EFFECTS OF ADVERSE CHILDHOOD EXPERIENCES ON PARENTING STYLES AND ROLE OF PARENTAL BONDING

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ABSTRACT

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Master Program in Clinical Psychology

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In this study, relationship between adverse childhood experiences and parenting styles investigated in the context of parental bonding. Data was collected from a total of 673 people aged between 23 and 55. Demographic Information Questionnaire, Adverse Childhood Experiences (ACE), Parents Attitude Scale (PAS) and Parental Bonding Instrument (PBI) were used to collect data in this research. For the data analysis, the effects of demographic variables such as gender, education level, parental marital status on adverse childhood experiences, parental attachment and parenting styles were

investigated by using independent sample t-test. Correlation analysis used to investigate relationships between study variables. Results indicated that adverse childhood experiences negatively correlated with parental bonding. Authoritarian parenting style was negatively correlated with democratic parenting style and positively correlated with overprotective parenting style, and permissive parenting style. Parental bonding with one's mother was positively associated with democratic parenting style, and it was negatively correlated with authoritarian parenting style. Moreover, a mediation analysis revealed the parental bonding with both mother and father mediated the relationship between adverse childhood experiences and authoritarian parenting style. The findings of the study are discussed within the framework of the literature.

Key words: Adverse Childhood Experiences, Parenting Styles, Parental Bonding, Authoritarian Parenting Styles

ÖZET

ÇOCUKLUK ÇAĞI OLUMSUZ YAŞANTILARI İLE EBEVEYNLİK STİLLERİ ARASINDAKİ İLİŞKİDE EBEVEYNE BAĞLANMANIN ROLÜ

Babacan, Şeyma Nur

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Tez Danışmanı: Prof. Dr. Falih KÖKSAL

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Bu çalışmada, olumsuz çocukluk çağı deneyimleri ile ebeveynlik stilleri arasındaki ilişki, ebeveyne bağlanma kapsamında incelenmiştir. Yaşları 23 ile 55 arasında değişen toplam 673 kişiden veri toplanmıştır. Bu araştırmada veri toplamak için Demografik Bilgi Formu, Çocukluk Çağı Olumsuz Yaşantılar Ölçeği (ACE), Ebeveyn Tutum Ölçeği (ETÖ) ve Ebeveynlere Bağlanma Ölçeği (PBI) kullanılmıştır. Veri analizi için cinsiyet, eğitim düzeyi, ebeveyn medeni durumu gibi demografik değişkenlerin çocukluk çağı olumsuz yaşantıları, ebeveynlere bağlanma ve ebeveynlik stilleri üzerindeki etkileri bağımsız örneklem t-testi kullanılarak araştırılmıştır.

Çalışma değişkenleri arasındaki ilişkileri araştırmak için kullanılan korelasyon analizi kullanılmıştır. Sonuçlar, çocukluk çağı olumsuz yaşantılarının ebeveynlere bağlanma ile negative yönde ilişkili olduğunu göstermiştir. Otoriter ebeveynlik stili, demokratik ebeveynlik stili ile negatif, aşırı koruyucu ebeveynlik stili ve izin verici ebeveynlik stili ile pozitif ilişkili bulunmuştur. Kişinin annesiyle pozitif bağlanması, demokratik ebeveynlik stili ile pozitif yönde ilişkili, otoriter ebeveynlik stili ile negative yönde ilişkili bulunmuştur. Ayrıca, aracılık analizi çocukluk çağı olumsuz yaşantıları ile otoriter ebeveynlik stili arasındaki ilişkiye hem anne hem de baba ile bağlanmanın aracılık ettiğini ortaya koymuştur. Çalışmanın bulguları literatür çerçevesinde tartışılmıştır.

Anahtar kelimeler: Çocukluk Çağı Olumsuz Yaşantıları, Ebeveynlik Stilleri, Ebeveyne Bağlanma, Otoriter Ebeveynlik Stili

To my parents…

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CHAPTER 1: INTRODUCTION

The family is a system that forms the foundation of society and consists of the relationship established between spouses, parent-child interaction, and communication between siblings. The family is the first place where a person's personality traits are formed, and social and psychological development begins (Öngider, 2013). The caregiver is the first point of contact after birth. This situation, known as attachment, is a type that emerges with the need for intimacy and provides continuity and consistency to develop secure attachment and establish healthy relationships later in life (Bowlby, 1973). The parent-child relationship is also remarkably important in the development of the child's personality. Clinicians and researchers have studied the effects of the parent-child relationship in childhood, which is very important for an individual's psychological development, within the framework of several theories. Although many theorists explain it with different concepts, it is undeniable how effective the first years of a child's life will be in later periods of her life (Burger, 2006). Furthermore, some argue that attachment is not limited to childhood, but sets an example for other stages of life such as adolescence and adulthood, demonstrates continuity, and is a phenomenon that can change in terms of its reflection. Although the mother is in the first place as an attachment figure, the basic attachment with the father is also very important. However, the attachment style that the child establishes with the father may also vary according to the mother. If both parents are stimulating enough for the child and the child's perception level is sufficient, it is possible to establish a secure attachment with both parents. Functional and effective parenting style, the quality of interaction with another person, the effects of people who have an important place in life other than the mother, and the perceived parental experiences are important factors (Kesebir et al., 2011). In the light of all this information, the behavior and attitude of both parents towards their children is very important for the child to be a healthy individual. There are numerous factors that influence parents' attitudes toward child rearing. The cultural structure of the society to which family members belong, the interaction between spouses, their socioeconomic status, education level, parents' occupations, information obtained from observations of the social environment, and even sociodemographic characteristics such as the child's gender and age are among these factors. Another factor that has a significant impact on parents' behavior and attitudes toward their children is how parents were raised by

their own parents (Şanlı and Öztürk, 2012). The attachment features that the mother developed with her mother can also influence the characteristics of the attachment that develops between the mother and the child. It is believed that if the mother has a warm, loving, and secure attachment relationship with her own mother, this will be reflected in her relationship with her child (Esposito, 2017). As a result, the mother's prior attachment with her own mother can have an impact on her relationship with her own child. This relationship can be passed down through generations in both positive and negative ways. Therefore, individuals' childhood experiences can influence their parenting behaviors. It is thought that the mother's adverse childhood experiences, such as abuse and neglect, may influence the parenting behaviors (Narayan, Lieberman and Masten, 2021). The parenting styles of mothers and fathers who have experienced childhood abuse in their childhood, on the other hand, is a little-known issue. In this context, it is important to investigate the relationship between individuals' adverse childhood experiences, parental bonding with their own caregivers and their current parenting styles.

1.1. Adverse Childhood Experiences

Traumatic experience/event is a concept that causes disruption in the natural flow of "normal" life. Traumatic experiences are experiences that are unusual, cause intense stress, are a shocking event, an intense feeling of "loss". This feeling of loss is the loss of a sense of security, identity and the future, the ability to look back and predict the future, control over life, relatives, trust in others, hopes, personal sense of power, friends, home, or belongings (Briere and Scott, 2006). Adverse childhood experiences can also be considered as developmental traumas due to the negative effects they have on children. Developmental trauma has been proposed as a more inclusive term for the symptoms of children who do not have secure ties with their parents and who are exposed to trauma during their developmental stages (Van der Kolk, 2005). Levine and Kline (2008) described trauma as "the most avoided, ignored, minimized, denied, misunderstood and untreated cause of human suffering". Therefore Van der Kolk (2014) referred to childhood trauma as a "hidden epidemic". Childhood negative experiences are quite common, although they remain hidden and overlooked. The ACE Study (Adverse Childhood Experiences Studies) is the most comprehensive community health study conducted in the United States. A two-year longitudinal study of 17,337 participants between 1995 and 1997, measuring the number of negative

experiences experienced in the first 18 years of life, revealed that childhood negative experiences were much more common than expected. More than half of the participants reported at least one adverse childhood experience, while a quarter reported two or more (Felitti et al., 1998). The World Health Organization (2016) reports that 25% of adults were physically abused as children, and one in five women and one in 13 men were sexually abused. In addition, it is stated that the cause of death of an estimated 41 thousand children under the age of 15 in the world every year is child abuse (WHO, 2019). The majority of early adverse childhood experiences are related to the family environment and dynamics. Also, these experiences predict different psychological and physiological problems in adulthood (Felitti et al., 2019).

1.1.1. *Types of Adverse Childhood Experiences*

Child abuse is divided into 4 main groups according to how it affects the child. These are physical abuse, sexual abuse, emotional abuse, and neglect (WHO, 2020). Although abuse and neglect have different definitions, they are in fact inseparable concepts. Abusing a child physically, sexually, or emotionally is also neglect in the sense of leaving the child psychologically alone in the midst of emotional distress. Neglecting a child is also abuse in the sense of causing painful emotional distress in the child (Allen, 2013). Although groups are thus segregated, children are often exposed to different types of abuse, what Finkelhor et al. (2007) called poly-victimization.

1.1.1.1. *Physical abuse*

Physical abuse is the most common type of abuse that can be detected early and is the easiest to diagnose (Erikson, 2002). It is defined as the non-accidental physical harm and punishment of the child. This harm may be mild, or it may be increasingly severe and even fatal (Ünal, 2008). It is a situation where the person is injured in a way that will harm one's health including movements such as hitting, beating, punching, hitting with an object (Okutan, 2017). Physical abuse can also be defined as deliberately applied physical force that harms or is likely to harm the health, life, or dignity of the child, and includes behaviors such as hitting, kicking, shaking, biting, strangling, burning, poisoning (Norman et al, 2012). Two-thirds of physically abused children are children under the age of three. As the child's age increases, it is seen that abuse decreases, but it increases again between the ages of 12-16 (Görmez et al., 1998).

Physical abuse in children causes many problems in the field of social health as well as physical and mental health (Tıraşçı and Gören, 2007; Margolin and Vickerman, 2007). In society, these children experience adjustment problems by exhibiting difficulties in establishing close relationships, attachment problems, anxiety, hopelessness, conflict, low emotional intensity, intense anger, inability to calm down, and abusive behaviors (Holt et al., 2008).

1.1.1.2. Sexual abuse

Sexual abuse covers a wide spectrum from all kinds of actions and behaviors that aims for sexual satisfaction, including vaginal or anal penetration (Urazel et al., 2017). Sexual abuse refers to any behavior and/or speech that includes touching a child's genitals for sexual stimulation, looking at their genitals, exhibitionism, voyeurism, sexually explicit speech, and rape (Kairys et al., 2019). In a meta-analysis of 217 publications, the global prevalence of sexual abuse was reported as 12% (Hailes et al., 2019). 120 million girls and young women under the age of 20 have been subjected to some form of forced sexual intercourse, with one in five women and one in 13 men reporting having been sexually abused as a child aged 0-17 (WHO, 2020). Children who have experienced sexual abuse are at risk for psychiatric health problems such as low self-esteem, depression, dissociative symptoms, and suicide (Ports et at., 2016). Sexual abuse causes permanent and devastating traumatic effects on the child by disrupting the balance between inner-self harmony and environment. Exposure to sexual abuse causes negative body image and creates problems related to sexuality. The child's feelings of insecurity, powerlessness and helplessness pave the way for psychiatric problems (Gölge, 2005; Çeçen, 2007; Yakut and Korkmaz, 2013; Urazel et al., 2017).

1.1.1.3. Emotional abuse

Emotional abuse can generally be defined as a pattern of repeated parent/caregiver behaviors or events that make children feel fearful, insecure, and feel unloved and unwanted (Taillieu et al., 2016). Emotional abuse can be seen as yelling, rude attitude, carelessness, harsh criticism and rejection of the child's personality, as well as name-calling, teasing, destruction of personal belongings, torture or killing of pets, excessive criticism, inappropriate and excessive demands, labeling, and humiliation (Ajilian Abbasi et al., 2015). Also, behaviors such as depriving the child of social relations,

threatening, scolding, and excluding are defined as emotional abuse. Emotional neglect and abuse often occur together with physical abuse. This situation prevents emotional abuse from being recognized and handled as a priority issue (Dinleyici and Dağlı, 2016). Emotional violence, which is frequently encountered in daily life, is more difficult to be aware of, define, report, and legislate than other types of abuse (Taner and Gökler, 2004). It is also the type of violence that has the longest impact on the child (Iwaniec et al., 2006). Childhood emotional abuse has been associated with depression, anxiety disorders, substance use disorder, dissociative symptoms, and psychotic disorders. In addition, it can cause low self-esteem and reduced quality of life (Taillieu et al., 2016). Even if these children have normal mental capacity, problems such as learning difficulties and lack of attention occur (Paavilaienen and Tarkka, 2003).

