

ORIGINAL RESEARCH

The Impact of Childhood Traumatic Experiences on Self-Esteem and Interpersonal Relationships

Nurgul Ozdemir¹ , Sengul Kocamer Sahin² 

¹ Gaziantep University, Faculty of Health Science, Department of Psychiatric Nursing, Gaziantep, Turkey

² Gaziantep University, Faculty of Medicine, Department of Psychiatry, Gaziantep, Turkey

Abstract

Objective: Traumatic experiences during childhood have an impact on the emotional states of individuals during their adulthood. The impacts of traumatic experiences during childhood on self-esteem were examined in the present study. It was also aimed to examine the relationship between these traumatic experiences and interpersonal relation levels.

Methods: This was a descriptive-cross-sectional study carried out during the dates of February 11, 2018 and March 11, 2018 on Gaziantep university students. A personal information form, Rosenberg Self-Esteem Scale (RSES), Scale of dimensions of interpersonal relationships (SDIR), childhood trauma questionnaire (CTQ) were used. Multiple linear regressions were calculated to predict SDIR/RSES values based on CTQ values with confounding effects.

Results: Of the 926 students who participated in the study, 712 (76.9 %) were female, 214 (33.1 %) were male. CTQ total was determined to be positively related with the empathy, trust, emotion awareness dimensions of SDIR and negatively related with approval dependence dimension. Empathy, trust, emotion dimensions of SDIR were significantly positive correlated with all sub dimensions of CTQ which are emotional neglect, emotional abuse, physical neglect, physical abuse and sexual abuse. Approval dimension of SDIR was significantly negative correlated with all sub dimensions of CTQ. RSES total mean score was not determined to be related with CTQ total in our study, but a relationship was determined between RSES and only the emotional abuse sub-dimension of CTQ. The mean scores of RSES in individuals were determined to have a negative relationship with trust and emotion sub-dimensions of SDIR and to have a positive relationship with the empathy and approval sub-dimensions. Also ANOVA revealed significant associations between CTQ and SDIR total means after adjusting for education and economical levels and between CTQ and RSES total means after adjusting for Accommodation.

Conclusion: Childhood traumas can have an impact on the interpersonal relationships resulting in a decrease in trust, low emotional awareness, increased approval dependence, and greater empathy in interpersonal relationships. The low self-esteem may affect interpersonal relationships resulting in lower levels of empathy, increased approval dependence, low emotional awareness and decreased trust. Improvement of positive parenthood and increase in the family-child interaction are effective and applicable methods for preventing abuse and neglect. Trainings on this subject are suggested since reliable-consistent relationships are important.

Keywords: Childhood Traumatic Experiences; Self-Esteem; Interpersonal Relationships, Internet Use

INTRODUCTION

Childhood abuse can be defined as the damages inflicted on the physical, emotional, sexual or mental development of the child as a result of the active actions of people obliged to look after the child (1). Even though it is difficult to make a clear distinction on the type of

the harm inflicted, different trauma types have been defined subject to the type of the behavior and attitude of the adult causing the trauma. The first is physical trauma which can be seen clearly as trauma type and it is followed by emotional and sexual traumas. On the other hand the concept of neglect which is a more specific dimension of the subject of trauma encompasses not meeting the physical, emotional and instructional needs of the child and make up a part of the traumas (2). The destructiveness of childhood traumas in the mental world of the child continues at a severe or moderate level throughout the life of the child. It is indicated that individuals subject to childhood traumas give more emotional and psychotic reactions to daily stressors in the later stages of their lives (3,4). It has been stated in

Corresponding Author: Sengul Kocamer Sahin

Gaziantep University, Faculty of Medicine, Department of Psychiatry, Gaziantep, Turkey.

E-mail: sengulsahin@gantep.edu.tr

Citation: Ozdemir N, Sahin Kocamer S. The Impact of Childhood Traumatic Experiences on Self-Esteem and Interpersonal Relationships Psychiatry and Behavioral Sciences 2020; 10(4):185-191.

