiver Attachment	-.22** -.24** -.12*	-.56** -.59** -.48**	.43** .44** .39**	—		
5. IPV Perpetration	.09** .08* .07	.21** .22** .19**	-.15** -.14** -.18**	-.12** -.09* -.13*	—	.
6. IPV Victimization	.06* .08* -.00	.17** .17** .17**	-.13** -.12** -.15**	-.12** -.10** -.11*	.82** .80** .87**	—

CEA = Childhood Emotional Abuse. IPV = Intimate Partner Violence. The top row shows the total sample, the middle row shows females, and the bottom row shows males. \*  $p < .05$ . \*\*  $p < .01$ .

**Table 2.** Correlations for Total Sample ( $N = 1091$ ), Females ( $N = 746$ ) & Males ( $N = 345$ )

CI [0.0001, 0.0009]) through self-worth. Interestingly, when examined separately by sex assigned at birth, the indirect pathway from CEA to IPV perpetration was explained by both caregiver attachment ( $B = -0.0010$ ,  $SE = 0.0004$ , 95% CI [-0.0018, -0.0001]) and self-worth for females ( $B = 0.0005$ ,  $SE = 0.0002$ , 95% CI [0.0001, 0.0010]), but only by self-worth for males ( $B = 0.0005$ ,  $SE = 0.0003$ , 95% CI [0.0000, 0.0012]). The indirect pathway from CEA to IPV victimization through self-worth was significant for females only ( $B = 0.0005$ ,  $SE = 0.0002$ , 95% CI [0.0001, 0.0010]).

## DISCUSSION

The current findings highlight the implications of CEA and global self-worth for understanding pathways to IPV perpetration and victimization in young adulthood. Given that at least one in seven children in the United States experienced abuse or neglect between 2021 and 2022 (Center for Disease Control, 2022), as well as findings showing increased risk of adulthood violence among those with a history of abuse (e.g., Ehrensaft et al., 2003), this study provides a crucial and timely evaluation of mechanisms underlying the association between CEA and IPV in young adulthood. Consistent with prior research (e.g., Zurbriggen

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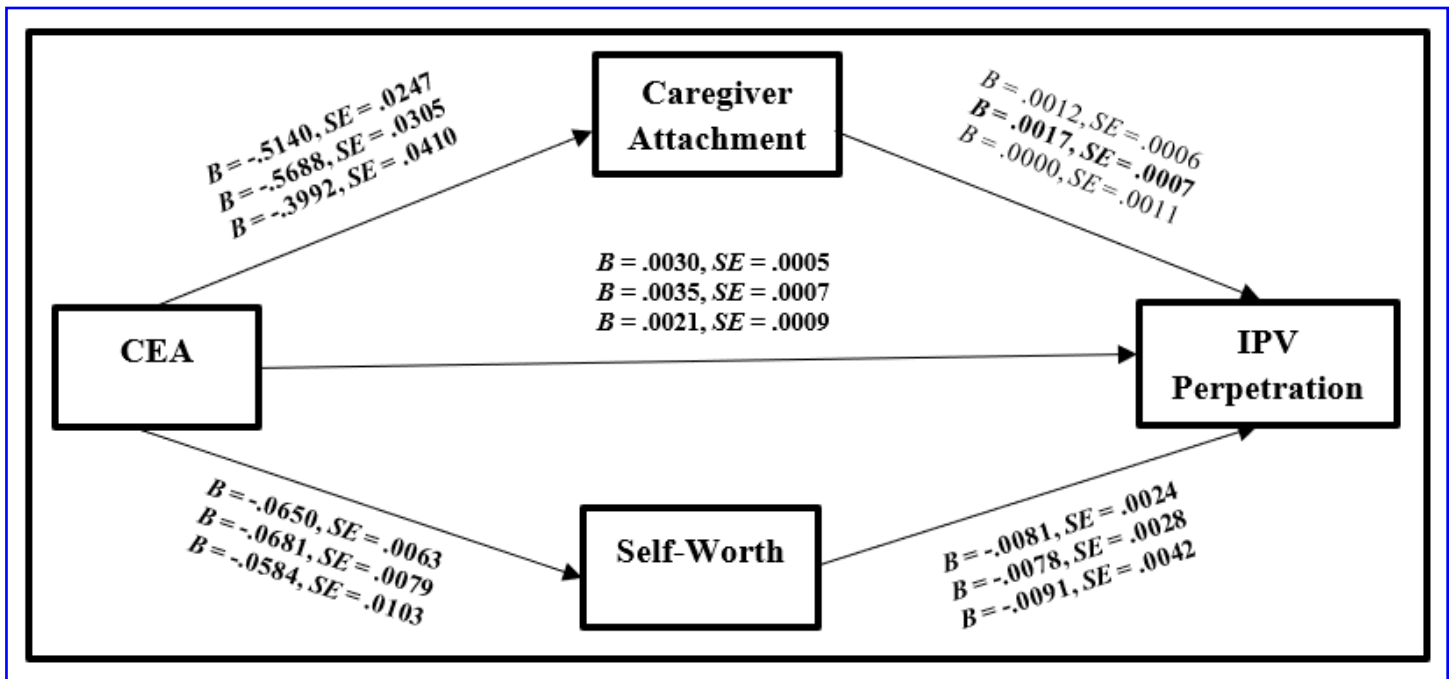