1.1.1.4. *Neglect*

Neglect is the failure of parents and caregivers to meet the child's physical and emotional needs for development and well-being. Emotional neglect is explained by the American Humane Association (AHA) as passive or passive/aggressive attitudes towards the emotional needs or emotional well-being of the child (Wolock, 1984). Emotional neglect is sometimes defined as "being psychologically unavailable". It includes not providing emotional support, showing no love, being unresponsive to or allowing violence (Erickson, 2002). Physical neglect defined as lack of health, education, clothing, nutrition, hygiene, play, protection, shelter, and safe living conditions (Özgentürk, 2014). It is known that more than 1 out of every 7 children (15.14%) in the US have experienced neglect at some point in their life. Neglect due to parental incompetence or absence of parents has been reported to be the most common form of neglect (Vanderminden et al., 2019). Similar results were found in studies conducted in Turkey. Zoroğlu et al. (2001) reported in their study that neglect is the most frequently reported (16.5%) psychological trauma, followed by emotional (15.9%), physical (13.5%), and sexual (10.7%) abuse. Neglected children experience growth and developmental retardation, injury and death, mental and motor disorders, behavioral changes, negative self-perception, learning and speech difficulties, and attachment problems. Although it is very difficult to distinguish between the types of neglect, it can be applied to the child physical, emotional, and sexual (Bilir et al., 1991; Turhan et al., 2006; Yaşar and Akduman, 2007; Dağlı and İnanıcı, 2011; Okutan,

2017). Reviews investigating the risk factor for child neglect revealed that the strongest predictors of child neglect were having parents with a history of antisocial/criminal behaviors, mental/psychiatric disorders, and low-level education. Risk factors for neglect can be listed as having a family with low social support, having a parent with substance abuse, being the child of a parent who has experienced maltreatment (Mulder et al., 2018).

1.2.Attachment Theory

Some scientists trying to understand human behaviors and the factors that cause these behaviors have been focusing on the concept of attachment for many years. Bowlby first used the concept of attachment in 1958. Bowlby has spent time working with children and has noticed that a lack of mother care has a negative impact on children's life. Bowlby conducted studies on the children in the orphanage, and these observations and scientific findings led to a significant change in the care of the children in the orphanage (Cozolino, 2017). He also conducted a literature assessment of many different disciplines after concluding that the psychoanalysis education he had received was insufficient to explain the rationale for this situation (Bahadır, 2006). Therefore, attachment theory is a multidisciplinary theory created by the interaction of different disciplines such as psychoanalysis, etiology, sociobiology, psychobiology, and modern cognitive development theories. Bowlby's concept of attachment basically represents the bond established between the caregiver and the child (Bowlby, 1997). The attachment system, which is developmentally functioning and required for newborns to survive, refers to the tendency and need for emotional bonding. People are born to need closeness when they feel in danger, and if this need is met in the first years of life, they can develop close relationships with others. The attachment of the baby to its mother helps the baby to be protected from these dangers from the environment, to meet its nutritional needs, to learn life activities by taking the mother as a role model, and to explore the environment (Bowlby, 1969). Therefore, an attachment figure that provides closeness becomes a representation of security for the infant. In this period, the basic sense of trust or insecurity develops according to the degree of meeting the needs of the baby. When the attachment figure is close, the infant has a security base from which he can relate and explore the environment with people outside the attachment figure. Attachment has three distinguishing features according to Bowlby. Proximity maintenance means that the child aims to explore the world but

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still tries to stay close to his/her caregiver. Safe haven implies that when a child feels threatened, afraid, or in danger, he/she can turn to his/her caregiver for safety. Secure base refers to the caregiver providing a solid and dependable foundation for the child as he/she learns and explores the environment. In general, the characteristics that determine the security of attachment include the caregiver's accessibility, consistency, responsiveness, and how the newborn perceives the bond. The infant's expectations, perceptions, and behaviors toward himself, other people, and other connections are influenced by the security of attachment, which is linked to the internal working models established by Bowlby (1973). In other words, the infant whose needs are appropriately and consistently evaluated and answered by its caregiver can form the representation of an "accessible and sensitive caregiver". Securely attached babies tend to explore the outside world by evaluating both themselves and the world more positively. Internal working models, which are formed as a result of repeated experiences with caregivers and include the infant's conceptualizations of himself, others and relationships, act as prototypes for future relationships and affect the person's feelings, thoughts, and behaviors. The first signs of attachment in infants are observed between 8 and 12 weeks (Bowlby, 1979). It becomes more evident in the second period, 6 and 7 months (Lamb et al., 2002). Attachment is now fully observed in the third stage, that is, in the period from 6 to 24 months. The attachment behavior is activated by the separation of the caregiver. When the caregiver moves away, the baby becomes restless, nervous; relief occurs when the caregiver returns. Thus, the child is protected from dangers and continues to exist by getting close to someone who is much more competent than itself (Bowlby, 1979). If the child cannot get close to the caregiver after separation, it reacts in three stages. In the protest phase, which is the first reaction, the child cries and actively seeks his caregiver. In the second stage, the period of despair, child is in despair of not being able to find its attachment figure. In this stage, child is depressed and inactive. In the last stage, the detachment period, the child gives up looking for the caregiver with the despair of not being able to reach the attachment figure anymore (Hazan and Shaver, 1994). These stages often appear as intertwined, but differentiate according to the dominant response (Bowlby, 1973). Bowlby divided attachment into secure and insecure. Studies have found that secure attachment is associated with well-being, while insecure attachment is associated with pathologies (Kesebir et al., 2011).

1.2.1. *Attachment Styles*

Ainsworth et al. expanded Bowlby's attachment theory. Ainsworth studied the infant's reactions to separation and reunion from its caregiver under laboratory conditions. Ainsworth and her colleagues investigated how babies behave in the event of a brief separation from their caregiver and reunion. Thus, they defined three types of attachment patterns based on individual differences: secure, anxious/ambivalent, and avoidant. The link produced by the mother-child interaction evolves into a pattern of "me" and "other" that the child will carry throughout his life, determining the type of relationship he/she makes with the rest of the world (Mahler, Pine and Bergman, 2003). Individuals show different attachment styles in relation to being exposed to different environmental conditions in their lives, being with primary caregivers who show different attachment styles, and having different interpersonal experiences (Pietromonaco et al., 2000).

1.2.1.1.*Secure Attachment*

Secure attachment includes the combination of "positive self" and "positive others" models. When children develop a secure attachment style, they experience that their caregivers are attentive, approachable, and willing to assist them when they face difficult life events (Bowlby, 1988). The child's earliest relationships with the family, particularly the child and the primary caregiver, are critical for the child's development of a secure attachment style. In terms of the child's physical and mental development, providing a secure attachment is very critical. Secure attachment also contributes to the mother's enjoyment of being close to her child, the child's creation of a "positive and rich self-worth" by sensing the mother's power and presence, and the continuation of the child's development of self-worth in the future in terms of positive representation of himself/herself as the primary caregiver. In addition, it teaches the child to learn from experiences and mood regulation. It also constitutes a mechanism that protects the child from high-level stress (Güvendeğer Doksat and Demirci Çiftçi, 2016). Children who have established a secure attachment style through childhood are those that recognize their boundaries, respond consistently and appropriately. They have high self-esteem, believe they are worthy of affection, and see others as accessible and trustworthy. Furthermore, they do not hesitate to seek social support when they are

stressed, they do not have trouble forming relationships with others, and they can be self-sufficient when necessary (Ainsworth et al., 1978).

1.2.1.2.Anxious/Ambivalent Attachment

Anxious-ambivalent attachment style includes the combination of "negative self" and "negative others" models. In the case of anxious-ambivalent attachment, the primary caregiver is indifferent and unresponsive to the wishes and needs of the child. Anxious/ambivalent attached children experience intense anxiety and intense anger when separated from the primary caregiver. When their caregivers are away from them, these children feel anxious, and they have difficulty settling down when their caregivers return (Ainsworth et al., 1978). Children who develop anxious-ambivalent attachment are those who are concerned about their caregivers' ability to meet their needs. At the same time, these children resist separation from the caregiver, and once separated, they are difficult to soothe and relax. In addition, they take longer to return to play and to regulate their emotions since these children have internalized their caregivers' anxiety (Cozolino, 2014). They have varying self-esteem, and although they live deeply in their relationships, their relationships are mostly short-lived. The fear of separation and death is dominant, and thoughts about abandonment are the most basic characteristics of the anxious-ambivalent attachment style (Bartholomew et al., 1991).

1.2.1.3.Avoidant Attachment

The avoidant attachment style includes a combination of "positive self" and "negative others" models. Caregivers in an avoidant attachment relationship are indifferent to child's needs and feelings of intimacy. The child shows distant and emotionally disconnected behaviors from the caregiver (Burger, 2006). Those who develop avoidant attachment patterns are unconcerned about the caregiver's departure, show no reaction to their return, and appear uninterested. Furthermore, children who have developed this attachment style have learned that it is easier to regulate their own emotional states and that the stress they experience is worsened by the caregiver's indifference. Individuals who have developed an avoidant attachment style find all kinds of social relations unnecessary and boring, they do not open themselves in their social relations and they do not like when people open up to them (Bartholomew et al., 1991).

1.2.2. Parental Bonding

Parental bonding is a concept that tries to explain the effect of the caregiver on the development of the child within the framework of care and protection dimensions. Parental bonding is also a concept that examines adults' attachment styles to their parents. Bowlby associated inadequate/pathological parenting with the dimensions of care and control/protection. The term care includes giving inadequate care, not meeting the infant's needs, belittling, criticizing, or rejecting the child. The term control is defined as overprotection, not supporting independence, or overcontrolling. Therefore, Parker et al. (1979) proposed a quadruple model. According to this model, high care-low overprotection is defined as optimal attachment. Low care and low overprotection fall under the category of non-attachment or weak attachment. Parents who exhibit high care/high overprotection behaviors are also included in the affectionate constraint class. Finally, low care/ high overprotective parental behaviors were classified as affectionless control. In various studies, it has been determined that behaviors perceived as low care/ high overprotection are associated with various psychiatric disorders such as depression, anxiety disorders, schizophrenia, adolescent suicides, eating disorders, substance abuse and obsessive-compulsive disorder (Kapçı and Küçüker, 2006).

1.3. Adverse Childhood Experiences and Parental Bonding

Many factors related to the mother, child, and environment are known to influence the interaction and attachment between mother and child. According to a large meta-analysis, low-risk mothers are securely attached to their children (Ijzendoorn, 1999). It has been demonstrated that abused children have a more insecure attachment to their mothers (Youngblade and Belsky, 1990). Crittenden (1998) examined the attachment of abused and neglected children to their mothers in his study and discovered that 79% of them had insecure attachment. Berthelot et al. (2015) evaluated mothers who had been abused or neglected, and insecure attachment was found at an 83 percent rate in their study. Another study discovered that mothers with a disorganized attachment pattern had a history of childhood abuse (Yan-Hua, 2012). Stacks et al. (2015) said that there is a negative connection between the secure attachment of the mother and the sensitivity of the mother.

1.4.Parenting Styles

Attitude is used to refer to any kind of reactional tendency of a human towards a phenomenon or an object (Aktürk, 2015). Although initially being covered in social psychology studies, the notion of attitude is now widely used. The notion of attitude is mostly used in the fields of clinical psychology and developmental psychology in a manner to be analyzed in relation with parental attitudes, parental behavior and child outcomes. For example, Yavuzer (1999) shows that many incidents that lead to negative child outcomes are also correlated with inefficient and inappropriate parent-child relationships.

Family is the initial social learning environment for the child. The initial behaviors directed towards the child and the initial attitudes that are offered actually define the initial patterns of social interaction. Besides the structural characteristics, the socio-economic and cultural status of the family are also imperative in determining the child's emotional and social development (Yavuzer,1999).

