

## **The Mediating Role of Resilience in the Relationship Between Childhood Emotional Abuse and Emotional Neglect and Codependency**

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## **The mediating role of resilience in the relationship between childhood emotional abuse and emotional neglect and codependency**

### **ABSTRACT**

Emotional abuse and neglect are among the most common forms of psychological trauma. It is known that individuals exposed to emotional abuse and neglect during childhood are at a higher risk of developing psychopathology in adulthood and experience various difficulties in interpersonal relationships. This research investigates the mediating role of resilience in the relationship between childhood emotional abuse and emotional neglect and codependency in young adults. The research group included 401 participants, aged between 18 and 45, with 305 females (71.6%) and 96 males (23.9%), reflecting various aspects of young adulthood, as defined by Levinson's theory of individual life structure. The data were collected using the Spann-Fischer Codependency Scale, the Emotional Abuse and Emotional Neglect subscales of the Childhood Trauma Questionnaire, and the Adult Resilience Measure. The results showed that childhood emotional abuse and neglect were positively related to relationship addiction and negatively related to resilience. Furthermore, resilience was found to be a partial mediating variable in the relationship between childhood emotional abuse and codependency. However, the established model of the mediating role of resilience in the relationship between childhood emotional neglect and codependency was not statistically significant. These results suggest that childhood emotional abuse and neglect are significant predictors of codependency and can help understand the impact of emotional abuse on codependency and resilience in young adults.

*Keywords:* Childhood trauma, emotional abuse, emotional neglect, codependency, resilience, young adulthood.

### **1. Introduction**

Childhood is one of the most crucial periods in human life, laying the foundation for an individual's personal, social, and emotional development (Whitcomb, 2013). Experiences during childhood significantly impact adulthood, and adverse relationships during childhood can affect psychopathology in later years (Christ et al., 2019; Gould et al., 2012; Spertus et al., 2003). Particularly, early-life psychological traumas can adversely affect the well-being of children and leave lasting imprints that can carry into adulthood (Sar and Ross, 2006). In recent years, there has been a growing awareness of the significance of psychological traumas experienced during childhood and an increasing focus on traumatic experiences (Aras et al.,

2023; Bakkal, 2023; Baskak, 2023; Bogdan et al., 2012; De Paul and Guibert, 2008; Drapeau and Perry, 2004; Uy et al., 2023). Childhood psychological traumas encompass experiences that occur before the age of 18, including physical abuse and neglect, sexual abuse, emotional abuse, and emotional neglect (Bernstein et al., 1994; Sar et al., 2012).

In the existing literature, physical abuse, neglect, and sexual abuse are often prominently featured when discussing childhood psychological traumas (Drapeau and Perry, 2004; Evin and Sümen, 2022; Gould, 2012). Additionally, it is noted that children are more likely to experience emotional abuse and neglect compared to other forms of psychological trauma (Brassard et al., 2000). However, it is also acknowledged that the visibility and detection of emotional abuse and neglect are relatively low and challenging (Üstündağ, 2020). Childhood emotional abuse and neglect, which are experiences of childhood trauma, are considered to be among the most significant mental health issues worldwide (Van der Kolk, 2005).

### *1.1. Childhood Emotional Abuse and Neglect*

Emotional abuse and neglect, which are among the most common psychological traumas during childhood (Helvacı Çelik and Hocaoglu, 2018; Şikel and Harmanacı, 2022), are recognized as actions carried out by adults that have adverse effects on a child's psychosocial development (Baskak, 2023). Emotional abuse and neglect involve patterns of harmful interaction between the child and the caregiver, without the need for physical contact (Glaser, 2002). The distinction between neglect and abuse lies in the fact that neglect involves passive processes, while abuse involves more active actions. In a broader sense, emotional neglect is known as the failure to meet a child's basic physiological and psychological needs (Şikel and Harmanacı, 2022). Emotional abuse, also known as mistreatment or psychological abuse, encompasses any behavior, whether deliberate or unintentional, that adversely affects a child emotionally (Baskak, 2023). Trocmé et al. (2001) explained emotional abuse as excessive mental, emotional, or developmental disruptions in a child resulting from exposure to extreme mistreatment or verbal abuse. The World Health Organization (WHO) defines emotional abuse as any behavior and action that can harm a child's mental or social development due to the inability to provide a supportive environment appropriate for a child's development (WHO, 1999). Brassard et al. (2000) clarified that emotional abuse includes various behaviors such as rejection, humiliation, threats, belittlement, intimidation, and hostile or mocking treatment of the child. According to Iwaniec (1995), emotional abuse is characterized by threats, humiliation, constant embarrassment, intimidation, subjecting the child to anxiety, continuous criticism, and any behavior or attitude that can harm the child cognitively.

