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# Investigation of Mothers' Childhood Trauma and Their Relationships with Their Children[1]

*Annelerin Çocukluk Dönemi Örselenme Durumları ile Çocuklarıyla Olan İlişkilerinin İncelenmesi*

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# Investigation of Mothers' Childhood Trauma and Their Relationships with Their Children


## Abstract

This study aimed to examine mothers' childhood trauma situations and their relations with their children. Relational scanning model was used in this research. "Personal Information Form", "Childhood Trauma Questionnaire Short Form (CTQ)" and "Child-Parent Relationship Scale (CPRS)" were used for data collection. The obtained data were analyzed with "Pearson's Product–Moment Correlation Coefficient". The results showed that there was a negative significant relationship between CTQ "physical", "sexual", "emotional" abuse, "emotional", and "physical" neglect subdimensions and CPRS "positive relationship" subdimension. Results also showed that positive, significant relationship between CTQ "physical", "sexual", "emotional" abuse, "emotional" and "physical" neglect subdimensions and CPRS "conflict" subdimension. Research results indicate that positive, significant relationship between CTQ "physical", "sexual", "emotional" abuse, "emotional", and "physical" neglect subdimensions and CPRS "attachment" subdimension.



## Keywords

Adverse childhood experiences, mother-child relationships, preschool period.

## Annelerin Çocukluk Dönemi Örselenme Durumları ile Çocuklarıyla Olan İlişkilerinin İncelenmesi

**Öz**

Araştırmada, annelerin çocukluk dönemi örselenme durumlarıyla anne ve çocuk arasındaki ilişki incelenmiştir. Bu amaca bağlı olarak araştırma ilişkisel tarama modeli kullanılarak gerçekleştirilmiştir. Araştırma 250 anne ile gerçekleştirilmiştir. Verilerin toplanmasında "Kişisel Bilgi Formu", "Çocukluk Dönemi Örselenme Yaşantıları Ölçeği (ÇÖYÖ)" ve "Çocuk Ebeveyn İlişki Ölçeği (ÇEİÖ)" kullanılmıştır. Araştırma verileri Pearson Momentler Çarpımı Korelasyon Analizi ile çözümlenmiştir. Sonuçlar, ÇÖYÖ "fiziksel", "cinsel", "duygusal" istismar, "duygusal" ve "fiziksel" ihmal alt boyutları ile ÇEİÖ "pozitif ilişki" alt boyutları arasında negatif yönlü, anlamlı bir ilişki olduğunu göstermiştir. Ayrıca ÇÖYÖ "fiziksel", "cinsel", "duygusal" istismar, "duygusal" ve "fiziksel" ihmal alt boyutları ile ÇEİÖ "çatışma" alt boyutları arasında pozitif yönlü, anlamlı bir ilişki olduğu; ÇÖYÖ "fiziksel", "cinsel", "duygusal" istismar, "duygusal" ve "fiziksel" ihmal alt boyutları ile ÇEİÖ "bağlanma" alt boyutları arasında ise pozitif yönlü, anlamlı bir ilişki olduğu görülmüştür.

**Anahtar Kelimeler**

Çocukluk dönemi örselenme yaşantıları, anne-çocuk ilişkisi, okul öncesi dönem.

## Introduction

Adverse childhood experiences are defined as “sexual”, “emotional” and “physical” abuse of the child, the parent's substance addiction, psychological disorder, the aggressive behavior of the parents, and the loss of family members due to death or divorce (Dube, Felitti, Dong, Giles & Anda, 2003). Physical abuse, handled under adverse childhood experiences, injuring, or risking injury to children by hand or other objects; emotional abuse, verbal abuse, juvenile delinquency and harsh but nonphysical punishments (Kaplan, Pelcovitz & Labruna, 1999); sexual abuse involves adults exploiting children for sexual gratification (Öner-Demirci, 2019). Although some individuals exposed to such traumatic events in early childhood do not feel the adverse effects of these experiences (Anda, Brown, Felitti, Dube & Giles, 2008), many of them may encounter some physical and mental problems in adulthood. According to Chapple, Tyler and Bersani (2005) even the lightest of such negative experiences can have negative consequences on individuals.