Primary caregivers as we mostly refer to in 21st century, portray the outer world for the child, their attitudes and behaviors show the life either as a safe and worth living, or as full of danger, fear, and unsafety (Özyürek, 2004).

Focusing on the dimensions of control and nurturance several theorists focused on parenting style for figuring out the developmental outcomes of parenting and its importance on different socialization processes. Starting with Watson (1928) on the impact of control and Freud (1933) on nurturance, Symonds (1939) defined these two dimensions of parenting as acceptance/rejection and dominance/submission; for Baldwin (1955) these were emotional warmth/hostility and detachment/involvement; Schaefer (1959) focused on love/ hostility and autonomy/control; and for Becker (1964) warmth/ hostility and restrictiveness/permissiveness gained the attention (Darling and Steinberg, 1993). Although naming these dimensions differently the underlying regard is highly similar for those theorists.

Besides this similarity on the underlying organization of parenting styles, the relationship between child outcomes and parenting began to emerge (Darling and Steinberg, 1993). The characteristics of model children or "instrumentally competent" children as Baumrind (1971) calls it began to be proposed as "social, cooperative,

loyal, emotionally stable, friendly, honest…good citizens and good scholars" (Symonds, 1939). Similarly, the family environment where these children were raised is presented as warm, clear, communicative, consisting of rational guidelines, and allowing child's autonomy (Baldwin, 1955; Symonds, 1939). Besides psychology theorists, sociologists also analyzed the dynamics such as parents' beliefs on parenting and the broader social context defining roles and expectations (Bronfenbrenner, 1958). However, until Baumrind (1966) a theoretical model which incorporated the emotional and behavioral mechanisms of parenting style was not presented. According to Baumrind (1968) the main aim of parenting is socializing the child in a manner to make him/her conform the demands of society while maintaining his/her sense of personal integrity. She conceptualized parenting style as the recurring patterns of affect, practices and values, the beliefs they have on their roles as parents and on the nature of their children.

Being one of the key missions of parenting, Mussen, Conger and Kagan (1984) defined socialization as the process through which the child acquires the beliefs, values, and behavioral standards dominant in his/her culture. Although not being the sole vehicles in this process parents are widely accepted as main components contributing to child's socialization because the first interactional patterns in which the child gathers the initial social skills, characteristics and values.

Culture is also accepted as another factor impacting parenting styles, in a manner that national cultural values and attitudes towards parenting are combined with micro-level familial and local values and practices and transmitted to the child via parenting style (Özgüven, 2010). In addition to cultural coefficients, according to Yavuzer (2013) parents' self-awareness and self-acceptance, the loving, respecting attitude they perform towards each other, the balance and peaceful couple relationship they have also impact parenting styles. In contrast the negative parenting the parents perceived as children, having children at an old age and challenging socioeconomic conditions are found to be related with parenting style (Yavuzer, 2013).

Parental attitudes are intergenerationally transmitted. At the root of parenting style lies the parents' own perceived parenting. Şanlı (2007) suggests that mothers internalize the maternal attitude they received via identification with the mother. Especially the individuals who have been deprived of parental care as a child, may be

more inclined to become aggressive and oppressive adults (Aktürk, 2015). In contrast, they may also be prone to show the opposite version of the parenting they received and become more permissive or over-protective. Either wat, for compensating for their children what they have been deprived of they may fail to present the needed boundaries for their children and may fail to respond to child's actual developmental needs (Ayyıldız, 2005; Yavuzer, 2013).

Baumrind (1971) argues that parents' world of influence mold and shape children into adults. Being a complex activity, parenting includes certain attitudes and behaviors that act upon children either separately or collectively, influencing child outcomes and forming an emotional bond through which the parental behaviors are expressed (Darling and Steinberg, 1993; Darling, 1999). Parenting is examined in terms of two components which are demandingness and parental responsiveness (Fletcher et al., 2008). Parental demandingness refers to the guidelines set by the parents for their children, and the methods of discipline based on these predetermined rules and guidelines (Bibi et al., 2013). Parental responsiveness shows the emotionality of parenting. Parents' ability and will to support the children and attend their needs define the responsiveness of parenting. Baumrind (1966) also studying on parenting styles focused on two similar dimensions, nurturance, and control. According to Baumrind (1966) parental role is of key importance for the child to conform to the demands of others while maintaining a sense of personal integrity. While the control dimension covers the notions of strictness, use of punishment or consistency of punishment, use of explanations and she separated parents' willingness to socialize their children from the control dimension. Based on these two dimensions Baumrind highlighted three styles of parenting: authoritative, authoritarian, and permissive with these concepts of responsiveness and demandingness in mind (Baumrind, 1971). These are presented in the below section, respectively.

1.4.1. Authoritarian

Engaging in limited mutual interaction with their children, authoritarian parents are presented as demanding unresponsive, in a manner that they expect the children to fulfill all the demands of adults without any questioning (Bibi et al., 2013). They use power-assertive methods such as threads, commands, physical force, love withdrawal to restraing child's independence and self-expression (Zupancic, Podlesek, and

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Kavcic, 2004). They also set high standards and harsh rules to which absolute obedience is required. They may be inclined to relate love to success, and they are limited in terms of nurturing (Berg, 2011).

1.4.2. Authoritative/Democratic

In this parenting style demandingness is combined with responsiveness. Logical demands and guidelines are set, although child's compliance is expected warmth, acceptance and encouragement are also offered (Berg, 2011). Child's perspective views are considered in the decision-making process. Authoritative parents, discipline and support their children well in a manner to help them turn into adults which are socially accepted and self-integrated (Bibi et al., 2013).

Authoritative parenting is widely accepted as the most effective of the three styles and consists of a balanced approach combining nurturance, communication, maturity demands, and control (Schwerdtfeger et al., 2013).

1.4.3. Permissive

In this style of parenting clear and predictable rules are relatively limited, the monitoring is not stable, misbehavior is ignored, and affective tone is neutral, they also give a high level of freedom and fail on restraining the misconduct (Rossman and Rea, 2005). Although being nurturing and accepting, they refrain from imposing demands and control (Zupancic et al., 2004). They do not present expectations towards their children and also, they may be inclined to see their children as friends, again blurring the boundaries and limits between parents and children. They have little or no expectations for their children and often view their children as friends and have few limits imposed (Berg, 2011).

1.4.4. Overprotective

Although not being initially placed in Baumrind's classification, this fourth style of parenting gained attention in various studies (Kuzgun, 1991; Levy, 1966; Yavuzer, 1994). Over-protective parents fail to provide the child an environment where child's autonomy and individuation/separation can be developed (Demir and Şendil, 2008). They refrain from giving the child the age-appropriate responsibilities, they interfere

with the child's abilities in a way to inhibit the developmental process and they fail to accept their children as a separate individual. They are inclined to see the child as incapable of taking care of or voicing his/her individual needs and wishes, and they see the child as someone who should always be protected. Several theorists argued that this type of parenting is highly dominant in Turkish culture since the cultural parenting premises transmitted via generations in Turkey mostly pushes parents in a position where they become unable to separate care and warmth from control and boundaries (Kağıtçıbaşı, 1990). In line with this premise, the findings of the study conducted by Demir and Şendil (2008) revealed the positive correlation between authoritarian parenting and overprotective parenting behaviors in a Turkish sample. This result was expected in their analysis since in both styles of parenting the demand and control component is high whereas the acceptance towards the individuality of the child is limited. According to over-protective or authoritarian parents the child can only be kept safe and healthy via stable control and parental surveillance (Darling and Steinberg, 1992; Kuzgun, 1991; Maccoby and Martin, 1983).

1.4.5. Reseach Held on Parenting Styles

Previous studies show that children develop fewer behavioral problems and gain more competency when raised by authoritative parents (Schwerdtfeger et al., 2013). A study conducted among preschool children raised by authoritative parents showed that those children are less likely to exhibit externalizing behavior problems (Cheah et al., 2009).

A cross-sectional study conducted by Paulussen-Hoogeboom et al. (2008) presented that authoritative parenting is related with limited internalizing problems. Similarly, Towe-Goodman and Teti (2008) showed that authoritarian parenting combining of high-power assertion and low nurturance is associated with increased internalizing problems. Baumrind, Larzelere, and Owens' (2010) findings revealed that authoritarian parenting at ages 3 to 5 predicted increased internalizing problems at age of 14 even after initial child dynamics are controlled. This long-term negative effect is related with externalizing and internalizing problems being associated with high levels of psychological control and verbal hostility used by authoritarian parents (Scaramella et al., 2008).

Furthermore, Strage and Brandt (1999) showed that college students raised by Authoritative parents reported more confidence, persistence, and academic success when compared to students raised by authoritarian or permissive parents. Another study conducted by Baldwin, McIntyre and Hardaway (2007) among a college population revealed that authoritative parenting style predicted late adolescent optimism.

According to Schwerdtfeger and colleagues (2013) verbal hostility observed in authoritarian parenting is an important mediator of the transmission of intergenerational trauma. This relationship is increased by verbal hostility, coercive control and limited nurturance of mothers in their study.

Another study conducted by Gander and Gardiner (2010) revealed that as families get enlarged, paternal interaction with the child decreases. With the birth of each child, parenting styles may be reproduced. More oppressive and less caring atttitudes may be observed. However, one perk of having more than one child, necessitates the father to be more active in child-rearing thus may be improving the father-child attachment.

Parental education level is also found to be an important contributor of parenting style. Von der Lippe (1999) by analyzing the education level, career status and parenting styles of 30 Egyptian mothers showed that as the educational level of mothers increases, the traditional parenting attitudes are less preferred and authoritative parenting style is increased.

Another study conducted by Degget and colleagues (2000) analyzing the relationship between challenging socioeconomic conditions and parenting styles presented that parents' negative expectations towards life and parenting, unrealistic developmental expectations from the child and negative attitudes towards their children are related with a challenging socioeconomic home environment.

1.4.6. *Parenting Styles Research in Turkey*

Although various studies are held in western literature in the past 30 years regarding child-rearing attitudes, theoretical and experimental studies that are held in Turkey remained limited (Yılmaz, 1999). Certain studies analyzed the relationship between

parenting style and adolescence outcomes (Akyıl, 2000; Kulaksızoğlu, 1985; Kuzgun, 1991), data regarding early preschool ages remained also limited.

Several studies conducted in Turkey for portraying the different components of parenting style widely focused on dynamics such as socioeconomic status, maternal educational level and parental perceived parenting.

Being a notion that is highly studied, socioeconomic status of the family is found to be correlated with the parenting style and child outcomes. Yılmaz (2004) expresses that in environments where the opportunities are limited, children's negative impacts to household finance leads to more negative parental attitudes towards the children. Also challenging household conditions are positively related with child abuse. In contrast in high-income group families, the parents are found to be more tolerant and more positive towards their children. Furthermore, parents who are in a higher socio-economic status value authority less while giving more room to curiosity, creativity, success, equality and problem-solving, when compared to parent from lower socioeconomic status. (Ayyıldız, 2005).

Focusing on the impacts of maternal age and socioeconomic statues, Ömeroğlu (1996) collected data from 103 mothers via PARI showed that working mothers performed a more oppressive parenting and maternal age did not impact the parenting style. On the other hand, as the household income decreased oppressive or overprotective parental attitudes are increased, and authoritative parenting is found to be decreasing. Tortumluoğlu's (1999) findings also presented similar findings that working mothers perform a more over-protective parenting and mothers' perceived parenting is highly related with their own parenting style.

Another study conducted by Ayyıldız (2005) also analyzed maternal educational level in relation to parenting style by running the analysis with 382 mothers who have children at ages between 0-6. The findings showed that as maternal education level is positively related with authoritative parenting, and as maternal age falls a more authoritarian style is observed. By using PARI among 145 mothers who have children at ages between 3-6, Mızrakçı (1994) showed as mothers' information regarding child-rearing increased more authoritative parenting is observed, and the child's temperament did not have a relationship with parenting style.

Yalçın and Türnüklü (2011) focusing on controlling and interfering parental attitudes showed that, the parents who are more controlling and intervening are individuals who have been deprived of the parental support they needed as children, and they have been raised with a more imbalanced discipline. The findings showed that they also received more oppression for success from their parents. Over-protective parents may be seeing their children as their own extensions, and they may be willing to compensate their own deprivations via their children. Child's dependent character is a mission for such parents. Those parents dictate their children in a manner which inhibits the child to reach to age-appropriate liberties and responsibilities. Child's individualization and separation is thus limited (Kulaksızoğlu, 2008).