In the literature, findings suggest that the negative effects of emotional abuse and neglect experienced during childhood do not diminish over time and are associated with a high risk of developing psychopathology in adulthood. Many studies have investigated the adverse effects of unmet emotional needs during childhood on adult well-being. It was reported that children who had their basic needs, such as nutrition and shelter, met but were emotionally neglected, experienced increased stress on the hypothalamic-pituitary-adrenal (HPA) axis in adulthood, which can lead to depression, anxiety, and even learning difficulties (Bogdan et al., 2012). A study by Gould et al. (2012) found that individuals who experienced emotional neglect during childhood had difficulty with emotional processing and using visual memory in adulthood. Additionally, it was observed that emotional abuse and neglect had negative effects on brain development and led to difficulties in empathy and various challenges in social relationships (De Paul and Guibert, 2008; Kim and Cicchetti, 2010). In a study conducted with a female sample, girls who experienced emotional neglect and abuse during childhood were found to have higher levels of depression and anxiety, and a significantly increased risk of post-traumatic stress disorder in adulthood (Spertus et al., 2008).

Individuals who struggle to form close relationships with others during childhood often find it challenging to establish and maintain romantic relationships in adulthood. In a study by Drapeau and Perry (2004) on this topic, it is suggested that individuals who experienced emotional neglect during childhood may develop problems in adulthood such as avoidance of close relationships, preferring to be alone, difficulty resolving relational conflicts, and excessive self-sacrifice in romantic relationships. Individuals who have not experienced emotional closeness in childhood may tend to sacrifice themselves excessively to establish close relationships in adulthood, may not feel strong enough without their partners, and may feel inadequate internally (Orban et al., 2021). This situation can pave the way for experiencing a pathological condition called relationship addiction.

Young (early) adulthood, particularly, is one of the periods when psychopathologies often emerge. According to Levinson's (1978, 1986, 1996) theory of the individual life structure, young adulthood encompasses the age range of 17-45 and marks the transition to middle age. This period is characterized by high energy, opportunities, and abundance. Levinson (1986) regarded adult development as a meaningful issue in psychology and emphasized that adult development is an important point of connection between psychology and other interdisciplinary fields such as sociology, biology, and history. Love, family, sexuality, creativity, and career advancement are among the opportunities available during this period

(Aktu, 2016). Therefore, during young adulthood, interpersonal relationships become the focal point, and more individual, intimate, and deep relationships are formed (İmamoğlu, 2008). In Levinson's (1996) theory, young adulthood is considered a crucial period that shapes individual and relational development. During this period, while individual and deep relationships are established, there are occasional challenges. Especially, individuals who were subjected to emotional abuse and neglect during childhood have been observed to have difficulties in establishing and maintaining emotional relationships in adulthood (Baskak, 2023).

Levinson's theory places great importance on emotional development during young adulthood. In young adulthood, emotions are expressed in various forms, such as friendship, attachment, love, marriage, and family. In this phase, individuals mainly maintain emotional relationships through romantic relationships, although emotional relationships can also be satisfied through work, social friendships, sibling relationships, and other reciprocal relationships (Marcia, 2002). Additionally, individuals discover aspects of themselves that are perceived by others as attractive, boring, or repelling. In this phase, individuals may also experience disappointments in close relationships. During this period, individuals may seek experiences with individuals who share similar values and attitudes, are easily accessible, socially validate them, and can provide support in times of difficulty (Bagwell et al., 2005). At the same time, although the sense of attachment continues throughout life, it may have some differences in young adulthood. Firstly, attachment in young adults is mutual. In other words, the type and direction of attachment are shaped parallel to the reactions of the other party. Secondly, due to individuation in this period, attachment is directed towards a close friend, a companion, or a spouse with whom life is shared (Aktu, 2006).

## *1.2. Codependency*

Codependency is a pathological condition characterized by an individual's overreliance on interpersonal relationships. It includes features such as excessive focus on others, self-acceptance of one's own worthlessness, submissiveness, and low self-esteem (Tanhan and Mukba, 2014). This condition can transform into a dysfunctional life model with contributions from both parties (Stafford, 2001). Fromm (1947) explained codependency as a personality type that includes focusing excessively on others and a constant need for approval and validation, which he called the receptive type. The dependent self takes control, relegating the true self to the background, and the individual struggles with negative feelings such as emptiness, guilt, and shame (Stafford, 2001). In codependency, individuals may have

to cope with painful emotions such as separation, fear of loss, jealousy, and guilt (Carson and Baker, 1994), and may neglect their own needs by overly focusing on others (Chang, 2018).

Studies on codependency in the literature tend to emphasize the personality traits of individuals. These personality traits include low self-esteem, submissiveness, self-centeredness, perfectionism, preoccupation with irrational thoughts, and an inability to set boundaries in relationships (Fuller and Warner, 2000). Additionally, when looking at behavioral characteristics in codependency, one can observe behaviors such as excessive irresponsibility or taking responsibility for everything, fear of losing control, inability to say no to others, and efforts to please everyone (Reyome et al., 2010).