The mental health of the mother is important in the formation of a healthy mother-child relationship (Yavuzer, 2001, p. 15). A mother's ability to care for her child, to show sufficient interest and warmth, depends on her being healthy and happy (Yörükoğlu, 2014, p. 39). If the mother is healthy and peaceful, this will also be reflected in her relationship with the child (Yeşilyaprak, 2004, p. 121). Individuals who have negative childhood experiences can transfer their negative childhood experiences to their children when they have children (Sun et al., 2017; Treat, Morris, Williamson, Hays-Grudo & Laurin, 2017). Exposure to traumatic events in childhood has a negative effect on parenting attitudes, especially mothers who have negative childhood experiences who are prone to perinatal depression and depression (McDonnell & Valentino, 2016). Since the family environment is the first social environment of children, the attitudes and psychological health of parents have important effects on many developmental areas. Depression, conduct disorder and other psychological disorders experienced by the mother affect the quality of her relationship with the child and cause her to be deprived of a consistent and warm family environment that can be a protective factor for the child (Khan & Renk, 2019; Robinson, 2008).

The early childhood period, especially infancy, is very important for the formation of a consistent and continuous relationship between the mother and the baby so that the child can develop healthily (Kazan & Sarısoy, 2021). While the physically, socially, and spiritually healthy mother sees her child as a gift and adopts it, the neurotic mother may perceive her as a care-taking object, a property, a responsibility, a rival, or a punishment. The mother with this feeling cannot adopt her child and cannot show interest and love (Bakırcıoğlu, 2015, p. 173). It is seen that the quality of the relationship between mother and child has various effects on the child. Negative childhood experiences of mothers and related psychological disorders lead to inadequate parenting; inadequate parenting can lead to negative attachment with their children and the child's adaptation and behavior problems (Gelfand & Teti, 1990; Khan & Renk, 2019). In addition, the negative relationship between the mother and the child can negatively affect the moral development, emotion regulation skills and social competencies of the child (Denham, 2007; Özyürek & Tezel-Şahin, 2015; Sullivan et al., 2020).

This information shows that, it is thought that mothers' childhood trauma experiences may have a determining role in the quality of their relationships with their children. Studies have been conducted on the effects of negative childhood experiences on the psychological state of individuals in the later years of life (Davies, Read & Shevlin, 2021; Hardt, Herke & Schier, 2011; Srivastav et al., 2020; Watt, Kim, Ceballos, & Norton, 2022) and their relationships with their children during the parenting process (Brogden & Gregory, 2019; Guss et al., 2020; Treat et al., 2020). At the same time, research on the negative experiences of mothers in childhood shows that attachment styles with their children and behavior problems of children (Cooke, Racine, Plamondon, Tough & Madigan, 2019; Menon, Katz, & Easterbrooks, 2019), the emotional closeness of mothers with their children (Harris et al., 2020), the physical and emotional health of their children (Madigan, Wade, Plamondon, Maguire & Jenkins, 2017; McDonald et al., 2019), their caregiving situations (Şahin-İpek & Tarlacı, 2021) and the child's traumatic experiences are related (Ezen & Açıkgöz, 2017).

In this respect, it is thought that examining mothers' childhood traumatic experiences and their relationships with their children in terms of a "positive relationship", "attachment" and "conflict" dimensions will contribute to the literature. In this direction, this research aimed to examine mothers' childhood traumatic experiences and their relationships with their children.

In line with this information, it is aimed to examine the following research questions and answers:

- Is there a significant relationship between the scores of mothers in the "physical abuse" subdimension of the CTQ scale and the scores they received in the "positive relationship", "conflict", and "attachment" subdimensions of the CPRS scale?