Over-protective parents are portrayed as over-sensitive and protective in child's actions. They may not let the child to fulfill the age-appropriate self-care activities, child is not included in decision-making process for decisions related with the child, they are not tolerant to child's crying thus they take their children to doctors highly often, and in infancy they are highly hesitant to leave the child away from their lap (Çağdaş, 2012; Ünvar, 2008). Those children are highly challenged in decision-making when they become adults, they perform under their capacities due to the underdeveloped self-confidence, they may be dependent to others and expecting the similar overprotective attitudes from their own partners (Yavuzer, 1999; Ünvar, 2008).

1.5.Parental Bonding and Parenting Styles

In the study conducted by Adam, Gunnar, and Tanaka (2004), the effect of the mother's mediator feature on the relationship between attachment styles and child-rearing attitudes was examined. In this study, it was stated that mothers with an obsessive attachment style had angry/intrusive parenting behavior. In the same study, it was stated that this rate was lower for mothers who had a dismissive or secure attachment style. Tani et al. (2018) argued that a woman's attachment to her own mother, depending on the theory of intergenerational transmission, within the framework of Bowlby's attachment theory, has a great effect on her maternal role in the future. In the light of this information, they examined the relationship between the attachment style that pregnant women developed for their babies before and after the birth and the relationship they established with their own mothers. As a result, it has been stated that women who have good relations with their mothers have positive attachment

tendencies, care methods and attachment styles for their newborn babies. Moreover, individuals who have experienced insecure attachment for a variety of reasons, including early mother loss of a parent, childhood trauma/abuse related to the parent, and adult life losses, are unable to meet the requirements of secure attachment for their children (Güvendeğer Doksat and Demirci Çiftçi, 2016). It has also been reported that children whose mothers have insecure attachments to their own mothers have a higher incidence of insecure attachment (Raby et al., 2015).

1.6.Aim of the Study, Research Questions and Hypotheses

In the light of the literature that has been summarized above, clinicians and researchers have studied the effects of the parent-child relationship, which is very important for an individual's psychological development and well-being. There are numerous factors that influence parents' attitudes toward child rearing such as gender, age, educational level, family background, cultural background. One of the most significant of these factors is how the parents were raised by their own parents (Kesebir et al., 2011). Tani et al. (2018) argued that a woman's attachment to her own mother has a great effect on her maternal role in the future. In addition, Yan-Hua (2012) stated that mothers who had history of childhood abuse develops disorganized attachment pattern with their child. Therefore, it is important to investigate both which factors influence adverse childhood experiences and how adverse childhood experiences affect the parent-child relationship.

On the other hand, Sousa et al. (2010) argued that the child's secure attachment to parents will the protect the child from the effects of neglect and abuse. Thus, parental bonding is critical concept that affects both long term effects of adverse childhood experiences, and parents' child-rearing attitudes. Therefore, this study aims to investigate the effects of individuals' adverse childhood experiences on their parenting styles in relation to parental bonding with their own parents.

In accordance with this framework, the research questions are the followings:

Q_1: How does adverse childhood experiences affect one's bonding with parents?

Q_2: How does adverse childhood experiences affect one's parenting styles?

Q_3: How does one's bonding with their own parents affect their parenting styles toward their children?

Based on these research questions, the hypotheses are the following:

H_1: Adverse childhood experiences would significantly predict individuals' bonding with their parents.

H_2: Adverse childhood experiences would significantly predict individuals' parenting styles.

H_3: Individuals' bonding with their own parents would significantly predict their parenting styles.

H_4: Relationship between adverse childhood experiences and individuals' parenting styles would mediated by individuals' bonding with their own parents.

Secondary research questions:

Q_4: How does adverse childhood experiences differ by age, educational level, marital status of one's parents, and gender?

Q_5: How does parental bonding differ by age, educational level, marital status of one's parents, and gender?

Q_6: How does parenting styles differ by age, educational level, marital status of one's parents, and gender?

CHAPTER 2: METHOD

2.1. Participants

A total of 991 individuals participated in this study. Convenient sample type used in data collection. 272 of the participants were excluded from the study because they did not meet the criteria of being a parent to a 2-6 years old child. 46 of the participants reported that they had a psychological disorder (Bipolar Disorder, Panic Disorder, Depression etc.), so they excluded from the study as well. All participants met the criteria for being a parent to a 2-6 years old child. Total of 673 participants included in the current form of the study.

2.2. Instruments

Demographic Information Questionnaire, Adverse Childhood Experiences (ACE), Parents Attitude Scale (PAS) and Parental Bonding Instrument (PBI) have been used in this study.

2.3. Demographic Information Questionnaire

This questionnaire used to collect information about participants' ages, gender, marital status, education level as demographic variables. The participants were also asked about their parents' marital status. Lastly, participants were asked whether they had children, their children's ages, and their psychological disorders to see if they met the research criteria.

2.3.1. Adverse Childhood Experiences (ACE)

Adverse childhood experiences (ACE) were developed by CDC and Permanente in 1997. It was first translated into Turkish by Ulukal et al. (2013). However, its validity and reliability study were conducted by Gündüz et al. (2018). This questionnaire consists of 10 items questioning childhood traumas. The questionnaire includes questions about domestic emotional, physical, and sexual violence, abuse and neglect experienced by the subject in the first 18 years of his/her life. Questions contains only the 'yes' option, otherwise it is left blank. The total score of the ACE ranges from 1 to 10. It has no cutoff value. Higher scores indicate higher adverse childhood experiences.

2.3.2. *Parents Attitude Scale (PAS)*

This scale was developed by Demir and Şendil (2008) to measure the child-rearing behaviors of parents with children between the ages of 2-6. PAS is a self-report scale. The created items are in the form of behavioral patterns. There are 5 options that differ according to their frequency ratios against each type of behavior exists (5=always, 1=never). Thus, the parents who answered the questions were allowed to express how often they did the behavior. Points from each dimension calculated separately, and the scores are obtained for each dimension. To develop a scale that measures parent attitudes and behaviors, 12 different scales reviewed both from Turkey and abroad. The current Parents Attitude Scale consist of 46 items. The scale has 4 subscales (democratic, authoritarian, overprotective, permissive). Democratic subscale includes acknowledging that the child is a separate person, encouraging him/her to develop an independent personality and openly express his/her ideas, and it consists of 17 items. Authoritarian subscale reports no acceptance that the child is a separate individual, on the contrary, the understanding that the parent is the owner of the child is dominant. It also includes issues such as lack of communication, pressure, unconditional obedience to rules, verbal, and physical punishment, and consists of 11 items. Overprotective subscale reports that there is belief that the child cannot be self-sufficient and therefore must be constantly protected. It includes inappropriate interventions, excessive control, avoiding giving responsibility for the child, and it consists of 9 items. Permissive subscale includes topics such as welcoming whatever the child does, allowing too much freedom, and pampering the child and, it consists of 9 items.

2.3.3. *Parental Bonding Instrument (PBI)*

Parental Bonding Instrument was developed by Parker, Tupling and Brown (1979). This scale developed based on Bowlby's attachment theory. Bowlby's conception for "care and control/protection" elements of inadequate parenting was used by the authors when developing the scale. Turkish adaptation of the scale and its evaluation for psychometric properties conducted by Kapçı and Küçüker (2006). The scale retrospectively evaluates the individual's perception of his/her relationship with his/her parents. The scale has total of 25 items. It is a 4-likert scale (0=very like, 3=very unlike). Participants are asked to score perceived maternal and paternal behaviors individually. Parental Bonding Instrument has two subscales named as care/control

and overprotection. Retrospective perceived parental behavior is scored separately according to these two subscales. Overprotection subscale measured by 7 of the items. Care/control subscale measured by 18 of the items. Score increase on both total scale and two subscales indicates positive attachment.

2.4.Procedure

Before starting the study, permission was obtained from the ethics committee of Izmir University of Economics. After obtaining the ethics committee permission, an online survey was prepared to collect data. An informed consent form was given to the participants before starting the study. In this form, the participants were informed about the purpose and content of the study. The criteria for participating in the study and the duration of the study were explained to the participants. It was explained to the participants that the study was completely voluntary and that they could leave the study at any time without any consequences. It was informed to the participants that the study would not demand any personal information from them, and that the other information obtained would be used for purely scientific purposes. In addition, an e-mail address where they could reach the researcher was added and the participants were informed that they could submit their questions. In the end, participants stated that they understood the purpose of the study and participated completely voluntarily (See Appendix …). The online form was prepared via Google Forms and distributed through social platforms such as Whatsapp, Instagram, Linkedin etc. It took about 10 minutes for the participants to participate in the study. Demographic Information Questionnaire, Parents Attitude Scale (PAS) and Parental Bonding Instument (PBI), and Adverse Childhood Experiences (ACE) were given to the participants, respectively.

2.5.Statistical Analyses

Adverse childhood experiences was the predictor variable, parental bonding was the mediator variable, and authoritarian parenting was the outcome variable in this study. The analysis carried out by using IBM SPSS Statistics version 22. Firstly, reliability analyses conducted to for scales and subscales used in the study. Then, descriptive statistics used to explore mean values, frequencies, standard deviations, and percentages. In order to examine the effects of demographic variables on adverse childhood experiences, parental bonding, and parenting styles independent sample t-

test was conducted. Pearson's correlation was conducted to investigate relationships between study variables and subscales. Finally, a mediation analysis was conducted to investigate whether the parental bonding mediated the relationship between adverse childhood experiences and authoritarian parenting style by using PROCESS version 3.5 by Hayes (2020).

CHAPTER 3: RESULT

3.1. Descriptive Statistics

Demographic characteristics of the participants was examined. Participants' ages ranged from 23 to 55 (M=35.37, SD=4.47). 559 (83.1%) of the participants were females, and 114 (16.9%) of the participants were males. 649 (96.4%) of the participants were married, and only 24 (3.6%) of the participants were single parents. 3 (0.4%) of the participants graduated from primary school, 8 (1.2%) of the participants graduated from middle school, 94 (14%) of the participants graduated from high school, 86 (12.8%) of the participants have associate degree, 376 (55.9%) of the participants have bachelor's degree, 89 (13.2%) of the participants have master's degree, and 17 (2.5%) of the participants have doctoral degree. 50 (7.4%) of the participants reported that their parents divorced, or they live separately, 144 (21.4%) of the participants reported that one or both of their parents had passed away, and 479 (71.2%) of the participants stated that their parents are married, and they live together (See Table 1).

Table 1. Demographic Characteristic of the Participants

Variables	Categories	*N*	*%*
Gender	Male	114	16.9
	Female	559	83.1
Marital Status	Single	24	3.6
	Married	649	96.4
Educational Level of Participant	Low	191	28.4
	High	482	71.6
Parents' Marital Status	Together	479	71.2
	Separated	194	28.8

N number, % percentage

Descriptive statistics of the measurements for this study was conducted. Minimum/maximum, mean and standard deviation values of the measurements presented in the Table 2 below.

Table 2. The Descriptive Statistics of Variables

	N	Min	Max	Mean	SD
ACE	673	0	9	1,42	1,88
PAS_D	673	38	84	74,77	5,47
PAS_A	673	11	39	20,32	5,12
PAS_O	673	12	45	30,24	5,84
PAS_P	673	13	38	24,51	4,41
PBI_M	673	9	74	51,85	14,38
Care/Control_M	673	2	54	37,61	12,33
Overprotection_M	673	0	21	14,24	4,40
PBI_F	673	7	75	48,45	15,45
Care/Control_F	673	0	54	33,28	13,66
Overprotection_F	673	0	21	15,17	4,51

Note. ACE: Adverse Childhood Experiences; PAS_D: Democratic Parenting Style; PAS_A: Authoritarian Parenting Style; PAS_O: Overprotective Parenting Style; PAS_P: Permissive Parenting Style PBI_M: Parental Bonding for Mother; PBI_F: Parental Bonding for Father; Care/Control_M: Care and control dimension for one's mother; Low Overprotection_M: Overprotection dimension for Mother; Care/Control_F: Care and Control Dimension for Father; Low Overprotection_F: Overprotection Dimension for Father.