Individuals who experienced emotional abuse and neglect during childhood have been observed to struggle in close relationships in adulthood (Evgin and Sümen, 2021). These individuals may have difficulty adopting their own identities, dislike themselves, and often exhibit manipulative behaviors to gain control over the relationship (Ahmad Abadi et al., 2017). Manipulative behaviors, which may not be closely monitored during childhood, can hinder the development of healthy relationships in adulthood (Evgin and Sümen, 2021). In codependency, individuals become so preoccupied with the needs of others that they lose their own identities (Orban et al., 2021). This leads to various psychological disorders, primarily depression and anxiety. Emotions are often suppressed in these individuals, and they may engage in various negative behaviors, such as excessive exercise, preoccupation with work, gambling, problematic sexual behaviors, and even substance abuse, in order to feel better (Ahmad Abadi et al., 2017).

During childhood, parents are considered the primary source of emotional needs (Orban et al., 2021). A child learns that the only chance to be close to the caregiver is to receive the necessary attention (Muller, 1985). This learning style continues into adulthood, and individuals may see themselves as the overly caring and sacrificing side in the relationship. Furthermore, a person who was emotionally neglected during childhood may attribute the possibility of the partner leaving them, as in childhood, to their own behavior, which can lead to self-blame (Reyome et al., 2010). As a result, individuals may develop a dependency on the relationship, which they believe can eliminate the doubt in themselves, and engage in an excessively self-sacrificing relationship. Therefore, it is considered that experiencing emotional abuse and neglect during childhood increases the likelihood of codependency in adulthood and that emotional neglect and abuse are significant predictors of codependency.

### *1.3. The Mediating Role of Resilience*

Despite adverse living conditions during childhood, it is known that not every individual develops psychopathology in adulthood. Some individuals who have experienced negative life experiences during their childhood manage to maintain their functionality in adulthood, contrary to expectations (Özsoy and Çelikkaleli, 2021; Parsafar and Yazdkhasti, 2015). Even though these individuals encounter numerous distressing and traumatic events throughout their lives, positive changes have been observed in their responses to adverse experiences and coping strategies. This phenomenon was initially explained by Kobasa (1979) as a personality trait that acts as a resilience factor when faced with stressful life events. Later, this phenomenon was described as resilience, which refers to an individual's ability to successfully overcome adverse conditions and adapt, despite challenging circumstances (Aras et al., 2023). Studies on this subject have shown that individuals with high resilience successfully cope with various stressful life events such as violence, illness, and poverty (Öz and Bahadır Yılmaz, 2009).

The initial studies on resilience suggested that it was an inherent personality trait (Block and Block, 1982). However, later research revealed that resilience is a personality trait that can be learned (Beardslee and Podorefsky, 1988). Furthermore, for resilience to be discussed, both risk and protective factors are required. Resilience is seen as a dynamic construct that arises from the interaction of these two factors (Rutter, 1999). Consequently, resilience has become an important topic for mental health professionals working with individuals traumatized in childhood. The ability to cope with adverse experiences helps these individuals adapt to life and function effectively. Research findings suggest that resilience can reduce negative emotions associated with childhood emotional neglect and abuse (Masten et al., 1999; Özsoy and Çelikkaleli, 2021). Additionally, resilience not only facilitates coping with adverse life events but also has a positive impact on interpersonal communication (Öz and Bahadır Yılmaz, 2009). Therefore, it is thought that resilience may serve as a mechanism against the adverse effects of childhood emotional abuse and neglect, as well as against codependency, and may mediate the relationship between childhood emotional abuse and neglect and codependency.

### *1.4. Significance of this Study*

According to Levinson (1986), young adulthood is a period in an individual's life marked by significant changes. This phase constitutes the most fulfilling and yet equally taxing years

of life, both psychologically and emotionally (Aktu, 2016). It is a time characterized by rich relationships involving fulfilling social roles, establishing families, gaining respect in society, and organizing careers. Consequently, it is believed that codependency experienced during this period can significantly impact an individual's life. Additionally, Levinson (1986) emphasizes the need to examine individuals in their entirety across their lifespan, rather than only in specific stages or a few related stages. In this study, an attempt has been made to explain the relationship between childhood emotional abuse and neglect and codependency during the young adulthood stage, as well as the mediating role of resilience in this relationship.