Doi: 10.5455/PBS.20200502025907

Received: May 02, 2020

Accepted: Sep 07, 2020

studies carried out in Turkey that childhood traumas have impacts on hopelessness, depressive temperament and negative self-esteem during the young adulthood and adulthood periods of individuals (5-7).

Self-esteem is the state of admiration and acceptance due to the approval of the concept of self-reached as a result of the self-assessment of the individual. It is the level at which the individual perceives himself/herself as skilled, important, valuable and acceptable (8,9). Self-esteem can be indicated as low and high (9-11). High self-esteem means that we consider ourselves and our inner world's valuable (12). It indicates that the individual has complete trust in one's own self, values and trusts himself/herself. Individuals with low self-esteem have low self-confidence. These individuals are timid; they are not inquisitive and creative in comparison with others (13).

Interpersonal relationships are taken into consideration as factors that affect both the individual processes of an individual and his/her social relationships (14). Self-perception of the individual and mutual expectations of the individuals plays a determining role in starting, sustaining and ending of relationships. The source of these perceptions and expectations are the personal schemes that individuals have (15,16). The individual acquires a social identity by way of normative interaction such as getting approval from a group or community, adapting in order to avoid rejection, exclusion or conflicts as well as informational interaction for acquiring useful and necessary information by way of conformance. Thus, the individual adjust himself/herself according to the society model by shaping his/her relations (14,16).

Some sociodemographic factors have effects on self-esteem and interpersonal relationships like childhood traumas. Wrong attitudes such as the actions or inactions of parents that can be considered as socially or legally inappropriate or harmful may lead to traumas in the child (17). Emotion awareness levels are related with internet use and recently, internet usage has become an increasing problem for interpersonal relationships (18). So those sociodemographic factors were examined as confounding factors in this study.

Self-perceptions of the related individuals play a determining role in the starting and sustaining of relationships. These perceptions and expectations are shaped by way of childhood cognitive processes (19). So we aimed to analyze the relationship between self-esteem and all sub dimensions of interpersonal relationship levels and the impact of sociodemographic factors on all these in order to examine the state of

impact of childhood trauma types on the lives of the individuals in the future.

METHODS

This descriptive-cross-sectional study was carried out during the dates of February 11, 2018 and March 11, 2018 for determining the impact of childhood traumas of university students on their self-esteem and interpersonal relationships dimensions. G*Power (Foul, Erdfelder, Lang, and Buchner. 2007) program was used to calculate the sample size for Correlation Analysis. 194 was calculated to be a minimum size of sample to achieve %80 power with alpha being equal to 0.05 and small effect size of 0.20. Ethics committee permission of the study was submitted to the Clinical Research Ethics Committee of Gaziantep University and approval was obtained (2018/378). Necessary permission was obtained from the Dean of the Gaziantep University the study was conducted at the Health Sciences Faculty. Verbal and written informed consents were obtained from the students. Of the 926 students, 712 (76.9%) were female and 214 (23.1%) were male.

Tools

In addition to the personal information form prepared by the researcher, Rosenberg Self-Esteem Scale, Interpersonal relationships dimensions scale, Childhood Trauma Questionnaire were used. The data were acquired via face-to-face interview after stating the purpose and necessity of the study.

Personal Information Form: comprised of questions on the age, gender, marital status, economic state, attitudes of parents, and number of siblings, accommodation type, and duration of internet usage prepared by the researcher.

Rosenberg Self-Esteem Scale (RSES): The scale that is now among the four main reliable scales used in many studies for measuring self-esteem was first developed by Rosenberg (20). The scale was adapted to Turkish by Çuhadaroglu and psychiatric interviews were carried out for testing the validity of the self-esteem category after completing the reliability and validity studies for the scale (21). It is comprised of 40 items in 10 multiple choice sub-categories. The self-esteems of the students were classified as high, moderate and low during the evaluations in these interviews subject to their opinions on themselves. Relationships between the opinions and the results acquired from the self-esteem scale were calculated and the validity ratio was calculated as 0.71

whereas the test-retest reliability coefficient of the scale was determined as 0.75.