- Is there a significant relationship between mothers' scores on the CTQ scale "sexual abuse" subdimension and their scores on the "positive relationship", "conflict", and "attachment" subdimensions of the CPRS scale?
- Is there a significant relationship between mothers' scores on the "emotional abuse" subdimension of the CTQ scale and their scores on the "positive relationship", "conflict", and "attachment" subdimensions of the CPRS scale?
- Is there a significant relationship between the scores of mothers in the "physical neglect" subdimension of the CTQ scale and the scores they received in the "positive relationship", "conflict", and "attachment" subdimensions of the CPRS scale?
- Is there a significant relationship between the scores that mothers received from the "emotional neglect" subdimension of the CTQ scale and the scores they received from the "positive relationship", "conflict", and "attachment" subdimensions of the CPRS scale?
- Is there a significant relationship between the scores the mothers received from the total CTQ scale and the scores they received from the "positive relationship", "conflict", and "attachment" subdimensions of the CPRS scale?

## 1. Method

In this chapter, information about the research model, study group, data collection tools, data collection and data analysis are included.

### 1.1. Research Model

The relational scanning model, one of the screening models, was used in this study to examine the childhood traumatic situations of mothers and their relationships with their children. The scanning model is a research model that aims to detect a current or past situation as it exists. The individual, object or event that is the subject of the research is tried to be defined in its own conditions and as it is, without any effort to change it by the researcher. The present research aims to determine the existence of the relationship between the variables, so it has the feature of the relational scanning model, which is one of the scanning models (Karasar, 2019, p. 109).

### 1.2. Participants

During the research process, data were collected from 263 mothers but 13 mothers were excluded from the study because the data set did not meet the normality values. In this direction, the study group of the research consisted of 250 mothers who have children in the preschool period in the Yakutiye and Palandoken districts of Erzurum province, which were selected by the easily accessible sampling method. The easily accessible sampling method can be defined as the researcher's orientation to the most easily accessible items

while forming his sample (Patton, 2005).

**Table 1.**

Demographic Information of Mothers

| Variables | Features | n | % |
|---|---|---|---|
| Age | 19-24 years old | 12 | 4.8 |
| | 25-30 years old | 67 | 26.8 |
| | 31-36 years old | 84 | 33.6 |
| | 37 and above | 87 | 34.8 |
| Educational Status | Literate | 8 | 3.2 |
| | Primary school | 37 | 14.8 |
| | Middle school | 44 | 17.6 |
| | High school | 75 | 30.0 |
| | Associate degree | 16 | 6.4 |
| | Undergraduate | 70 | 28.0 |
| Marriage Age | 18 years and under | 38 | 15.2 |
| | 19-24 years old | 149 | 59.6 |
| | 25-30 years old | 53 | 21.2 |
| | 31-36 years old | 9 | 3.6 |
| | 37 and above | 1 | 0.4 |
| Number of Children | One | 78 | 31.2 |
| | Two | 91 | 36.4 |
| | Three | 62 | 24.8 |
| | Four | 19 | 7.6 |
| Family Type | Nuclear family | 209 | 83.6 |
| | Extended family | 33 | 13.2 |
| | Single Parent Family (Death-Divorce) | 8 | 3.2 |
| | Total | 250 | 100.0 |

Table 1 shows that 4.8% (n=12) of the mothers participating in the study were "19-24 years old", 26.8% (n=67) were "25-30 years old", 33.6% (n=84) were "31-36 years old", and 34.8% (n=87) were "37 years old and above". Considering the educational status of the mothers, 3.2% (n=8) were "literate", 14.8% (n=37) had a "primary school education", 17.6% (n=44) had a "secondary school education", and 30.0% (n=75) had a "high school education". Considering the marriage age of the mothers, 15.2% (n=38) were "18 years old or below", 59.6% (n=149) were "19-24 years old", 21.2% (n=53) were "25-30 years old", 3.6% (n=9) were between the ages of "31-36" and 0.4% (n=1) were married at the age of "37 or above". Considering the number of children, the mothers had, 31.2% (n=78) had "one child", 36.4% (n=91) had "two", 24.8% (n=62) had "three" and 7.6% (n=19) had "four" children. Considering the family type of mothers, 83.6% (n=209) have "nuclear families", 13.2% (n=33) have "extended families" and 3.2% (n=8) are "single parents".