3.2. *Reliability of the Scales and Subscales*

A reliability analysis was carried out on the Adverse Childhood Experiences (ACE) scale consisted of 10 items, ($\alpha = 74$).

Reliability of the Parents Attitude Scale (PAS) was examined. Cronbach's alpha value for democratic subscale, authoritarian subscale, overprotective subscale, and permissive subscale was found as .79, .76, .80, and .65, respectively.

Lastly, reliability of Parental Bonding Instrument (PBI) was examined. Cronbach's alpha value for both mother and father scale was calculated as .92. Cronbach's alpha value for overprotection subscale for mother scale was calculated as .73, and for father scale was calculated as .75. Cronbach's alpha value for care/control subscale was calculated as .94 for both mother and father scales.

3.3. *Effects of Demographic Variables on ACE*

In order to examine the effects of demographic variables on adverse childhood experiences, an independent t-test was conducted.

An independent sample t-test showed that individuals whose families are separated reported more adverse childhood experiences ($M = 2.03$, $SE = 0.15$), than individuals whose families are not separated ($M = 1.18$, $SE = 0.08$). This difference, 0.85, BCa %95 Cl [0.546, 1.161], was statistically significant, $t(671) = 5.45$, $p < .001$.

An independent sample t-test showed that individuals with low education level reported more adverse childhood experiences ($M = 1.89$, $SE = 0.16$), than individuals with high education level ($M = 1.24$, $SE = 0.08$). This difference, 0.65, BCa %95 Cl [0.340, 0.963], was statistically significant, $t(671) = 4.10$, $p < .001$.

An independent sample t-test showed that women reported more adverse childhood experiences ($M = 1.53$, $SE = 0.08$), than men ($M = 0.92$, $SE = 0.14$). This difference, 0.61, BCa %95 Cl [0.228, 0.983], was statistically significant, $t(671) = 3.15$, $p = .002$.

3.4. *Effects of Demographic Variables on Parental Bonding*

3.4.1. *Effects of Demographic Variables on Bonding with Mother*

In order to examine the effects of demographic variables on parental bonding with mother, an independent t-test was conducted.

An independent sample t-test showed that individuals whose families are separated display less parental bonding with their mother (M = 45.42, SE = 0.16), than individuals whose families are not separated (M = 52.02, SE = 0.15). This difference, -6.6, BCa %95 Cl [0.561, 1.160], was statistically significant, t (671) =4.21, p = .02.

An independent sample t-test showed that individuals with low education level display less parental bonding with their mother (M = 47.73, SE = 1.11), than individuals with high education level (M = 53.48, SE = 0.62). This difference, -5.75, BCa %95 Cl [-8.132, -3.380], was statistically significant, t (671) = -4.76, $p < .001$.

An independent sample t-test showed that there was no significant difference between men (M = 51.42, SE = 1.14) and women (M = 52.02, SE = 0.63) in terms of parental bonding with their mother, t (671) = -0.49, p = .62.

3.4.2. Effects of Demographic Variables on Bonding with Father

An independent sample t-test showed that individuals whose families are separated display less parental bonding with their father (M = 45.47, SE = 0.29), than individuals whose families are not separated (M = 48.35, SE = 0.18). This difference, -2.88, BCa %95 Cl [0.475, 1.129], was statistically significant, t (671) =5.69, p = .03.

An independent sample t-test showed that individuals with low education level display less parental bonding with their father (M = 44.24, SE = 1.10), than individuals with high education level (M = 50.12, SE = 0.69). This difference, -5.88, BCa %95 Cl [-8.434, -3.321], was statistically significant, t (671) = -4.51, $p < .001$.

An independent sample t-test showed that women display less parental bonding with their father (M = 44.05, SE = 0.67), than men (M = 50.42, SE = 0.37). This difference, -6.37, BCa %95 Cl [0.487, 0.742], was statistically significant, t (671) = 2.49, p = .04.

3.5. Effects of Demographic Variables on Parenting Styles

3.5.1. Effects of Demographic Variables on Democratic Parenting Style

In order to examine the effects of demographic variables on parenting styles, an independent t-test was conducted.

An independent sample t-test showed that there was no significant difference between individuals whose families are separated (M = 74.83, SE = 0.41), and individuals whose families are not separated (M = 74.75, SE = 0.25) in terms of democratic parenting style, t (671) = 0.17, p = .86.

An independent sample t-test showed that individuals with high education level display more democratic parenting style (M = 75.07, SE = 0.23), than individuals with low education level (M = 74.02, SE = 0.45). This difference, 1.05, BCa %95 Cl [-1.972, -0.141], was statistically significant, t (671) = -2.27, p = .02.

An independent sample t-test showed that women display more democratic parenting style (M = 74.91, SE = 0.52), than men (M = 70.71, SE = 0.67). This difference, 4.2, BCa %95 Cl [1.321, 1.885], was statistically significant, t (671) = 3.39, p = .001.

3.5.2. Effects of Demographic Variables on Authoritarian Parenting Style

An independent sample t-test showed that there was no significant difference between individuals whose families are separated (M = 20.42, SE = 0.39), and individuals whose families are not separated (M = 20.28, SE = 0.22) in terms of authoritarian parenting style, t (671) = 0.33, p = .75.

An independent sample t-test showed that there was no significant difference between individuals with high education (M = 20.07, SE = 0.22), and individuals with low education (M = 20.93, SE = 0.41) in terms of authoritarian parenting style, t (671) = 1.97, p = .05.

An independent sample t-test showed that there was no significant difference between men (M = 20.64, SE = 0.47), and women (M = 20.25, SE = 0.22) in terms of authoritarian parenting style, t (671) = -0.74, p = .46.

3.5.3. Effects of Demographic Variables on Overprotective Parenting Style

An independent sample t-test showed that there was no significant difference between individuals whose families are separated (M = 29.80, SE = 0.43), and individuals whose families are not separated (M = 30.42, SE = 0.26) in terms of overprotective parenting style, t (671) = -1.25, p = .21.

An independent sample t-test showed that individuals with high education level display more overprotective parenting style ($M = 31.82$, $SE = 0.45$), than individuals with low education level ($M = 29.61$, $SE = 0.26$). This difference, 2.21, BCa %95 Cl [1.240, 3.175], was statistically significant, t (671) = 4.48, $p < .001$.

An independent sample t-test showed that there was no significant difference between men ($M = 30.23$, $SE = 0.48$), and women ($M = 30.24$, $SE = 0.25$) in terms of overprotective parenting style, t (671) = 0.03, $p = .98$.

3.5.4. Effects of Demographic Variables on Permissive Parenting Style

An independent sample t-test showed that there was no significant difference between individuals whose families are separated ($M = 24.55$, $SE = 0.32$), and individuals whose families are not separated ($M = 24.50$, $SE = 0.20$) in terms of permissive parenting style, t (671) = 0.12, $p = .90$.

An independent sample t-test showed that there was no significant difference between individuals with high education ($M = 24.56$, $SE = 0.19$), and individuals with low education ($M = 24.39$, $SE = 0.35$) in terms of permissive parenting style, t (671) = -0.45, $p = .65$.

An independent sample t-test showed that there was no significant difference between men ($M = 24.81$, $SE = 0.40$), and women ($M = 24.45$, $SE = 0.19$) in terms of permissive parenting style, t (671) = -0.78, $p = .44$.

3.6. Correlation Analysis of Study Variables

Correlation analysis was conducted to investigate relationships between study variables. As seen in Table 3, results of the Pearson's correlation indicated that there was a significant negative association between adverse childhood experiences and parental bonding with one's mother ($r = -.45$, $p < .001$), and significant negative association between adverse childhood experiences and parental bonding with one's father ($r = -.44$, $p < .001$). Adverse childhood experiences were also negatively correlated with age of the participants ($r = -.15$, $p < .001$). Authoritarian parenting style was negatively correlated with democratic parenting style ($r = -.30$, $p < .001$), and positively correlated with overprotective parenting style ($r = .15$, $p = .01$), and

permissive parenting style ($r = .08$, $p = .02$). Parental bonding with one's mother and father was found to be positively correlated ($r = .43$, $p < .001$). Parental bonding with one's mother was positively associated with democratic parenting style ($r = .09$, $p = .02$), however, it was negatively correlated with authoritarian parenting style ($r = -.12$, $p = .002$). Authoritarian parenting style also negatively correlated with parental bonding with one's father ($r = -.14$, $p < .001$). Age of the participants positively correlated with parental bonding with one's father ($r = .09$, $p = .02$), and negatively correlated with democratic parenting style ($r = -.13$, $p = .001$), overprotective parenting style ($r = -.12$, $p = .003$). Also, there is a positive correlation between adverse childhood experiences and authoritarian parenting style ($r = .08$, $p = .04$).

Table 3. Correlations between the study variables

	1	2	3	4	5	6	7
ACE							
PBI_M	-.453**						
PBI_F	-.437**	.425**					
PAS_D	-.001	.092*	.072				
PAS_A	.078*	-.117**	-.135**	-.296**			
PAS_O	-.039	-.017	-.018	.075	.149**		
PAS_P	.041	-.040	.014	.042	.080*	.290**	
Age	-.149**	.050	.093*	-.125**	.028	-.116**	-.047

Note. ACE: Adverse Childhood Experiences; PBI_M: Parental Bonding for Mother; PBI_F: Parental Bonding for Father; PAS_D: Democratic Parenting Style; PAS_A: Authoritarian Parenting Style; PAS_O: Overprotective Parenting Style; PAS_P: Permissive Parenting Style; Age: Age of the participants; **Correlation is significant at the .01 level (2-tailed); *Correlation is significant at the .05 level (2-tailed); N=673.

Correlation analysis was conducted to investigate relationships between subscales as shown in Table 4, authoritarian parenting style was negatively associated with

care/control of the mother ($r = -.09$, $p = .02$), overprotection of the mother ($r = -.13$, $p = .001$), care/control of the father ($r = -.12$, $p = .002$), overprotection of the father ($r = -.09$, $p = .02$). Democratic parenting style was positively correlated with care/control of the mother ($r = .10.$, $p < .007$).

Table 4. Correlations between subscales

|	1	2	3	4	5
PAS_D					
PAS_A	-.296**				
Care/Control_M	.104**	-.090*			
Low Overprotection_M	.009	-.130**	.326**		
Care/Control_F	.071	-.121**	.389**	.116**	
Low Overprotection_F	.030	-.094*	.224**	.474**	.258**

Note. PAS_D: Democratic Parenting Style; PAS_A: Authoritarian Parenting Style; Care/Control_M: Care and control dimension for one's mother; Low Overprotection_M: Overprotection dimension for one's mother; Care/Control_F: Care and control dimension for one's father; Low Overprotection_F: Overprotection dimension for one's father; **Correlation is significant at the .01 level (2-tailed); *Correlation is significant at the .05 level (2-tailed); N=673.

3.7. *Mediation Analysis of Parental Bonding with Mother on the Relationship Between Adverse Childhood Experiences and Authoritarian Parenting Style*

A mediation analysis was conducted to investigate whether the parental bonding with mother mediated the relationship between adverse childhood experiences and authoritarian parenting style by using PROCESS. Parental bonding with mother entered as mediator variable and adverse childhood experiences was the predictor variable, the model significantly explained %1 of the variance in authoritarian parenting style, $R^2 = .01$, $F(2,670) = 4.94$, $p = .001$. In particular, adverse childhood experiences significantly predicted parental bonding with mother (a-path; $\beta = -3.47$, t

= -13.17, $p < .001$). Parental bonding with mother significantly predicted authoritarian parenting style (b-path; $\beta = -.04$, $t = -2.40$, $p = .02$). Moreover, the indirect effect of adverse childhood experiences on authoritarian parenting style through the mediator parental bonding with mother (ab-path) was estimated to lie between .014 and .246. Since the 95% confidence interval for the indirect pathways does not include zero, this indicates a significant mediated pathway. Also, total effect of adverse childhood experiences on authoritarian parenting style was found to be significant (c-path; $\beta = .21$, $t = 2.02$, $p = .04$). However, with parental bonding in the model, direct effect of adverse childhood experiences on authoritarian parenting style was statistically not significant (c'-path; $\beta = .08$, $t = .72$, $p = .47$). Therefore, parental bonding with mother fully mediated the relationship between adverse childhood experiences and authoritarian parenting style.