The existing literature contains several studies examining the relationship between childhood emotional abuse and emotional neglect and codependency (Evgin and Sümen, 2022; Küçükyıldız, 2022; Reyome et al., 2010; Şahanoğlu, 2021), as well as studies investigating the connection between resilience and these variables (Arslan, 2015b; Aydın, 2018; Bakkal, 2023; Doğruer et al., 2019; Gamzeli and Kahraman, 2018). There are also studies exploring the relationship between resilience and codependency (Parsafar and Yazdkhasti, 2015). However, the lack of any study that simultaneously considers these three variables or explores the mediating role of resilience in the relationship among them highlights the significance of this research. Thus, it is yet to be fully understood how childhood emotional abuse and neglect, in conjunction with resilience, affect codependency in adulthood. Within this context, it is expected that this research will provide valuable insights into understanding the impact of traumatic experiences during childhood on adult relationships and shed light on the role of resilience in this context.

## **2. Method**

### *2.1. Research Design*

In this study, it is assumed that childhood emotional abuse and neglect can have a direct and indirect impact on codependency in young adults, and that resilience will play a mediating role in this relationship. To reveal the direct predictive power of the independent variables (childhood emotional abuse and neglect) and the mediating variable (resilience) on the dependent variable (codependency), a correlational survey model has been employed. The correlational survey model is defined as a model aimed at determining the existence or degree of joint variation between two or more variables (Karasar, 2023). With this objective in mind, firstly, the relationships between the specified variables were examined, and then the



hypothetical model proposing indirect relationships between childhood emotional abuse and neglect and codependency through resilience was tested. Accordingly, the following hypotheses were developed:

H<sub>1</sub>: Childhood emotional abuse significantly predicts codependency.

H<sub>2</sub>: Childhood emotional neglect significantly predicts codependency.

H<sub>3</sub>: Resilience acts as a mediator between childhood emotional abuse and codependency.

H<sub>4</sub>: Resilience acts as a mediator between childhood emotional neglect and codependency.

## 2.2. Participants

The participants in the study consisted of a total of 401 adult individuals selected through convenience sampling methods. This sample reflects various aspects of young adulthood, which is considered a significant period according to Levinson's theory of individual life structure. Demographic variables of the participants are provided in Table 1.

**Table 1.**

Demographic Variables

Demographic Variable	Variable	N	%
<b>Gender</b>	Woman	305	76.1
	Male	96	23.9
<b>Marital Status</b>	Married	130	32.4
	Single	271	67.6
<b>Age</b>	18-24	187	46.6
	25-31	131	33.4
	32-38	51	12.7
	39-45	29	7.2

When looking at the demographic distribution of the participants in Table 1, it can be observed that 305 of them were female (76.1%), while 96 were male (23.9%). In terms of marital status, the majority of participants were single (67.6%, N=271). The ages of the participants ranged from 18 to 45, with a higher percentage of participants falling within the 18 to 24 age range (46.5%, N=187).

## 2.3. Data Collection Instruments

### 2.3.1. Adult Resilience Measure

The Adult Resilience Measure was developed by Arslan (2015a) following validity and reliability studies. The scale consists of 21 items, organized into four subscales, and is based on a 5-point Likert-type scale. These subscales are categorized as Cultural and Contextual Resources, Relational Resources, Family Resources, and Individual Resources. The total

Cronbach's alpha coefficient for the scale was calculated as .94, and the Cronbach's alpha internal consistency coefficients for the sub-factors were .82, .86, .84, and .85, respectively. The test-retest reliability coefficient for the scale is .85. Confirmatory factor analysis conducted for the current study confirmed the four-factor structure of the scale, and model fit values were found to be well-fitting ( $\chi^2/df=5.56$ , RMSEA=0.69, SRMR=0.082, GFI=0.92, AGFI=0.89, CFI=0.95, IFI=0.95). Additionally, the reliability analysis for the entire scale indicated a Cronbach alpha internal consistency coefficient of .89, with item-total correlations ranging from .46 to .72.

### 2.3.2. *Spann-Fischer Codependency Scale*

The adaptation of Fischer et al.'s (1991) scale to Turkish was conducted by Tanhan and Mukba (2014). The scale consists of a total of 16 items and a single dimension, rated on a 6-point Likert scale. Two items (5 and 7) in the scale are reverse-coded. In the adaptation studies to Turkish, the Cronbach's alpha internal consistency coefficient of the scale was determined to be .65. Within the scope of the current study, confirmatory factor analysis indicated that Items 5 and 8 of the scale had inadequate representational power, and these two items were removed from the scale. Subsequently, a second confirmatory factor analysis confirmed the single-factor structure of the scale, and model fit values were found to be a good fit ( $\chi^2/df=2.90$ , RMSEA=0.69, SRMR=0.056, GFI=0.92, AGFI=0.89, CFI=0.86, IFI=0.86). Moreover, the reliability analysis resulted in a Cronbach alpha internal consistency coefficient of .88, and item-total correlations ranged from .38 to .69.