Scale of Dimensions of Interpersonal Relationships (SDIR): It is a unique scale that predicts interpersonal relationships and determines relationship dimensions (22). It examines interpersonal relationships subject to dimensions entitled as approval dependency, empathy, trust in others and emotion awareness. Empathy is used for understanding the emotions of others, trust reflects bonding without fear, and approval dependency reflects a dimension in which the opinions, attitudes and values of others are given primary importance. Emotion awareness is the state of the individual evaluating his/her dimensions as determining factors (22). A 5-point Likert type scale was used in the study. The ratings in the scale were as “5: Defines Completely”, “4: Defines Mostly”, “3: Defines Partially”, “2: Defines Very Little”, “1: Does not define”. The scale is comprised of 53 items and 4 sub-dimensions. Trust in others and emotion awareness subscales of SIDR are evaluated inversely. Hence, trust in others decreases with increasing trust sub-dimension score. While emotion awareness decreases with increasing emotion awareness sub-dimension score. Total score is not calculated in the scale.

Childhood Trauma Questionnaire (CTQ): Childhood Trauma Questionnaire Short Form developed by Bernstein et al. (2003). It is comprised of 28 items. It was adapted into Turkish by Sarin 2014. It is a retrospective tool of measurement for evaluating the history of abuse during childhood (23,24). CTQ-SF is a 5-point Likert type measurement tool with responses in the form of never true (1), rarely true (2), sometimes true (3), often true (4) and very often true (5). An increase in the questionnaire score indicates that traumas have intensified during childhood. The lowest score that can be acquired from the questionnaire is 25, whereas the highest score is 125. The scale is comprised of five sub-dimensions. These are physical abuse, sexual abuse, emotional abuse, physical neglect and emotional neglect sub-dimensions.

Statistical Analysis

Behaviors of the quantitative variables were indicated using centralization and variance measurements: Average \pm SD scale internal consistencies were evaluated via Cronbach's alpha. Spearman's Rank Correlation test was used for measuring the power and correlations between the Scale of Dimensions of SDIR, RSES and CTQ Total Scores of the Students. In order to show CTQ's relationship with each SIDR and RSES parameters, multiple

regression analysis was used. Some characteristics such as age, gender and economical level were used to adjust for confounding effects. Statistical significance was determined as $p = 0,05$ for all cases. Statistical analyses were carried out via IBM SPSS (Statistics Package for Social Sciences for Windows, Version 21.0, and Armonk, NY, IBM Corp.).

RESULTS

Of the 926 students who participated in the study, 712 (76.9%) were female and 214 (23.1%) were male. Table 1 presents the distribution of the socio-demographic characteristics.

Table 1. Distribution of the socio-demographic characteristics of students

Characteristics	N	%
Age		
17-21	642	69.3
22-25	284	30.7
Gender		
Male	214	23.1
Female	712	76.9
Education level		
1st grade	235	25.4
2nd grade	241	26.0
3rd grade	228	24.6
4th grade	222	24.0
Attitude of the mother		
Democrat	121	13.1
Protective	22	2.4
Authoritative	631	68.1
Neglecting	152	16.4
Attitude of the father		
Democrat	150	16.2
Protective	57	6.2
Authoritative	425	45.9
Neglecting	294	31.7
Longest place of residence		
Province	507	54.8
District	248	26.8
Village	171	18.5
Smoking		
Yes	119	12.9
No	807	87.1
Alcohol consumption		
Yes	70	7.6
No	856	92.4
Internet-social media use		
Yes	922	99.6
No	4	0.4
Duration of internet use		
1-2hours	245	26.5
3-4hours	398	43.0
5-6hours	94	21.0
7 hours and above	89	9.6

The SDIR sub-dimension scales for the students were determined as: Empathy 19.7 ± 4.9 , Trust 44.41 ± 8.03 , Emotion 38.31 ± 7.77 , and Approval 45.15 ± 9.17 . The total score of the students for RSES was determined as 12.63 ± 2.36 . The CTQ total score of the students was determined as 48.0 ± 20.97 . The results were presented separately for each scale group. (Table 2)