### 1.3. Instruments

In the research, the "Personal Information Form" was used to determine the demographic characteristics of the mothers, the CTQ was used to determine the "childhood traumatic experiences" of the mothers, and the CPRS was used to determine their "relationships with their children".

### 1.3.1. Personal Information Form

In the "Personal Information Form" prepared by the researcher to determine the demographic characteristics of the mothers, there are a total of 5 questions regarding "the age of the mother", "educational status", "age of marriage", "the number of children" and "family type".

### 1.3.2. Childhood Trauma Questionnaire Short Form (CTQ)

CTQ is a measurement tool for retrospectively examining the history of child abuse and was Adapted into Turkish by Kaya (2014). The original scale was developed by Bernstein et al. (2003). The Turkish version of the CTQ consists of 28 items. The CTQ is a 5-point likert-type measurement tool and is answered in the form of "Strongly Disagree (1)", "Disagree (2)", "Slightly Agree (3)", "Agree (4)" and "Strongly Agree (5)". It was determined that as the score obtained from the scale increased, the experiences of childhood abuse of the mothers increased (Kaya, 2014).

A reliability study of the original scale was conducted by calculating the internal consistency of the scale. The internal consistency coefficients of the scale were found to be between 0.81-0.86 for physical abuse, between 0.84-0.89 for emotional abuse, between 0.92-0.95 for sexual abuse, between 0.61-0.78 for physical neglect and between 0.85-0.91 for emotional neglect. As a result, it has been reported that the CTQ, which consists of 28 items, has sufficient validity and reliability and can be applied in different groups (clinical and nonclinical samples) (Kaya, 2014). For this study, Cronbach's alpha values for each subdimension of the scale were calculated using SPSS 21: 0.84 for physical abuse, 0.89 for sexual abuse, 0.76 for emotional abuse, 0.62 for physical neglect and 0.86 for emotional neglect.

### 1.3.3. Child–Parent Relationship Scale (CPRS)

CPRS is a questionnaire that determines the relationships of mothers with their children and was adapted into Turkish by Özkan (2014). The original scale was developed by Pianta (1992). The scale consists of three subdimensions. These subdimensions are; the attachment subdimension, the conflict subdimension,and the positive relationship subdimension.

In the validity and reliability study of the scale by Özkan (2014), exploratory factor analysis, item-total score reliability and Cronbach Alpha reliability analyses were used to determine the overall reliability of the scale. The internal consistency coefficients of the subdimensions were 0.74 in the conflict dimension, 0.72 in the positive relationship dimension and 0.53 in the attachment dimension (Özkan, 2014). For present study, Cronbach's alpha values for each subdimension of the scale were calculated using SPSS 21: 0.68 for the positive relationship dimension, 0.67 for the conflict dimension and 0.76 for the attachment dimension.

### 1.4. Procedure

Permission to use the CTQ and CPRS, which were determined as data collection tools in the study, were obtained from people who had adapted the scales into Turkish and conducted validity-reliability studies. To conduct research in the schools determined in the Yakutiye and Palandoken districts of Erzurum province, a document declaring that the research complies with the ethical committees was obtained from the Ataturk University Ethics Commission with the decision numbers E-56785782-050.02.04-2200431613 dated 29.12.2022. CTQ, CPRS and voluntary consent forms were sent to the mothers by the teachers of the children who continued their education in the designated kindergartens, and they were asked to complete them. After the distribution of data collection tools, the data collected from 263 mothers were filed by the researchers for analysis.