### 2.3.3. *Childhood Trauma Questionnaire*

The adaptation of the questionnaire created by Bernstein et al. (1994) to Turkish was carried out by Şar et al. (2012). The scale comprises a total of 28 items and five subscales, rated on a 5-point Likert scale. These subscales are explained as Sexual Abuse, Emotional Neglect, Emotional Abuse, Physical Abuse, and Physical Neglect. Within this study, only the Emotional Abuse and Emotional Neglect subscales were used. According to Şar et al. (2012), the Cronbach's alpha internal consistency coefficient for the scale was found to be .93. For test-retest reliability studies, the scale was administered to participants again with a two-week interval, and the scale was found to have a high level of test-retest reliability ( $r=.90$ ). In the context of this study, the reliability analysis resulted in a Cronbach alpha internal consistency value of .74 for the Emotional Abuse subscale and .86 for the Emotional Neglect subscale.

Additionally, the item correlations ranged from .23 to .60 for the Emotional Abuse subscale and from .33 to .83 for the Emotional Neglect subscale.

#### *2.3.4. Personal Information Form*

The personal information form, prepared by the researchers, includes demographic variables such as gender, age, and marital status of the participants.

#### *2.4. Data Collection Process*

Before collecting the research data, permission was obtained from the XXX University Social and Human Sciences Publication Ethics Committee with decision number XXX on February 23, 2023. The data were collected by the researchers both face-to-face and online using Google Forms. The data collection process took three months. Before filling out the forms, participants were provided with necessary information about the purpose and confidentiality of the study, and informed consent was obtained. After the data collection process, data checks revealed 19 outliers in the dataset. Since these data points were believed to have been randomly entered and to affect the reliability of the study, they were removed from the dataset. Analysis continued with the remaining 401 data points.

#### *2.5. Data Analysis*

Data were analyzed using the SPSS 26.00 and AMOS 24.00 software packages. In the first step of data analysis, the frequency values of the dataset were checked. Then, skewness and kurtosis values of the scales were examined for normality assumptions. The reliability, linearity, and homoscedasticity values of all measurement instruments used in the research were assessed. The presence of multicollinearity problems in the data was checked. Confirmatory factor analyses were conducted for the measurement instruments. The interrelationships between variables required to construct the model were examined using Pearson's product-moment correlation coefficients. To determine the mediating role of the tested model in the research, the SPSS Macro Process add-on developed by Hayes (2015) was used. Hayes' Model 4 assumption was employed for the mediating role. To support the results of the regression analysis, bootstrapping was performed with 5000 resamplings. This procedure was used to test the assumption that the indirect effects of the mediating role do not contain a zero value (Hayes, 2018). When examining the mediating roles, the criteria of Baron and Kenny (1986) were considered. According to their criteria, there should be significant relationships between the independent (childhood emotional abuse and neglect), dependent (codependency), and mediating (resilience) variables. Additionally, when adding the

mediating variable to the relationship between the independent and dependent variables, there should be a sharp decrease in the level of prediction between the independent and dependent variables for full mediation, and a partial decrease for partial mediation (Baron and Kenny, 1986).

### 3. Findings

#### 3.1. Descriptive Statistics and Relationships between Variables

The descriptive statistics of emotional abuse, emotional neglect, codependency and resilience and the correlational relationships between these variables are given in Table 2.

**Table 2.**

Descriptive Statistics and Correlational Relationships

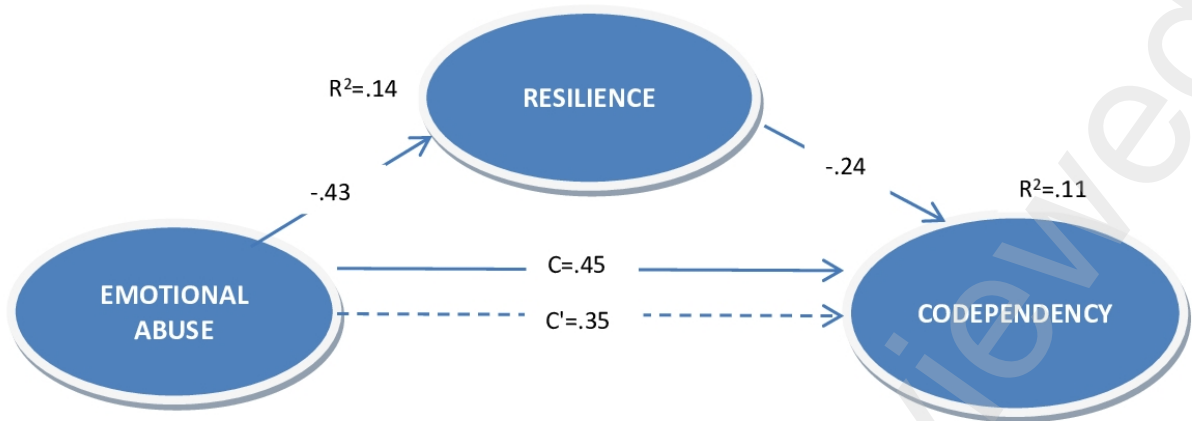
Variable	Descriptive Statistics					Correlation		
	$\bar{X}$	Ss	$\alpha$	Skewness	kurtosis	2	3	4
1. Emotional Abuse	1.40	.66	.74	1.48	1.47	.54**	.30**	-.37**
2. Emotional Neglect	1.83	.69	.86	1.06	.63	1	.16**	-.49**
3. Coependency	1.10	1.05	.80	.04	-.24		1	-.27**
4. Resilience	4.08	.60	.89	-.66	-.07			1