Table 2. Averages of the students for SDIR, RSES and CTQ

SCALES	Avg. (x)-Std (ss)	Min-Max
SDIR		
Empathy	19.7 ± 4.9	20 (9 – 34)
Trust	44.41 ± 8.03	44 (18 – 70)
Emotion	38.31 ± 7.77	38 (18 – 62)
Approval	45.15 ± 9.17	45 (19 – 71)
Total	147.56 ± 13.3	149 (94 – 191)
RSES	12.63 ± 2.36	13 (2 – 24)
CTQ		
Emotional Neglect	10.91 ± 5.11	10 (5 – 25)
Emotional Abuse	9.46 ± 4.71	8 (5 – 25)
Physical Neglect	10.4 ± 4.13	9 (5 – 25)
Physical Abuse	8.64 ± 5.06	4 (5 – 25)
Sexual Abuse	8.59 ± 5.35	5 (5 – 25)
Total	48.01 ± 20.97	40 (25 – 125)

SDIR: Interpersonal Relationship Scale, RSES: Rosenberg Self-Esteem Scale, CTQ: Childhood Traumas Questionnaire

Empathy, trust, emotion dimensions of SDIR were significantly positive correlated with all sub dimensions of CTQ which are emotional neglect, emotional abuse, physical neglect, physical abuse and sexual abuse. Approval dimension of SDIR was significantly negative correlated with all sub dimensions of CTQ. Table 3

presents the correlation between the SDIR, RSES, and CTQ.

A positive and statistically significant correlation was determined between the RSES total score and the empathy ($r: 0.081$, $p < 0.001$) and approval ($r: 0.145$, $p < 0.001$) subscales of SDIR. A negative and statistically significant relationship was determined between the RSES total score and the trust ($r: -0.157$, $p < 0.001$) and emotion ($r: -0.075$, $p < 0.001$) sub-scales of the SDIR. A negative statistically significant relationship was determined between RSES total score and only the emotional abuse sub-scale of the CTQ ($r: -0.075$, $p < 0.001$).

No statistically significant relationship was observed between the CTQ (both total score and sub-scales) and RSES ($p > 0.001$).

Multiple linear regressions were calculated to predict SDIR values based on CTQ values. Beta for CTQ is being estimated as 0.110, with t value = 5.381, $df = 1$ and p value < 0.001 . Overall F statistics was estimated as 8.927 with $df (5, 918)$, p value = 0.011 and $R^2 = 0.065$. Also no interaction effect was found to be significant between CTQ and other two confounding variables (Table 4a).

Multiple linear regressions were calculated to predict RSES values based on CTQ values. Anova table presented above. Beta for CTQ is being estimated as -0.007 , with t value = -1.967 , $df = 1$ and p value = 0.0048. Overall F statistics was estimated as 2.966 with $df (8, 915)$, p value < 0.001 and $R^2 = 0.011$. Also no interaction effect was found to be significant between CTQ and other confounding variable (Table 4b).

Table 3. Correlation between the Scale of Dimensions of SDIR, RSES and CTQ total scores of the students

CTQ Total Score and Sub-Scales								
SDIR Dimensions		Emotional Neglect	Emotional Abuse	Physical Neglect	Physical Abuse	Sexual Abuse	CTQ Total	RSES Total
Empathy	r	0.183**	0.203**	0.22**	0.229**	0.184**	0.235**	0.081*
Trust	r	0.295**	0.263**	0.256**	0.253**	0.247**	0.302**	-0.157**
Emotion	r	0.31**	0.297**	0.318**	0.273**	0.256**	0.331**	-0.075*
Approval	r	-0.308**	-0.263**	-0.318**	-0.263**	-0.215**	-0.312**	0.145**
RSES Total	r	-0.031	-0.075*	-0.029	-0.038	-0.036	-0.057	

Spearman's Rank Correlation Test; SDIR: Interpersonal Relationship Scale, RSES: Rosenberg Self-Esteem Scale, CTQ: Childhood Traumas Questionnaire