### 1.5. Data Analysis

In the analysis of the obtained data, first of all, it was examined whether the data showed a normal distribution. 13 data that did not meet the normality criteria were not included in the study. In this direction, analyzes were carried out with 250 data sets.

Pearson Product Moment Correlation analysis was used to analyze the childhood traumatic experiences of the mothers in the study group and their relationships with their children. In the statistical analysis, the level of significance was determined to be 0.01 analyses were carried out using the statistical package program.

## 2. Results

In this section, the data related to the childhood trauma experiences of mothers and their relations with their children are interpreted in tabular form.

**Table 2.**
Correlation Analysis Findings on Mothers' Childhood Trauma and Their Relationships with Their Children

| | | Positive Relationship | Conflict | Attachment | Sexual Abuse | Physical Abuse | Emotional Abuse | Physical Neglect | Emotional Neglect | CTQ Sum |
|---|---|---|---|---|---|---|---|---|---|---|
| Positive Relationship | r | 1 | | | | | | | | |
| Conflict | r | -0.103 | 1 | | | | | | | |
| Attachment | r | -0.001 | 0.694** | 1 | | | | | | |
| Sexual Abuse | r | -0.257** | 0.234** | 0.224** | 1 | | | | | |
| Physical Abuse | r | -0.291** | 0.239** | 0.217** | 0.680** | 1 | | | | |
| Emotional Abuse | r | -0.494** | 0.415** | 0.324** | 0.562** | 0.626** | 1 | | | |
| Physical Neglect | r | -0.506** | 0.465** | 0.397** | 0.490** | 0.532** | 0.731** | 1 | | |
| Emotional | r | -0.503** | 0.304** | 0.216** | 0.373** | 0.363** | 0.555** | 0.611** | 1 | |

| | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|
| Neglect | | | | | | | | | | |
| CTQ Sum | r | -0.516** | 0.418** | 0.347** | 0.771** | 0.789** | 0.876** | 0.844** | 0.725** | 1 |
| Mean | | 42.90 | 29.48 | 18.64 | 6.92 | 7.03 | 8.89 | 9.68 | 12.51 | 45.04 |
| Ss | | 7.18 | 8.58 | 6.31 | 3.38 | 3.71 | 4.13 | 3.78 | 3.65 | 14.9 |

* p<.05; ** p<.01

Table 2 shows that, there were positive and significant relationships between the CPRS "positive relationship" subdimension and CTQ "physical abuse" (r=-0.291, p<.01); "sexual abuse" (r=-0.257, p<.01); "emotional abuse" (r=-0.494, p<.01); "physical neglect" (r=-0.506, p<.01); "emotional neglect" (r=-0.503, p<.01) subdimensions and CTQ total score (r=-0.516, p<.01). This finding indicates that as "physical", "sexual", "emotional" abuse and "physical", "emotional" neglect of mothers increases, "positive relationships" with their children decrease. As "physical", "sexual", "emotional" abuse and "physical", "emotional" neglect of mothers decreases, "positive relationships" with their children increase.

In the study, it was determined that there were positive and significant relationships between the CPRS "conflict" subdimension and the CTQ "physical abuse" (r=0.239, p<.01), "sexual abuse" (r= 0.234, p<.01), "emotional abuse" (r=0.415, p<.01), "physical neglect" (r=0.465, p<.01), and "emotional neglect" (r=0.304, p<.01) subdimensions and the CTQ total score (r=0.418, p<.01). This finding indicates that as "physical", "sexual", "emotional" abuse and "physical", "emotional" neglect of mothers increases, conflict situations with their children increase. As "physical", "sexual", "emotional" abuse and "physical", "emotional" neglect of mothers decreases it can be interpreted that "conflict" situations with their children decrease.