N=401, \*\* $p < .01$  \* $p < .05$

When Table 2 is analyzed, since the skewness and kurtosis values of all variables are within the range of  $\pm 1.5$ , the assumption of normal distribution of the data is accepted (Tabachnick & Fidell, 2013). Again, according to the findings in Table 2, it is seen that there are significant relationships between all variables. Accordingly, emotional abuse has a significant positive relationship with emotional neglect ( $r = .54, p < .01$ ) and codependency ( $r = .30, p < .01$ ) and a significant negative relationship with resilience ( $r = -.37, p < .01$ ). Emotional neglect has a significant positive relationship with codependency ( $r = .16, p < .01$ ) and a significant negative relationship with resilience ( $r = -.49, p < .01$ ). Finally, codependency was found to have a significant negative relationship with resilience ( $r = -.27, p < .01$ ).

#### 3.2. The Mediating Role of Resilience between Childhood Emotional Abuse and Codependency

The results regarding the mediating role of resilience in the relationship between childhood emotional abuse and codependency are given in Figure 1 and Table 2.



**Fig. 1.** Standardised Beta Values for the Mediating Role of Resilience in the Relationship between Childhood Emotional Abuse and Codependency

**Table 3.**

Path Coefficients and Effect Results of the Model

<b>Dependent Variable:</b>							
<b>Resilience</b>	<b>R</b>	<b>R<sup>2</sup></b>	<b>MSE</b>	<b>F</b>	<b>p</b>	<b>df1</b>	<b>df2</b>
Model 1	.37	.14	.31	65.39	<.01	1	399
Constant	4.69		SE	t	p	LLCI	ULCI
Emotional Abuse	-.43		.08	58.57	<.01	4.53	4.84
			.05	-8.08	<.01	-.53	-.32
<b>Dependent Variable:</b>							
<b>Codependency</b>	<b>R</b>	<b>R<sup>2</sup></b>	<b>MSE</b>	<b>F</b>	<b>p</b>	<b>df1</b>	<b>df2</b>
Model 2	.26	.07	.33	31.18	<.01	1	399
Constant	2.52		SE	t	p	LLCI	ULCI
Emotional Abuse	.45		.10	23.07	<.01	2.32	2.74
			.07	6.23	<.01	.31	.59
<b>Dependent Variable:</b>							
<b>Codependency</b>	<b>R</b>	<b>R<sup>2</sup></b>	<b>MSE</b>	<b>F</b>	<b>p</b>	<b>df1</b>	<b>df2</b>
Model 3	.34	.11	.56	26.52	<.01	2	398
Constant	3.66		SE	t	p	LLCI	ULCI
Emotional Abuse	.35		.33	10.97	<.01	3.01	4.32
Resilience	-.24		.07	-4.51	<.01	.19	.50
			.06	-3.6	<.01	-.37	-.11

According to the results obtained in Table 3, it is seen that childhood emotional abuse predicts resilience negatively and significantly in Model 1 ( $F=65.39$ ,  $\beta=-.43$ ,  $R^2=.14$ ,  $p<.01$ ). Childhood emotional abuse explains approximately 14% of the variance in psychological resilience. According to Model 2, childhood emotional abuse predicts codependency positively and significantly ( $F=31.18$ ,  $\beta=.45$ ,  $R^2=.07$ ,  $p<.01$ ). It is seen that childhood emotional abuse explains approximately 7% of the variance in codependency. Finally, the

mediating role of resilience was examined in Model 3 and the proposed model was found to be statistically significant. The direct effect between childhood emotional abuse and codependency ( $\beta=.45$ , 95% confidence intervals, lower and upper limits  $=.31$  and  $.59$ ,  $p<.01$ ) was significantly reduced after the resilience variable was included ( $\beta=.35$ , 95% confidence intervals, lower and upper limits  $=.19$  and  $.50$ ,  $p<.01$ ). With the addition of the mediating variable to the relationship between the independent variable and the dependent variable, it is seen that there is a partial decrease in the effect of the independent variable on the dependent variable rather than a sharp decrease. This finding can be interpreted as indicating that resilience is a partial mediating variable between childhood emotional abuse and codependency (Baron & Kenney, 1986). In addition, childhood emotional abuse and resilience variables together explain approximately 11% of the variance in codependency.