* $p < 0.05$, ** $p < 0.001$

Table 4a. ANOVA table for predicting SDIR

Parameter	Df	Sum Sq	Mean Sq	F value	Pr (>F)
CTQ	1	6,323.85	6,323.85	38.59	<0.001
Residuals	915	149,959.89	163.89		

SDIR: Interpersonal Relationship Scale. Economical Level and Education parameters used to adjust for confounding

Table 4b. ANOVA table for predicting RSES

Parameter	Df	Sum Sq	Mean Sq	F value	Pr (>F)
CTQ	1	15.65	15.65	2.85	0.09
Residuals	918	5,045.35	5.50		

RSES: Rosenberg Self-Esteem Scale. Accommodation parameter used to adjust for confounding.

DISCUSSION

Childhood traumas have intensive or low impacts on the future lives of the individuals via the mental breakdown during childhood. It was aimed in the present study to examine the relationship between self-esteem and interpersonal relationships level in order to evaluate the level at which childhood traumas have an impact on the future lives of the individuals. The result of our study put forth that childhood traumas have an impact on all dimensions of SDIR. Self-Esteem was determined to be significantly related with only emotional abuse sub dimension of childhood traumas. It can be observed that low self-esteem has adverse impacts on all dimensions of SDIR by decreasing empathy, increasing approval dependence, decreasing emotional awareness and decreasing trust in bonding. The study results have been discussed after a classification.

The relationship between SDIR and CTQ

In addition to the mutual expectations of individuals, self-perceptions of the related individuals play a determining role in the starting and sustaining of relationships. These perceptions and expectations are shaped by way of childhood cognitive processes (19). Childhood traumas result in difficulties in secure attachment and relations in the future lives of the individuals (25,26). Childhood emotional abuse was found to be related personal and emotional adjustment (27). These difficulties may also be present in relationships with close partners or aging parents (28,29). A positive relationship was observed in our study between childhood traumas and the empathy, trust, emotion awareness dimensions of SDIR. This result is an indication of low emotion awareness and increased approval dependence as well as an indication of the negative reflection of traumas on interpersonal relationships. Early maladaptive schemas which linked with childhood emotional maltreatment were found to be related with difficulties in emotion regulation (30). Impulsivity and aggression was found to be associated with childhood traumas (31,32). Complex trauma was found to be related with difficulties in interpersonal relationships (33). Approval dependence is a reflection of the cases for which the opinions and attitudes of those other than the individual play a determining role. In such cases, relationships are adjusted according to the attitudes and behaviors of others rather than the individual. However, a positive relationship was observed between empathy which will have a positive impact on interpersonal relationships and childhood traumas.

This can be predicted if traumas make individuals more sensitive against the pain of others. It was supported in another study based on this hypothesis that childhood traumas increase empathy (34).

The Relationship between Self-Esteem and Childhood Traumas

Self-Esteem was not observed to be related with the total evaluation of childhood traumas in our study, but it was determined to be related with only the emotional abuse sub-dimension. Emotional abuse is defined as actions by adults that harm the personality of the child and prevent his/her psycho-social development and is a complex form of abuse which is more difficult to define in comparison with other forms of abuse, which is observed more frequently and discerned with difficulty (35). It was observed when similar studies were examined that Onat et al. reported a negative relationship between emotional and Physical Neglect and Self-Esteem (36). Dereboy et al. put forth that childhood traumas affect both the skills of the individual to regulate his/her emotions as well as the development of the sense of identity (37). Çakar et al. determined that childhood traumas predict 28 % of the change in negative self-perception (38). Children subject to abuse and/or neglect may become individuals with low self-esteem who experience difficulties in interpersonal relationships if no intervention is made (35). When it is considered that emotional abuse forms the core of all types of abuse and neglect during childhood and that it is one of the most destructive and frequent forms of abuse (36), Self-Esteem may have been determined to be related with only the emotional abuse sub-dimension since our study was carried out with a normal and healthy population.