In the study, there were positive and significant relationships between the CPRS "attachment" subdimension and the CTQ "physical abuse" (r=0.217, p<.01), "sexual abuse" (r=0.224, p<.01), "emotional abuse" (r=0.324, p<.01), "physical neglect" (r=0.397, p<.01), and "emotional neglect" (r=0.216, p<.01) subdimensions and the CTQ total score (r=0.347, p<.01). This finding indicates that as "physical", "sexual", "emotional" abuse and "physical", "emotional" neglect of mothers increases, their attachment status with their children increases. As "physical", "sexual", "emotional" abuse and "physical", "emotional" neglect of mothers decreases, the level of "attachment" with their children decreases.

## Discussion

The results of the research showed that mothers' childhood traumatic experiences were related to their positive relationship, conflict, and attachment situations with their children. In the study, it was observed that as the traumatic experiences of mothers, such as neglect and abuse in childhood, increased, their positive relations with their children decreased, and their conflict situations increased. The negative experiences of individuals in childhood have negative consequences in the long run. Many studies have shown that these negative results are anxiety disorder, susceptibility to depression, suicidal tendencies, aggression, delinquency, antisocial behaviors, substance abuse, etc. (Balcı-Akpınar, Küçükoğlu, Ejder

Apay, Karaca & Balcı, 2019; Brown, Cohen, Johnson & Smailes, 1999; Chapple et al., 2005; Frias-Armenta, 2002; Jimenez, 2019; Salokangas et al., 2020). Chapple et al. (2005) concluded in their study that physical neglect, which is one of a traumatic type, causes individuals to be more aggressive in the later stages of life; as a result, these individuals are more likely to be excluded by their social environment. Emotional neglect, as a type of neglect, can lead to more destructive consequences than that is usually committed by the person from whom the individual expects to love (Gibb & Alloy, 2006). Such psychological adversities experienced by individuals also significantly affect their parenting skills (Khan & Renk, 2019; Robinson, 2008). Roberts et al. (2004) determined that mothers who were abused during childhood had adverse relationships with their children. Similar studies show that mothers who are exposed to repetitive and multiple traumas in the early period have difficulty coping with parenting stress, are not emotionally available or display introverted parenting behaviors (Kluczniok et al., 2015; McDonald et al., 2019). Harris et al. (2020) concluded that the childhood trauma experiences of the mother negatively affect the accessibility of the mother, especially to her young children. Many studies in the literature show that mothers who are neglected and abused during childhood adopt neglectful attitudes toward their children and are more inadequate in responding to their children's needs (Chung et al., 2009; Greene et al., 2020; Kim, 2009).

It can be shown that mothers with a history of childhood “abuse” and “neglect” can use problem-solving methods such as violence and punishment as a model for their negative relationships with their children. Güler, Uzun, Boztaş and Aydoğan (2002) emphasize that mothers who have been exposed to violence in childhood will try solving it violently when they encounter a problem in the future. In many studies, mothers who were abused during childhood use different punishment methods in raising children and abuse their children physically and emotionally (Frias-Armenta, 2002; Gardner-Thomas & Erskine, 2019; Heyman & Slep, 2002), and they experience similar traumatic situations to their children (Ezen & Açıkgöz, 2017). Olcay (2021) emphasized that physically neglected individuals tend to solve their problems in adulthood in aggressive ways, similar to physical abuse. Therewithal, McDonnel and Valentino (2016) stated that mothers with traumatic experiences are more prone to depression and stated that this may be a risk factor for developing the child. Chung et al. (2009) emphasized that both the traumatic mother's being more prone to depression and having a history of abuse may cause problems in parenting and an increase in child-abusive behaviors in parenting. Barone and Carone (2021) concluded that childhood neglect and abuse lead to a tendency to kill their children, especially in mothers with mental disorders. In line with this information, it is thought that the negative parenting strategies of the mothers and the negative psychological states they experience may prevent their positive relationships with their children.