### 3.3. *The Mediating Role of Resilience between Childhood Emotional Neglect and Coependence*

The results regarding the mediating role of resilience in the relationship between childhood emotional neglect and codependency are given in Table 4.

**Table 4.**

Path Coefficients and Effect Results of the Model

<b>Dependent Variable:</b>							
<b>Resilience</b>	<b>R</b>	<b>R<sup>2</sup></b>	<b>MSE</b>	<b>F</b>	<b>p</b>	<b>df1</b>	<b>df2</b>
Model 1	.49	.24	.27	128.50	<.01	1	399
Constant	<b>Impact</b>		<b>SE</b>	<b>t</b>	<b>p</b>	<b>LLCI</b>	<b>ULCI</b>
Emotional Neglect	4.73	.06	7.89	<.01	4.61	4.85	
	-.35	.03	-11.33	<.01	-.41	-.29	
<b>Dependent Variable:</b>							
<b>Codependency</b>	<b>R</b>	<b>R<sup>2</sup></b>	<b>MSE</b>	<b>F</b>	<b>p</b>	<b>df1</b>	<b>df2</b>
Model 2	.15	.02	.62	10.46	<.01	1	399
Constant	<b>Impact</b>		<b>SE</b>	<b>t</b>	<b>p</b>	<b>LLCI</b>	<b>ULCI</b>
Emotional Neglect	2.88	.09	30.29	<.01	2.7	3.07	
	.15	.04	3.23	<.01	.05	.24	
<b>Dependent Variable:</b>							
<b>Resilience</b>	<b>R</b>	<b>R<sup>2</sup></b>	<b>MSE</b>	<b>F</b>	<b>p</b>	<b>df1</b>	<b>df2</b>
Model 3	.27	.07	.59	15.77	<.01	2	398
Constant	<b>Impact</b>		<b>SE</b>	<b>t</b>	<b>p</b>	<b>LLCI</b>	<b>ULCI</b>
Emotional Neglect	4.47	.36	12.37	<.01	3.76	5.18	
Resilience	.03	.05	.64	>.05	-.07	.13	
	-.33	.07	-4.53	<.01	-.47	-.18	

Based on the results in Table 4, it is seen in Model 1 that childhood emotional neglect predicts resilience at a significant negative level ( $F=128.50$ ,  $\beta=-.35$ ,  $R^2=.24$ ,  $p<.01$ ).

Accordingly, childhood emotional neglect explains approximately 24% of the variance in resilience. According to Model 2, childhood emotional neglect predicts codependency positively and significantly ( $F=10.46$ ,  $\beta=.15$ ,  $R^2=.02$ ,  $p<.01$ ). Accordingly, it is seen that childhood emotional neglect explains approximately 2% of the variance in codependency. In Model 3, the mediating role of resilience was examined, but the proposed model was not found to be statistically significant, because, after the resilience variable was added to the direct effect between childhood emotional neglect and codependency, it was observed that the significant relationship between these two variables was disrupted ( $\beta=.03$ ,  $p>.05$ ). In addition, since there was a zero value between the lower and upper limits of the indirect relationship between childhood emotional neglect and codependency (95% confidence intervals, lower and upper limits  $=-.07$  and  $.13$ ), this indirect path was not found to be significant. Therefore, the fourth hypothesis of the study,  $H_4$  was rejected.

#### **4. Discussion**

Within the scope of this research, the mediating role of resilience in the relationship between childhood emotional abuse and neglect and codependency in young adults was investigated. According to the results obtained, it was observed that childhood emotional abuse and neglect had a positive and significant relationship with codependency, and a negative and significant relationship with resilience. Furthermore, it was found that resilience played a partial mediating role in the relationship between emotional abuse and codependency. However, the model established for the mediating role of psychological resilience in the relationship between emotional neglect and codependency was not statistically significant.

When examining the literature, studies that explore the relationship between childhood emotional abuse and neglect during childhood and codependency in adults generally support the presence of significant relationships between these variables (Evgin and Sümen, 2022; Küçükyıldız, 2022; Reyome et al., 2010; Şahanoğlu, 2021). This underscores the long-term impact of emotional abuse and neglect during childhood on emotional relationships in adulthood (Christ et al., 2019). Therefore, it can be assumed that traumatic emotional experiences in childhood can increase the tendency toward codependency in young adulthood, as emotional relationships are often central during this life stage (Levinson, 1978). Hence, the appropriate support and protection of children's emotional needs are of great importance in enabling them to develop healthy relationships in young adulthood.