Relationships between SDIR and Self-Esteem

Self-Esteem of the individual was related negatively with trust and emotional sub-dimension of SDIR and positively with the empathy and approval sub-dimensions. Trusting, accepting and consistent behaviors of the caregiver towards the baby results in making the baby feel important and develop a positive self-perception. This also affects its relations with others resulting in the development of the belief that others can also be trustworthy thereby forming mental schemes related with positive self-perception (39), where as negative self-perception will have a negative impact on interpersonal relationships (39). Dissatisfaction related with interpersonal relationships was determined to be

negatively related with positive self-perception [40]. Our results indicate the level at which self-perception affects interpersonal relationships. When the sub-dimensions are examined, it can be observed that low self-esteem has adverse impacts on all dimensions of SDIR with less empathy, increase in approval dependence, low emotion awareness and decrease in secure attachment.

The fact that there is no control group was the most important limitation of the study. Causality relationships could not be discussed because of the cross-sectional nature of the study. Moreover, structured psychiatric assessments, such as the SCID II were not performed and questions on parental attitude were directed to acquire information in the form of personal opinions without a structured assessment tool. Thus, some accompanying diagnoses were likely to be missed. The study had a large sample size despite the fact that 76.9% of the sample consists of women.

CONCLUSION

Childhood traumas have an impact on all dimensions of interpersonal relationships. Emotional abuse which makes up the core of the types of childhood abuse and neglect decrease self-esteem which has a significant impact on interpersonal relationships. Analysis results of sociodemographic factors have put forth that alcohol use and smoking, gender and age are related with childhood traumas and that alcohol use, age and gender are related with interpersonal relationships and that internet use is related with self-Esteem. Improvement in positive parenthood and the increase of family-child interaction is an applicable and effective method for preventing abuse and neglect. It is suggested to carry out trainings in this subject since secure-consistent relationships are important and positive relationships decrease the risk of maltreatment. It is considered that trainings provided by individuals working in the field of psychiatry on child abuse and the related precautions that should be taken to individuals who have and wish to have children will be effective in providing psychological support for increasing Self-Esteem which plays an important role in communication skills.

Acknowledgements: The authors thank to Usen F (info@statsfiles.com) for statistical analysis.