Another possible explanation for the mothers' childhood traumatic experiences affecting their positive relationship with their children may be that children display problematic behaviors (Cooke et al., 2019; Stepleton et al., 2018). Mothers with a history of trauma such as neglect and abuse cannot provide the necessary safe family environment for

their children, and children are constantly rejected or humiliated within the family. This situation can lead to mental expansion problems in children (Salokangas et al., 2020). Thornberry and Henry (2013) stated that traumatic mothers may exhibit inconsistent and negative parenting, and in this case, toxic stress in the child may lead to lengths. Problematic behaviors, which increase due to the high stress level of mothers and children, may cause increased conflicts in the relationship between mother and child.

One of the most important factors in a healthy and sufficient interaction between mothers and their children is a healthy and sufficient relationship between the parents (Yeşilyaprak, 2004). Mothers' childhood trauma experiences also negatively affect their relationships with their spouses and prevent the establishment of a stable and safe environment in the home (Nguyen, Karney & Bradbury, 2017). Meyerson et al. (2002) concluded in their study with an older age group that individuals who were physically abused perceived the family environment as more conflict. In the study of Yaşar (2009), it was observed that the children of mothers with low marital adjustment perceived the mother-child relationship as more rejecting, while mothers with high marital adjustment perceived the mother-child relationship as more accepting.

Another result obtained in the study is that there is a relationship between mothers' childhood traumatic experiences and their attachment status with their children. A mother's history of childhood trauma can affect both prenatal and postnatal processes. Emotional and physical neglect are accepted as phenomena that cause attachment problems (Wilkerson, Johnson & Johnson, 2008). Studies have shown that adults with a history of maltreatment, such as neglect and abuse in childhood, shape attachment styles (Muller, Thornback & Bedi, 2012) and that these individuals are generally close to an anxious or avoidant attachment style (Bifulco et al., 2006; Widom, Czaja, Kozakowski & Chauhan, 2018). Attachment problems experienced by a traumatic mother in adulthood are an important variable that prevents healthy attachment with her child (Cooke, et al., 2019). Madigan et al. (2017) concluded that the depression and/or parenting stress of the mother due to abuse may cause adjustment problems with the baby after birth or postpartum depression. Öztop (2003) concluded in his study that babies of mothers with depression experienced more problems and had a higher rate of insecure attachment. Martins and Gaffan (2000), in their study examining the relationship between depression and mother-child attachment styles, determined that there is a significant relationship between a mother's depression and mother-child attachment level. Kesebir, Özdoğan-Kavzoğlu and Üstündağ (2011), on the other hand, stated that inadequate parenting, that is, cold and inconsistent parenting, can have a negative effect on mother-child bonding. Studies show similar results to research findings (Cooke et al., 2019; Martins & Gaffan, 2000; Muller et al., 2012). Since the first two years of life are of vital importance for secure attachment, it is thought that this adjustment problem experienced by the mother with the baby may affect the attachment styles between the mother and the child.

In light of these results, the following suggestions can be made:

- As mothers' childhood traumatic experiences related to their positive relationship, conflict, and attachment situations with their children found; it can be suggested that early intervention programs can be organized for expectant mothers who had a history of childhood trauma, mothers, and their children.
- Family education programs can be organized to raise awareness of prospective mothers and mothers about childhood trauma experiences and their consequences.
- The research was carried out with mothers residing in Erzurum province. The results can be compared by conducting similar studies with larger participants in different provinces.
- Similar studies can be conducted out with data collection techniques such as observation and interviews, and more in-depth data can be obtained.

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**Araştırma ve Yayın Etiği Beyanı**

Araştırmacılar verilerin toplanmasında, analizinde ve raporlaştırılmasında her türlü etik ilke ve kurala özen gösterdiklerini beyan ederler.

**Yazarların Makaleye Katkı Oranları**

Yazarlar çalışmaya eşit oranda katkı sağlamıştır.

**Çıkar Beyanı**

Makalenin hazırlanmasında herhangi bir çıkar çatışması bulunmamaktadır.