Figure 1. Mediational Model of Parental Bonding with Mother on the Relationship Between Adverse Childhood Experiences and Authoritarian Parenting Style.
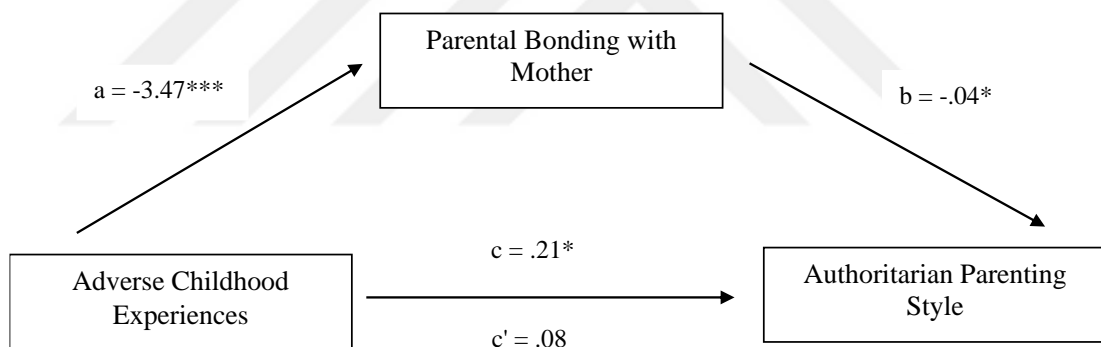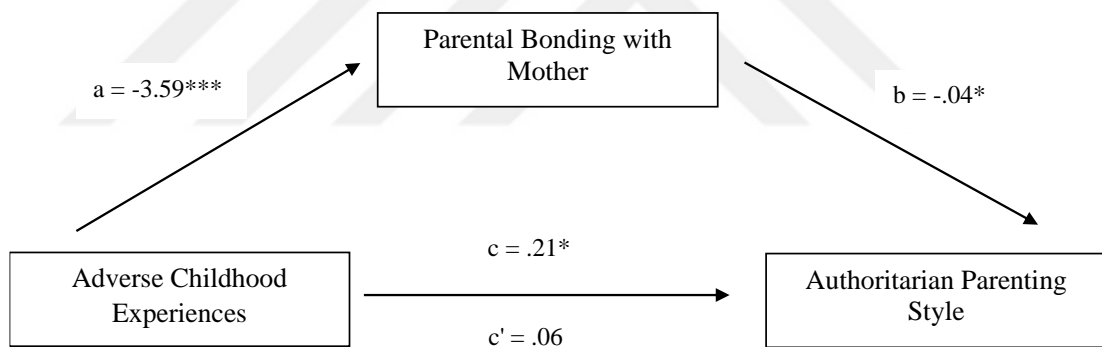

* p<.05, ** p<.01, *** p<.001.

3.8. Mediation Analysis of Parental Bonding with Father on the Relationship Between Adverse Childhood Experiences and Authoritarian Parenting Style

A mediation analysis was conducted to investigate whether the parental bonding with father mediated the relationship between adverse childhood experiences and authoritarian parenting style by using PROCESS. Parental bonding with father entered as mediator variable and adverse childhood experiences was the predictor variable, the model significantly explained %2 of the variance in authoritarian parenting style, $R^2 = .01$, $F(2,670) = 6.36$, $p = .001$. In particular, adverse childhood experiences

significantly predicted parental bonding with father (a-path; $\beta = -3.59$, $t = -12.57$, $p <$ .001). Parental bonding with father significantly predicted authoritarian parenting style (b-path; $\beta = -.04$, $t = -2.93$, $p = .003$). Moreover, the indirect effect of adverse childhood experiences on authoritarian parenting style through the mediator parental bonding with mother (ab-path) was estimated to lie between .046 and .260. Since the 95% confidence interval for the indirect pathways does not include zero, this indicates a significant mediated pathway. Also, total effect of adverse childhood experiences on authoritarian parenting style was found to be significant (c-path; $\beta = .21$, $t = 2.03$, $p = .03$). However, with parental bonding in the model, direct effect of adverse childhood experiences on authoritarian parenting style was statistically not significant (c'-path; $\beta = .06$, $t = .55$, $p = .58$). Therefore, parental bonding with father fully mediated the relationship between adverse childhood experiences and authoritarian parenting style.

Figure 2. Mediational Model of Parental Bonding with Father on the Relationship Between Adverse Childhood Experiences and Authoritarian Parenting Style.

* p<.05, ** p<.01, *** p<.001.

CHAPTER 4: DISCUSSION

Relationship between adverse childhood experiences and parenting styles and the mediating role of paternal bonding with their own parents examined in this study. The findings of the analysis are detailed in the result section. In this section, the results of the analysis and the literature are compared.

4.1. Evaluation of Effects of Demographic Variables on Adverse Childhood Experiences

In this section, the effect of education level, gender of the participants, and marital status of participants' parents on adverse childhood experiences are discussed.

4.1.1. Evaluation of Effects of Education Level on Adverse Childhood Experiences

Finding of this study showed that lower education level indicates higher adverse childhood experiences. Therefore, this finding is consistent with the existing literature. Park et al. (2014) revealed the population with a high level of childhood trauma has a low level of education. In a longitudinal study by Busby et al. (2013) revealed that people with a traumatic past achieved less academic success. Porche et al. (2011) stated that childhood trauma has a significant impact on the development of mental health disorders as well as high school dropout. Slade and Wissow (2007) stated in their study that childhood abuse was a predictor of low GPA. Low education level may also be associated with low socioeconomic status. According to the results of a study conducted by Suglia et al. (2015) a significant result was obtained between the income level variable and the adverse childhood experiences variable. Accordingly, it was observed that the adverse childhood experiences score increased as the income level decreased.

4.1.2. Evaluation of Effects of Gender on Adverse Childhood Experiences

This study showed that women reported more adverse childhood experiences than men. Likewise, existing literature revealed that women experience more adverse childhood experiences than men (Felitti et al., 1998). Zeren et al. (2012) found in their study that all three types of abuse were significantly higher in male students. In a study

conducted by Özen et al., while physical abuse was at the same level in both genders, sexual and emotional abuse was found to be higher in boys. Taner and Gökler (2004) reported that girls are more exposed to physical abuse during adolescence. Kara et al. (2004) stated that sexual abuse differs between the sexes and is three times more common in girls. Finkelhor (1994) stated that most victims of sexual abuse are girls, however, the exposure of boys' abuse is less than girls. Biçer et al. (2004), on the other hand, reported that rates of sexual abuse ranged from 7-36% for women and 8-29% for men in a compilation of 24 studies published from 20 countries. Bostancı et al. (2006), found that there was no significant difference between genders in terms of abuse experiences, as in our study. It is thought that this difference in the literature may be due to the fact that participants do not express themselves sufficiently in questions about adverse childhood experiences.

4.1.3. Evaluation of Effects of Marital Status of Participants' Parents on Adverse Childhood Experiences

Adverse childhood experiences also differ according to marital status of participants' parents. The adverse childhood experiences of the participants who declared that their parents were divorced, and/or one or both parents passed away were higher than participants who declared that their parents were still together. Divorce or death of parents is also considered as an adverse childhood experience, thus people who are exposed to this situation have more adverse childhood experiences. Children from single or divorced families are less likely to be sexually abused (Behere et al., 2017). Another study revealed that children who lost their parents had twice the incidence of childhood traumas compared to those who did not experience loss (Kathryn et al., 2011). In the study of Ulukol et al. (2014), the difference between adverse childhood experience history and marital status of the parents was found to be statistically significant, and the prevalence of at least one negative life experience was higher among those who responded with a broken family or extended family. In a study of adverse life experiences of university students in Romania, household dysfunction was common in broken families (Baban et al., 2013). Sidebotham and Heron (2006) stated that children in families with a high number of individuals are in the risk group in terms of neglect and abuse. Sethi et al. (2013) stated that extended family and single parenthood pose a risk for child neglect and abuse. The data in this study are consistent

with the findings (Sethi et al., 2013) suggesting that family type is a resilience factor in preventing child neglect and abuse. The thought of being a broken family, allocating less time and resources to the child within the scope of the parental role, and therefore the fact that parents may face more financial, parenting and relationship stress, brings to mind the risk of neglect and abuse on behalf of the child.

4.2. Evaluation of Effects of Demographic Variables on Parental Bonding

In this section, the effect of education level, gender of the participants, and marital status of participants' parents on participants' parental bonding with their parents are discussed.

4.2.1. Evaluation of Effects of Education Level on Parental Bonding

In this study, the scores of bonding with both mothers and fathers was observed to vary according to the education level of the participants. In particular, education level increases as bonding with both parents increase. This finding supports the relevant literature. People with a positive attachment to their parents are more willing to learn and use effective learning strategies (Hess, 1997). In a study by Moullin, Waldfogel, and Washbrook (2014), there is evidence that the emotional bond a child establishes with his caregiver affects their education and predicts their ability to learn.

4.2.2. Evaluation of Effects of Gender on Parental Bonding

In this study, while the parental bonding with father differed in terms of gender, no difference was found in the parental bonding with mother. In particular, men had more positive bonding with their fathers than girls. In a study by West et al. (1998), no significant difference between genders was found in terms of bonding with mother and father. In a study conducted by Roelofs et al. (2006), significant difference was found between genders in terms of healthy communication and bonding the family. Findings from this study shows parallelism with some studies in the literature, while some studies show contradictions. The reason why there was no difference in terms of gender in the scores of bonding with mothers may be due to the fact that the primary caregiver for both genders was the mother, especially in Turkish society. The finding that men's bonding with their fathers is more positive can be interpreted as men can establish better relationships with fathers in the Turkish family structure, and that there

is a more distant relationship between women and their fathers. In Turkish culture, the father figure is seen as the basic authority and the attitudes and behaviors of the father figure differ according to the girl and boy. Especially since the authority to set rules is mostly under the responsibility of the father and the father figure exhibits attitudes that limit girls more than boys, it is expected that there will be a difference. For example, fathers may interfere more with their daughters in matters such as choosing a partner, school, friends, profession, and romantic relationships. Looking at the relevant literature on the subject, a study investigated the relationship of girls with their fathers and revealed that fathers are less preferred than mothers or best friends in all attachment functions (Sümer and Güngör, 1999). According to a study conducted with 6061 participants in Turkey, attachment to parents differs according to gender due to the social role of women (Doğan, 2016).

4.2.3. Evaluation of Effects of Marital Status of Participants' Parents on Parental Bonding

Parental bonding scores of the participants who declared that their parents were divorced, and/or one or both parents passed away were lower than participants who declared that their parents were still together. This finding reveals that parental bonding is affected by parents' marital status. Similar to the findings of the study, Sardoğan et al. (2007) found that there was a significant difference between the attachment of children and the marital status of the parents, in their study with children whose parents were divorced and whose parents were not. The secure attachment levels of children with divorced parents were lower than those of other children whose parents were not divorced.

4.3. Evaluation of Effects of Demographic Variables on Parenting Styles

In this section, the effect of education level, and gender of the participants on parenting styles of participants are discussed.

4.3.1. Evaluation of Effects of Education Level on Parenting Styles

The results of the study showed that the education level of the participants affected the democratic and overprotective parenting styles. However, authoritarian parenting style and permissive parenting style did not affected by education level of the participants. As the education level of the participants increased, democratic and overprotective parenting behaviors increased, but permissive parenting behaviors decreased. Tortumluoğlu (1999) concluded in his study that overprotective attitudes of mothers with higher education levels increased. In the study of Bazarbashi (2014), in which the effects of demographic characteristics of mothers on child-rearing attitudes were examined, it was found that the permissive attitude scores of mothers who graduated from primary school were higher than mothers who graduated from secondary school, high school, associate degree, university and master / doctorate. Karabulut Demir and Şendil (2008) found that mothers' democratic, authoritarian, and overprotective attitudes increased with the level of education. Many studies in the literature reveal that there is a relationship between the educational status of parents and parenting styles, and as the education level of mothers increases, they move away from negative parenting styles (Fox, Platz, and Bentley, 1995). It is an expected situation that the overprotective attitudes of mothers with a high level of education towards their children will decrease. However, in our country, individuals who will become parents are not given any education on this subject in schools, which means that having a high level of education does not mean that they will have information about child development and education. On the other hand, increasing the education level can improve the ability of mothers to evaluate events from many perspectives (Alisinanoğlu et al., 2000). Being aware of the dangers that may come from the environment may cause an increase in overprotective behaviors. Mızrakçı (1994) found that the most effective factor in maternal attitudes was the mother's education level, and stated that as the mother's education level increased, the protective attitude decreased. Overprotective attitudes of university graduate mothers are lower (Tezel

and Özyürek, 2005). The literature on this subject has obtained different results from each other. This difference can be explained by the fact that mothers' perspectives on events, awareness levels, perception and reasoning skills are different even if their education levels are the same.