REFERENCES

- [1] Taner Y, Gökler B. Çocuk istismarı ve ihmali: Psikiyatrik yönleri. *Acta Medica Cordoba* 2004;35(2):82-86. (Turkish)
- [2] Tıraşçı Y, Gören S. Çocuk istismarı ve ihmali. *Dicle Med J.* 2007;34(1):70-74. (Turkish)
- [3] Glaser J-P, Van Os J, Portegijs PJ, Myin-Germeys I. Childhood trauma and emotional reactivity to daily life stress in adult frequent attenders of general practitioners. *J Psychosom Res.* 2006;61(2):229-36. doi:10.1016/j.jpsychores.2006.04.014.
- [4] Lardinois M, Lataster T, Mengelers R, Van Os J, Myin-Germeys I. Childhood trauma and increased stress sensitivity in psychosis. *Acta Psychiatr Scand.* 2011;123(1):28-35. doi:10.1111/j.1600-0447.2010.01594.x
- [5] Bostancı N, Albayrak B, Bakoğlu İ, Çoban Ş. Üniversite öğrencilerinde çocukluk çağı travmalarının depresif belirtileri üzerine etkisi. *Yeni Sempozyum Dergisi NYS*, 2006;44(2):100-106. (Turkish)
- [6] Özen Ş, Antar S, Özkan M. Çocukluk çağı travmalarının umutsuzluk, sigara ve alkol kullanımı üzerine etkisi: Üniversite son sınıf öğrencilerini inceleyen bir çalışma. *Düşünen Adam* 2007;20(2):79-87. (Turkish)
- [7] Altun H. Assessment of depression level, suicidal thoughts, and suicide attempts in childhood sexual abuse. *Psychiatry and Behavioral Sciences* 2018; 8(3);111. doi:10.5455/jmood.201.711.06073834
- [8] Robson PJ. Self-esteem—a psychiatric view. *Br J Psychiatry.* 1988;153(1):6-15.
- [9] Balat GU, Akman B. Farklı sosyo-ekonomik düzeydeki lise öğrencilerinin benlik saygısı düzeylerinin incelenmesi. *Fırat Üniversitesi Sosyal Bilimler Dergisi* 2004;14(2):175-183. (Turkish)
- [10] Coleman JC, Hendry LB. *The Nature of Adolescence.* Psychology Press; 1990.
- [11] Arıca OT. Üniversite öğrencilerinde saldırganlık, benlik saygısı ve denetim odağı ilişkisi. *Postgraduate thesis.* Marmara University, Istanbul. 1995 (Turkish).
- [12] Erkan S, Kaya A. Deneyisel olarak sınanmış grupla psikolojik danışma ve rehberlik programları II. *Pegem Atf İndeksi* 2017:1-521. (Turkish)
- [13] Donnellan MB, Trzesniewski KH, Robins RW, Moffitt TE, Caspi A. Low self-esteem is related to aggression, antisocial behavior, and delinquency. *American Psychological Society* 2005;16(4):328-335. doi:10.1111/j.0956-7976.2005.01535.x
- [14] Kaya A. Kişilerarası ilişkiler ve etkili iletişim. *Pegem Atf İndeksi* 2017:1-343. (Turkish)
- [15] Yiğit İ, Çelik C. İlişki doyumunun erken dönem uyum bozucu şemalar, kişilerarası ilişki tarzları ve kendilik algısı açısından değerlendirilmesi. *Türk Psikoloji Yazıları* 2016;19(38):77-87. (Turkish)
- [16] Siyez DM. Kişilerarası ilişkilerin başlangıcı ve gelişimi. *Pegem Atf İndeksi* 2017:62-91. (Turkish)
- [17] Bozdemir F, Gündüz B. Bağlanma stilleri, anne baba tutumları ve çocukluk çağı örselenme yaşantılarının duygusal zeka ile ilişkileri. *International Journal of Human Sciences* 2016;13(1):1797-1814. (Turkish)
- [18] Shim YS. The impact of the Internet on teenagers' interpersonal communication behaviors: The relationship between Internet use and desire for face-to-face communication: Southern Illinois University at Carbondale; ProQuest Dissertations