Similarly, when looking at the literature, studies examining the relationship between childhood emotional abuse and neglect and resilience generally show a negative significant relationship between these variables (Arslan, 2015b; Aydın, 2018; Bakkal, 2023; Doğruer et al., 2019; Gamzeli and Kahraman, 2018). The findings of this research show that traumatic experiences during childhood can negatively affect and alter relationship patterns in adulthood, and that increased resilience can reduce the likelihood of individuals falling into negative relationship patterns. Therefore, it is crucial to emphasize that individuals who have experienced negative childhood experiences should seek support to enhance their resilience, which can help them cope with the effects of childhood trauma and develop healthier relationships.

It is worth noting that, while this research could not directly find evidence of a mediating role of resilience in the relationship between childhood emotional abuse and codependency, there are indirect findings in the literature that support such relationships. The presence of a significant relationship between childhood emotional abuse and resilience (Evgin and Sümen, 2022; Küçükyıldız, 2022; Reyome et al., 2010; Şahanoğlu, 2021), as well as between emotional abuse and codependency (Arslan, 2015b; Aydın, 2018; Bakkal, 2023; Doğruer et al., 2019; Gamzeli and Kahraman, 2018), and the presence of a significant relationship between resilience and codependency (Parsafar and Yazdkhasti, 2015), indirectly support these relationships. The results suggest that resilience has the potential to mitigate the negative effects of childhood emotional abuse on codependency. Individuals with a strong psychological foundation can effectively cope with the traumatic effects of childhood emotional abuse and build healthy relationships in adulthood (Özsoy and Çelikkaleli, 2021). Therefore, it is recommended that individuals who have experienced negative childhood experiences seek support to enhance their resilience, as it can be a positive step toward healthier relationship patterns.

Regarding the fourth hypothesis of the study, the model directly examining the mediating role of resilience between childhood emotional neglect and codependency did not yield statistically significant results. This suggests that resilience does not play a mediating role in explaining the relationship between emotional neglect and codependency. These results could have been influenced by various factors, such as the sample size of the study, the validity and reliability of the measurement tools, and the complexity of the relationships between variables. The context in which the research was conducted and factors like culture and social influences may also have impacted the results.



Based on the research results, it is clear that resilience plays a significant role in the relationship between childhood emotional traumas and codependency. Thus, it is emphasized that traumatic childhood experiences can have a negative impact on emotional relationships in young adulthood. It is also concluded that resilience has the potential to reduce the effects of these experiences, highlighting the importance of supporting individuals in enhancing their resilience.

#### *4.1. Limitations and Recommendations*

One of the significant limitations of this research is that the data collection tools were based on self-report scales (Adult Resilience Measure, Spann-Fischer Codependency Scale, Childhood Trauma Questionnaire). In self-report scales, participants may sometimes distort their responses to enhance social acceptance (conforming to societal or researcher expectations), leading to a subjective evaluation. Furthermore, participants may not remember their childhood experiences accurately, or these experiences may lead to changes in their emotional responses. To address such limitations, the use of more objective measurements and different data sources is needed.

Another limitation that can be observed in this research is the limitation of correlational studies. The research is a correlational study aimed at determining the relationships between codependency, childhood emotional abuse, emotional neglect, and resilience. In correlational studies, it is not possible to draw definite conclusions about cause-and-effect relationships. Therefore, experimental studies and different research methods, including qualitative methods such as observation or interviews, can be used to understand the impact of childhood emotional abuse and neglect on codependency and resilience in adults.

To ensure the consistency of research results and obtain more precise findings, different methods can be used or the focus can be shifted to different sample groups. Additionally, comprehensive research is needed that takes into account multiple factors, including various variables and effects, to understand the impact of childhood emotional abuse and neglect on codependency and resilience in young adults. Such studies will help us better understand the effects of childhood emotional abuse and neglect and contribute to the development of more effective prevention and intervention measures. Beyond examining the relationship between childhood emotional abuse and neglect, codependency, and resilience, it should not be overlooked that other factors (such as socioeconomic status, educational level, social support,

and developmental stage) may influence these relationships. Including these factors in the research will make the results more comprehensive and meaningful.

## **5. Conclusion**

The results obtained from the research indicate that childhood emotional abuse has a significant impact on codependency in adults, and that resilience has the potential to mitigate this effect. These findings provide valuable insights into how negative childhood experiences affect relationships in adulthood. Therefore, enhancing resilience is important for reducing negative outcomes such as codependency and for developing healthier relationships in society. Additionally, the research has shown that resilience plays a critical role in coping with the adverse effects of childhood emotional abuse and neglect. Adults with a strong psychological foundation can effectively deal with the traces of traumatic childhood experiences and build healthier relationships.

## **Authors' Contributions**

All authors contributed to the study's conception and design. Data preparation and collection were performed by Kübra Kale. Analysis was executed by Ferdi Yağan and Şermin Kaya. The first draft of the manuscript was written by Zöhre Kaya and all authors commented on previous versions of the manuscript. All authors read and approved the final manuscript.

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## **Declaration of Competing Interest**

The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.

## **Data Availability**

Data will be made available on request.

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