Figure 1. Regression of IPV perpetration on CEA through caregiver attachment and self-worth for the total sample (top), females (middle), and males (bottom). Bold denotes significant effects. Covariates (i.e., sex assigned at birth and childhood IPV exposure) are not shown for clarity.

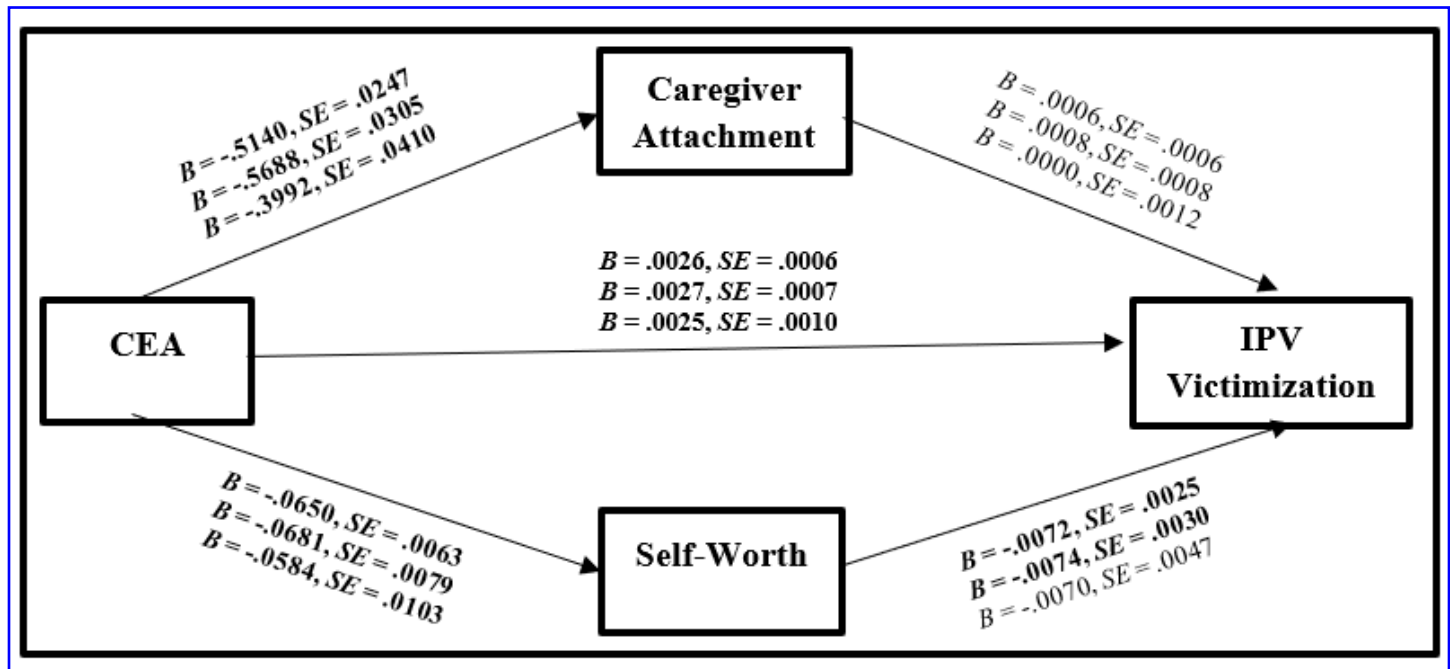


Figure 2. Regression of IPV victimization on CEA through caregiver attachment and self-worth for the total sample (top), females (middle), and males (bottom). Bold denotes significant effects. Covariates (i.e., sex assigned at birth and childhood IPV exposure) are not shown for clarity.