- Publishing, 2004. p.56-61.
- [19] Gong J, Chan RC. Early maladaptive schemas as mediators between childhood maltreatment and later psychological distress among Chinese college students. *Psychiatry Res.* 2018;259:493-500. doi:10.1016/j.psychres.2017.11.019
- [20] Rosenberg M. Rosenberg self-esteem scale (RSE). Acceptance and commitment therapy Measures package 1965;61(52).
- [21] Cuhadaroglu F. Self-esteem in adolescents. Postgraduate thesis. Hacettepe University, Ankara, Turkey. 1986.(Turkish)
- [22] İmamoğlu SE, Aydın B. Kişilerarası ilişki boyutları ölçeği'nin geliştirilmesi. *Psikoloji Çalışmaları/Studies in Psychology* 2009;29:39-64.
- [23] Bernstein DP, Fink L, Handelsman L, Foote J, Lovejoy M, Wenzel K et al. Initial reliability and validity of a new retrospective measure of child abuse and neglect. *Am J Psychiatry.* 1994;151(8):1132-6. doi:10.1176/ajp.151.8.1132
- [24] Şar V, Öztürk PE, İkikardeş E. Çocukluk çağı ruhsal travma ölçeğinin Türkçe uyarlamasının geçerlilik ve güvenilirliği. *Türkiye Klinikleri J Med Sci.* 2012;32(4):1054-1063. doi:10.5336/medsci.2011-26947 (Turkish)
- [25] Davis JL, Petretic-Jackson PA, Ting L. Intimacy dysfunction and trauma symptomatology: Long-term correlates of different types of child abuse. *J Trauma Stress* 2001;14(1):63-79. doi:10.1023/A:100.783.5531614.
- [26] Hankin BL. Childhood maltreatment and psychopathology: Prospective tests of attachment, cognitive vulnerability, and stress as mediating processes. *Cognit Ther Res.* 2005;29(6):645-671. doi:10.1007/s10608.005.9631-z
- [27] Moore SM, Welsh MC, Peterson E. History of Childhood Maltreatment: Associations with Aggression and College Outcomes. *J Agress Maltreat Trauma* 2019;1-18. doi:10.1080/10926.771.2019.1637989
- [28] Paradis A, Boucher S. Child maltreatment history and interpersonal problems in adult couple relationships. *J Agress Maltreat Trauma* 2010;19(2):138-158. doi:10.1080/109.267.70903539433
- [29] Kong J. Childhood maltreatment and psychological well-being in later life: the mediating effect of contemporary relationships with the abusive parent. *J Gerontol B Psychol Sci Soc Sci.* 2018; 73(5): e39–e48. doi:10.1093/geronb/gbx039
- [30] Şenkal Ertürk İ, Kahya Y, Gör N. Childhood emotional maltreatment and aggression: The mediator role of the early maladaptive schema domains and difficulties in emotion regulation. *J Agress Maltreat Trauma* 2020;29(1):92-110 doi:10.1080/10926.771.2018.1541493
- [31] Van Nieuwenhove K, Meganck R. Interpersonal features in complex trauma etiology, consequences, and treatment: A literature review. *J Agress Maltreat Trauma* 2019;28(8):903-928. doi:10.1080/10926.771.2017.1405316
- [32] Tunc S, Kose, S. The effect of childhood trauma on impulsivity in patients with bipolar disorder. *Psychiatry and Behavioral Sciences* 2019;9(3):78-84. doi:10.5455/PBS.201.906.22030752
- [33] Adigüzel V, Özdemir N, Şahin, Ş K. Childhood traumas in euthymic bipolar disorder patients in Eastern Turkey and its relations with suicide risk and aggression. *Nord J Psychiatry.* 2019; 73(8), 490-496. doi:10.1080/08039.488.2019.1655589
- [34] Greenberg DM, Baron-Cohen S, Rosenberg N, Fonagy P, Rentfrow PJ. Elevated empathy in adults following childhood trauma. *PLoS One* 2018;13(10):e0203886. doi:10.1371/journal.pone.0203886
- [35] Arslan R. Çocukluk dönemi duygusal istismarı ile depresyon arasındaki ilişkide erken dönem uyumsuz şemaların aracı rolüne ilişkin bir gözden geçirme. *Klinik Psikiyatri Dergisi* 2016;19(4):202-210. doi:10.5505/kpd.2016.42714
- [36] Güliz O, Hüsnüye D, Günaydın S, Uğurlu F. Çocukluk döneminde yaşanan ihmal veya istismarın benlik saygısına etkisinin incelenmesi. *Sağlık Bilimleri ve Meslekleri Dergisi* 2016;3(1):9-15. doi:10.17681/hsp.61140 (Turkish)
- [37] Dereboy Ç, Şahin Demrakı E, Şakiroğlu M, Şafak Öztürk C. Çocukluk çağı travmalarının, kimlik gelişimi, duygu düzenleme güçlüğü ve psikopatoloji ile ilişkisi. *Türk Psikiyatri Dergisi* 2018;29(4). doi:10.5080/u20463
- [38] Çakar FS, Fatma Ebru İ, Asıcı E. Çocukluk çağı travmaları ve umutsuzluğun psikolojik belirtileri yordama düzeyi. *Uluslararası Eğitim Bilimleri Dergisi* 2018;(14):85-100.doi:10.16991/INESJOURNAL.1501
- [39] Öklük Ö. Çocukluk dönemi travmatik yaşam olaylarına maruz kalmış yetişkin bireylerin benlik saygısı, kişilerarası ilişki tarzları ve baş etme becerilerinin incelenmesi. Postgraduate thesis. İskı University, İstanbul. 2018. (Turkish)
- [40] Şahin PNH, Batgün PAD, Koç PV. Kişilerarası tarz, kendilik algısı, öfke ve depresyon. *Türk Psikiyatri Dergisi* 2011;22 (1):17-25.