4.2.1. Evaluation of Effects of Gender on Parenting Styles

The gender of the participants differed only for the democratic parenting style. Mothers adopted more democratic attitudes than fathers. Özyürek and Tezel (2005) concluded that mothers are more democratic than fathers. This suggests that parents who have a shared responsibility in childcare still act with the traditional parent approach. Considering that fathers as well as mothers are responsible for the care and upbringing of the child, both parents should receive adequate training in this regard.

4.1.5. Evaluation of Correlation Analysis of Study Variables

In this study, a negative and moderate relationship was found between adverse childhood experiences and parental bonding with mother. Likewise, a negative and moderate relationship was found between adverse childhood experiences and parental bonding with father. This finding reveals that as adverse childhood experiences increase, people become more negatively attached to their parents. Looking at the literature, there are many studies that support this finding. Youngblade and Belsky (1990) revealed that abused children are more insecurely attached to their mothers. In his study, Crittenden (1998) examined the attachment of abused and neglected children to their mothers and discovered that 79% of them had insecure attachment. Negative bonding of people who had adverse experiences in childhood to their parents is due to the measurement tools used in the research to measure interpersonal trauma. Experiencing household adverse experiences causes deterioration in the relationship with parents. A moderate and positive relationship was found between individuals' attachment to their mothers and fathers. As the positive attachment to the mother increases, the increase of the positive attachment to the father suggests that the person's attachment to the father may be through the mother. Similar studies are found in the literature. Uluman (2011) examined the relationship between attachment styles and irregular behaviors in high school students and stated that there was a statistically significant positive and strong relationship between father and mother forms, and as

the mother form scores increased, the father form scores also increased. In the study conducted by Günaydın et al. (2005), there was a significant and strong relationship between total scores of attachments to parents. Sümer's (2008) study examining the attachment of individuals from childhood to late adolescence and to their parents determined that attachment to mother and father was positively correlated.

In line with these findings, people who do not experience domestic violence, do not have depressive or suicidal members in their family, do not have alcohol problems by their household members, and do not have a family member involved in crime or imprisoned perceive their parents as more caring and less protective. The way to protect the child from negative life experiences may be establishing a healthy family.

The findings in this study revealed that as the democratic parenting style increased, the authoritarian parenting style decreased. The authoritarian parenting style is characterized by the imposition of absolute power on children. Children must obey their parents. Parents create the rules and implement the consequences with little regard for their children's opinions. Democratic parents set rules and enforce them, but they also consider their children's perspectives. They acknowledge their children's feelings while emphasizing that the adults are in charge in the end (Bi et al., 2018). The fact that these parenting styles are at different extremes in the definition makes this finding expected. However, in the scale development studies of Karabulut-Demir and Şendil (2008), a low level, positive and significant relationship was found between authoritarian parenting style and democratic parenting style. When the results of this thesis study were examined, relationships between different parental attitudes in terms of warmth/sensitivity and demand/control dimensions found to be consistent. The negative relationship between democratic and authoritarian attitudes may be related to the warmth/sensitivity dimension.

Bonding with both parents is negatively related to authoritarian parenting style. Bonding of individuals with their mothers was positively associated with democratic parenting style. This result reveals that while democratic parenting style strengthens parental bonding, authoritarian parenting style weakens it. This finding is in parallel with the relevant literature. According to the study conducted by Şahin and Özyürek (2008), the democratic attitude of the parents is an important factor in the development of a secure attachment pattern of children. The meta-analysis conducted by Şalcı et al.

(2018) reveals that as the democratic attitude of the parents increases, the parents offer the child an environment where they can make their own decisions. Thus, the child develops features such as the development of free will and the ability to freely express their own decisions, and a secure attachment pattern is formed. Contrary to the democratic attitude, authoritarian attitudes of the parents interrupted the secure attachment pattern with the increase in the anxiety level of the child and the increase in the search for attention.

Finally, number of reported adverse childhood experiences decrease as participants' ages increases. This finding contradicts with the existing literature as Trends (2014) found that age and adverse childhood experiences total score were positively correlated, and adverse childhood experiences total score increased as age increased. This difference is thought to be related to the Turkish society structure. Relatively younger people may share their adverse experiences more easily than older people in self-report scales.

4.1.6. Evaluation of Mediation Analysis of Parental Bonding on the Relationship Between Adverse Childhood Experiences and Authoritarian Parenting Style

According to the results of the study, the effect of adverse childhood experiences on authoritarian parenting was mediated by bonding with both mother and father. When the relevant literature is examined, it is seen that exposure to authoritarian parenting negatively affects the well-being of the individual. In one study, authoritarian parenting was positively associated with aggressive behavior and negatively associated with peer acceptance, sociability, good studentship, and academic success at school. On the other hand, it has been shown that democratic attitude is positively related to adjustment in social life and school (Chen, Dong, and Zhou, 1997). Longitudinal studies were carried out to investigate the link between a mother's attitude and her child's behavior. When the findings of these research were analyzed, it was discovered that the mother's authoritarian attitude caused behavioral difficulties in the child (Thompson, Hollis, and Richards, 2003). It was discovered that the mother's strict discipline has a positive relationship with the child's negative affect and low assertiveness level and that the mother's hostile child-rearing attitude affects the child's tendency to depression during adolescence (Katainen et al., 1997). According

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to Flouri (2004), non-authoritarian mother attitude is associated with daughters' self-efficacy and life satisfaction in their adult lives. In this context, the mediating role of parental bonding to the effect of adverse childhood experiences on authoritarian parenting becomes more important. Guterman (1999), Sousa et al. (2010) found that the child's secure attachment to parents, appropriate parental care and attention, parents' positive, supportive, and warm relationship with the child will the protect the child from the effects of neglect and abuse. Thus, they argued that it would alleviate the negative impact of abuse on the child. Ulukol et al. (2014) stated in their study that it would be beneficial to emphasize the importance of family support to provide supportive environments in order to prevent distress in children. They also stated that the family's lack of psychological support for the child made it difficult for the child to cope with adverse experiences. Sümer and Güngör (1999) revealed that parents' authoritarian styles negatively affect their relationship with the individual and decrease their secure attachment scores, while increasing their fearful and anxious attachment scores. Therefore, adverse childhood experiences predict authoritarian parenting style, while authoritarian parenting style creates adverse childhood experience for next generation. This model demonstrates that it is necessary to strengthen parental bonding to counteract the impact of adverse childhood experiences on authoritarian parenting.

4.2. Limitations and Future Suggestions

In this section, the limitations of the study and suggestions for researchers are presented.

It is thought that some limitations may have arisen due to the self-report scales used in the study. A biased answer may be given because some of the information used in the study may be sensitive. In particular, asking the participants questions about their parenting styles may have led to biased responses. The high level of education of the participants suggests that they are aware of more positive parenting attitudes even if they do not practice them, and that they are likely to give close answers to these attitudes. Thus, the social desirability bias may have also been influential. In this sense, it was deemed appropriate to collect data from children as well as adults about parenting styles in future studies. Likewise, it may have been difficult for participants to convey their negative experiences in the household. In our study, childhood abuse experiences were determined retrospectively and based on the self-reports of the

participants. Therefore, it cannot be argued that the obtained findings fully report the actual frequency of abuse experience in this population. The fact that very few people report abuse makes it difficult to obtain real statistical data on the prevalence of abuse. The use of convenient samples in the research also limits its generalization. Using random sample type in future studies and conducting it with participants from different cultures and different educational levels will increase the generalizability of the study. Therefore, it would be beneficial to study the findings obtained from this study in a larger sample. There are many studies that examine mother as an attachment figure, however, limited number of studies focuses on fathers' role in the attachment. Thus, investigating father's role in both child and adult attachment would be critical. The retrospective nature of the study can also be considered as a limitation. Retrospective studies also provide informative results, but longitudinal studies are needed to see the effects of child abuse in adulthood. Due to the limited number of studies in the literature examining the attachment styles of adults with their own parents, it is recommended to conduct studies that include attachment of parents with their children as well as attachment with their own parents.

CHAPTER 5: CONCLUSION

In the study, mainly the effect of adverse childhood experiences on parenting styles and the role of parental bonding to this relationship were investigated.

As the education level decreased, adverse childhood experiences increased. It has been revealed that the level of education also has an effect on the democratic parenting style. People with higher education levels tend to adopt more democratic parenting attitudes. As the literature reveals, democratic parenting style creates positive effects on the child and produces desired outcomes. Thus, supporting education may be a factor that protects children from adverse experiences.

One of the most important findings of the study is that the relationship between adverse childhood experiences and authoritarian parenting was mediated by parental attachment. Precisely, adverse experiences predict how individuals will be a parent to their own children. Parents with adverse childhood experiences display more authoritarian parenting attitudes. As adverse childhood experiences increase, bonding with both mother and father deteriorates. While it is seen that the increase in adverse childhood experiences predicts people to be more authoritarian parents, it is also known that authoritarian parents also have negative effects on children. The importance of parental bonding to break this cycle has emerged as a result of this study. The negative effects of expecting unconditional obedience from the child in the authoritarian parenting style were discussed in the study. For this reason, it will be important to reduce the authoritarian attitude of parents and increase the democratic attitude.

5.1. Clinical Implications

Raising awareness within the scope of preventing adverse childhood experiences is highly important. Especially in Turkish society, children remain culturally passive, they are asked not to make a sound and obey the elders, and the child's acceptance mostly depend on these conditions. On the other hand, adults with a traumatic past can reflect their own children's distress and symptoms or apply them to their children. This creates an unhealthy society. In the light of this work, various programs can be developed to reduce the effects of adverse childhood experiences and to explain the

importance of parental bonding. Programs can be developed to teach the society about the effects of parenting styles and to inform them about raising children.

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APPENDICES

Appendix A

SAYI : B.30.2.İEÜ.0.05.05-**020**-*114*   03.03.2021

KONU : Etik Kurul Kararı hk.

Sayın Prof. Dr. Falih Köksal ve Şeyma Nur Babacan,

"Effects of Adverse Childhood Experiences on Parenting Styles and the Role of Parental Bonding" başlıklı projenizin etik uygunluğu konusundaki başvurunuz sonuçlanmıştır.

Etik Kurulumuz 02.02.2021 tarihinde sizin başvurunuzun da içinde bulunduğu bir gündemle toplanmış ve projenin incelenmesi için bir alt komisyon oluşturmuştur. Projenizin detayları alt komisyon üyelerine gönderilerek görüş istenmiştir. Üyelerden gelen raporlar doğrultusunda Etik Kurul 03.03.2021 tarihinde tekrar toplanmış ve raporları gözden geçirmiştir.

Sonuçta 03.03.2021 tarihinde **"Effects of Adverse Childhood Experiences on Parenting Styles and the Role of Parental Bonding"** konulu projenizin etik açıdan uygun olduğuna oy birliğiyle ile karar verilmiştir.

Gereği için bilgilerinize sunarım.