et al., 2010; Fosco et al., 2016; Richards et al., 2017), CEA was correlated with higher rates of IPV perpetration and victimization in young adulthood. Mediation analyses for the total sample revealed that, though CEA negatively affects caregiver attachment security and self-worth, only self-worth partially mediated relations between CEA and young adult IPV. Separated by the sex assigned at birth, the indirect pathway through self-worth to IPV perpetration was significant for both females and males, but the same indirect pathway to victimization was only significant for females. Interestingly, the adverse effects of CEA on caregiver attachment also explained IPV perpetration for females only. These findings, in part, contradict prior suggestions that CEA affects IPV for females only (Richards et al., 2017) while indicating female-specific pathways to IPV victimization through decreased self-worth and IPV perpetration through compromised caregiver attachments.

This investigation supports the cycle of violence hypothesis while extending this model to show that self-worth is an important and modifiable mediator of CEA effects on later IPV, particularly for females in the case of IPV victimization. These pathways are consistent with prior data showing self-esteem as a mechanism underlying the cycle of violence (e.g., Reckdenwald et al., 2014; Goodman et al., 2021). Although CEA contributed to poorer quality attachments, the non-significant pathway from attachment to IPV rendered the overarching pathway through attachment non-significant for both IPV perpetration and victimization in the total sample. However, caregiver attachment did play a significant explanatory role in predicting IPV perpetration for females.

### **Strengths & Limitations**

This investigation offers a new look at explanatory pathways from CEA to IPV while holding childhood IPV exposure constant. Strengths of this project include the relatively large and demographically diverse sample to support these analyses. However, several limitations may have influenced the study findings while pointing to directions for growth in

future research. First, this study used retrospective self-report measures of maltreatment. Multi-method maltreatment assessments can avoid confounds and missed information from individual measures (e.g., Zeanah & Humphreys, 2018; Grasso, 2022). Second, these data were collected 15 years ago and did not show representative numbers of participants with non-binary or transgender identities. Sexual minorities (e.g., lesbian, gay, etc.) were also underreported in the sample. Third, the cross-sectional nature of the study design limited our ability to draw causal inferences based on these findings. For example, it is equally plausible that IPV leads to lower self-worth as it is that it leads to IPV. Finally, the study drew on a convenience sample of college students, which can restrict the generalizability of the obtained findings to other young adult populations.

### **FUTURE RESEARCH RECOMMENDATIONS**

The current study illuminates promising targets for future interventions to address and redress the adverse effects of CEA on later relational health. Future research should explore interventions aimed at improving self-worth among individuals with a history of CEA. There is a strong need to emphasize protective factors and positive developmental outcomes among maltreatment survivors and explore developmental problems. Many youths in this sample did not report later IPV, despite pronounced histories of CEA. Future research should identify ways to strengthen family relationships, improve self-worth, and mitigate the adverse effects of CEA on relational development. Moreover, although we could not evaluate the specific impacts of CEA across ethnic and racial groups in this sample, there is a pressing need for future studies to focus on within-group patterns rather than exclusively focusing on patterns between groups. Future research must replicate these findings using a broader probability sample (e.g., with young adults who are not in college and reside outside of Southern California).

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Together, these findings show that self-worth is an important mechanism underlying the cycle of violence from CEA to later IPV. Moreover, for females, caregiver attachments may also be a source of protection in pathways to IPV perpetration. The high prevalence of maltreatment in the US necessitates efforts to identify groups that are at greatest risk for adverse outcomes to guide the development and successful implementation of targeted, preventative interventions. At the same time, many participants in this study broke the cycle of violence, which points to a need for strength-based studies of resilience to inform prevention and intervention efforts further.



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