Saygılarımla,

Prof. Dr. Murat Bengisu
Etik Kurul Başkanı

Appendix B

İZMİR EKONOMİ ÜNİVERSİTESİ
LİSANSÜSTÜ EĞİTİM ENSTİTÜSÜ

IZMIR UNIVERSITY OF ECONOMICS
GRADUATE SCHOOL

YÜKSEK LİSANS TEZ ÇALIŞMASI ORJİNALLİK RAPORU/ MASTER'S THESIS ORIGINALITY REPORT

LİSANSÜSTÜ EĞİTİM ENSTİTÜSÜ PSİKOLOJİ ANABİLİM DALI BAŞKANLIĞI'NA/**TO THE DEPARTMENT OF PSYCHOLOGY OF GRADUATE SCHOOL**

Tarih/**Date**:02/08 /2021

Adı Soyadı/ **Name-Last Name:**	Şeyma Nur BABACAN
Öğrenci Numarası/ **Student ID Number:**	20193557013
Anabilim Dalı ve Programı / **Department and Program:**	Psychology / Clinical Psychology

Tez Başlığı ve Konusu/**Thesis Title and Topic:** Effects of Adverse Childhood Experiences on Parenting Styles and Role of Parental Bonding

Yukarıda başlığı/konusu gösterilen tez çalışmamın a) Kapak sayfası, b) Giriş, c) Ana bölümler ve d) Sonuç kısımlarından oluşan toplam sayfalık kısmına ilişkin, 01/08/2021 tarihinde şahsım/tez danışmanım tarafından Turnitin adlı intihal tespit programından aşağıda belirtilen filtrelemeler uygulanarak alınmış olan orijinallik raporuna göre, tezimin benzerlik oranı %10'dur./ **The similarity index of my thesis, obtained by myself/my thesis advisor based on the originality report by using the Turnitin plagiarism detection software and by applying the filtering options stated below on 01/08/2021 regarding my thesis of 89 pages which includes a) Title Page, b) Introduction, c) Main Chapters, and d) Conclusion sections titled as above, is %10**

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- ■ Kabul/Onay ve Bildirim sayfaları hariç/ **Approval and Declaration sections excluded**
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  *** *Öğrencinin tezi ile ilgili yapmış olduğu yayınlar kapsam dışı bırakılabilir.*/ Publications regarding student's dissertation may not be included.**

İzmir Ekonomi Üniversitesi Kütüphanesi Turnitin adlı intihal tespit programı sonucunda; azami benzerlik oranlarına göre tez çalışmamın herhangi bir intihal içermediğini; aksinin tespit edileceği muhtemel durumda doğabilecek her türlü hukuki sorumluluğu kabul ettiğimi ve yukarıda vermiş olduğum bilgilerin doğru olduğunu beyan ederim./ **I, hereby, declare that my thesis does not include any form of plagiarism based on Izmir University of Economics Turnitin titled plagiarism detection software; that in any future detection of possible infringement of the regulations, I accept all legal responsibility; and that all the information I have provided above is correct to the best of my knowledge.**

Şeyma Nur BABACAN

TEZ DANIŞMANI ONAYI/ ADVISOR APPROVAL

Bu tez çalışması; İEÜ Senatosu'nun, 12.03.2009 tarihli ve A/8 numaralı kararına dayanarak hazırlanan Etik Kurul Yönergesi kapsamında kurulan Etik Kurul tarafından oluşturulan işleyiş ve uygulama esaslarına göre hazırlanmıştır./ **This thesis has been prepared in accordance with the operation and codes of practice established by the Ethics Committee set up as part of the IUE Regulation for Ethics Committee pursuant to the decision of IUE Senate dated 12 March 2009 and numbered A/8.**

UYGUNDUR/ **APPROVED**
Prof. Dr. Falih KÖKSAL

Appendix **C**

KATILIMCI BİLGİLENDİRME FORMU

Bu çalışma, İzmir Ekonomi Üniversitesi Klinik Psikoloji Yüksek Lisans programı kapsamında, Prof. Dr. Falih KÖKSAL danışmanlığında, Şeyma Nur BABACAN tarafından yürütülen bir tez çalışmasıdır. Bu araştırmanın amacı çocukluk çağı olumsuz yaşantılarının ebeveynlik stilleri üzerindeki etkilerini incelemektir. Araştırma yaklaşık 20 dakika sürmektedir. Araştırmaya katılmak için 20-50 yaşları arasında olmanız ve 2-6 yaşları arasında çocuğunuz olması yeterlidir.

Araştırmaya katılmak tamamen gönüllülük esasına dayanmaktadır. Katılımcılar dilediği zaman araştırmayı bırakmakta serbesttir. Çalışma boyunca sizden herhangi bir kimlik bilgisi talep edilmeyecektir. Araştırma sırasında elde edilen bilgiler ve araştırma verileri tarafımızca saklı tutulacak ve tamamen bilimsel amaçlı olarak kullanılacaktır.

Eğer araştırmanın amacı ile ilgili verilen bu bilgiler dışında şimdi veya sonra daha fazla bilgiye ihtiyaç duyarsanız araştırmacıya aşağıdaki e-mail adresinden ulaşabilirsiniz. Katılımınız için teşekkür ederiz.

████████████████

Yukarıda yer alan ve araştırmadan önce katılımcıya verilmesi gereken bilgileri okudum ve katılmam istenen çalışmanın kapsamını ve amacını, gönüllü olarak üzerime düşen sorumlulukları anladım.

☐ Kabul Ediyorum

☐ Kabul Etmiyorum

Appendix D

ACE Travma Puanınızı Bulabilirsiniz Tarih :

Siz büyürken, hayatınızın ilk 18 yılında; Ad Soyad:

1	Bir ebeveyniniz ya da ev halkından yetişkin biri **sıklıklaya da çok sıklıkla…** Size **küfür** etti mi, sizi **hor gördü mü**, sizi **aşağıladı** mı ya da sizi **küçümsedi mi**? Ya da Sizi **fiziksel** anlamda**incitecek** bir şekilde davranıp sizi **korkuttu mu**? Bir tane dahi varsa işaretleyin **Evet** ◯
2	Bir ebeveyniniz ya da ev halkından yetişkin biri **sıklıkla ya da çok sıklıkla…** Sizi **itip tartakladı mı, tokatladı mı** ya da size bir şey **fırlattı mı**? Ya da Size **hiç iz kalacak** ya da **yaralanacağınız** kadar güçlü vurdu mu? Bir tane dahi varsa işaretleyin **Evet** ◯
3	Bir yetişkin ya da sizden en az 5 yaş büyük biri **hiç…** Size hiç **dokundu mu** ya da sizi hiç **okşadı mı** ya da sizden hiç onların bedenine **cinsel anlamda dokunmanızı istedi mi**? **Ya da** Sizinle **oral, anal** ya da **vajinal olarakcinsel ilişki yaşadı mı** ya da **teşebbüs etti mi**? Bir tane dahi varsa işaretleyin **Evet** ◯
4	Siz **sıklıkla ya da çok sıklıkla** aşağıdaki gibi hissettiniz mi? Ailenizde kimse sizi **sevmiyor** ya da sizin **önemli ya da özel olduğunuzu düşünmüyor**? **Ya da** Aileniz size **göz kulak olmadı**, ailenizle **yakın hissetmediniz** ya da birbirinizi **desteklemediniz**? Bir tane dahi varsa işaretleyin **Evet** ◯
5	Siz **sıklıkla ya da çok sıklıkla** aşağıdaki gibi hissettiniz mi? Yeterince yemek yoktu, kirli giysiler giymek zorundaydınız ve sizi koruyacak kimse yoktu? **Ya da** Aileniz size bakmak için ya da ihtiyacınız olduğunda doktora götürmek için çok sarhoştu ya da kendinde değildi? Bir tane dahi varsa işaretleyin **Evet** ◯
6	Ebeveynleriniz **hiç** ayrıldı mı ya da boşandı mı? Bir tane dahi varsa işaretleyin **Evet** ◯
7	Anneniz ya da üvey anneniz: **Sıklıkla ya da çok sıklıkla** sizi itip tartakladı mı, tokatladı mı ya da size bir şey fırlattı mı? **Ya da** **Bazen, sıklıkla ya da çok sıklıkla** tekmeledi mi, dövdü mü, yumrukla ya da daha sert bir şeyle size vurdu mu? **Ya da** **Hiç** en az birkaç dakika sürekli bir şekilde size vurdu mu ya da sizi silahla ya da bıçakla tehdit etti mi? Bir tane dahi varsa işaretleyin **Evet** ◯
8	İçki problemi olan, alkolik ya da uyuşturucu kullanan biriyle yaşadınız mı? Bir tane dahi varsa işaretleyin **Evet** ◯
9	Ev halkından biri depresyonda ya da zihinsel hasta mıydı ya da intihara teşebbüs etti mi? Bir tane dahi varsa işaretleyin **Evet** ◯
10	Ev halkından biri hapse girdi mi? Bir tane dahi varsa işaretleyin **Evet** ◯
11	Mevcut sağlık sorunlarınız var mı? Var ise bu sağlık sorunları nelerdir? ………………………………………………………………………………………………

Şimdi "Evet" cevaplarınızı toplayın: ☐ Bu sizin ACE Travma Puanınız.

EBEVEYNE BAĞLANMA ÖLÇEĞİ-I

Aşağıda, ana-babanızın çeşitli tutum ve davranışlarına ilişkin ifadeler yer almaktadır. 16 yaşınıza kadar olan dönemde **annenizi** hatırla çalışarak, her bir ifadede en uygun seçeneğin karşısındaki paranteze X işareti koyunuz.

	Tamamen böyleydi	Kısmen böyleydi	Pek böyle değildi	Hiç böyle değildi
1.Benimle yumuşak ve arkadaşça bir tarzda konuşurdu.	( )	( )	( )	( )
2.İhtiyaç duyduğum kadar yardım etmezdi.	( )	( )	( )	( )
3. Hoşlandığım şeyleri yapmama izin verirdi.	( )	( )	( )	( )
4.Duygusal olarak bana karşı soğuk görünürdü.	( )	( )	( )	( )
5. Sorunlarımı ve endişelerimi anlıyor görünürdü.	( )	( )	( )	( )
6. Bana karşı sevgi doluydu.	( )	( )	( )	( )
7. Kendi kararlarımı vermemden memnuniyet duyardı.	( )	( )	( )	( )
8. Büyümemi istemezdi.	( )	( )	( )	( )
9.Yaptığım her şeyi kontrol etmeye çalışırdı.	( )	( )	( )	( )
10. Mahremiyetime müdahale ederdi.	( )	( )	( )	( )
11.Olan-bitenler hakkında benimle konuşmaktan keyif alırdı.	( )	( )	( )	( )
12. Genellikle bana karşı güleryüzlüydü.	( )	( )	( )	( )
13.Bana, bebekmişim gibi davranma eğilimi vardı.	( )	( )	( )	( )
14. İhtiyaçlarımı ve isteklerimi anlamıyor gibiydi.	( )	( )	( )	( )
15. Kendimle ilgili kararları almama izin verirdi.	( )	( )	( )	( )
16. İstenmediğimi hissettirirdi.	( )	( )	( )	( )
17. Üzgün olduğum zamanlarda kendimi daha iyi hissetmemi sağlardı	( )	( )	( )	( )
18. Benimle pek fazla konuşmazdı.	( )	( )	( )	( )
19. O'na bağımlı olduğum duygusunu yaşatmaya çalışırdı.	( )	( )	( )	( )
20. Annem yanımda olmadığı zaman, kendime bakamayacağımı hissederdim.	( )	( )	( )	( )
21. İstediğim kadar özgürlük tanırdı.	( )	( )	( )	( )
22. İstediğim zaman dışarı çıkmama izin verirdi	( )	( )	( )	( )
23. Bana karşı aşırı koruyucuydu.	( )	( )	( )	( )
24. Beni övmezdi.	( )	( )	( )	( )
25.İstediğim gibi giyinmeme izin verirdi.	( )	( )	( )	( )

EBEVEYNE BAĞLANMA ÖLÇEĞİ-II

Aşağıda, ana-babanızın çeşitli tutum ve davranışlarına ilişkin ifadeler yer almaktadır. 16 yaşınıza kadar olan dönemde **babanızı** hatırla çalışarak, her bir ifadede en uygun seçeneğin karşısındaki paranteze X işareti koyunuz.

	Tamamen böyleydi	Kısmen böyleydi	Pek böyle değildi	Hiç böyle değildi
1.Benimle yumuşak ve arkadaşça bir tarzda konuşurdu.	( )	( )	( )	( )
2.İhtiyaç duyduğum kadar yardım etmezdi.	( )	( )	( )	( )
3. Hoşlandığım şeyleri yapmama izin verirdi.	( )	( )	( )	( )
4.Duygusal olarak bana karşı soğuk görünürdü.	( )	( )	( )	( )
5. Sorunlarımı ve endişelerimi anlıyor görünürdü.	( )	( )	( )	( )
6. Bana karşı sevgi doluydu.	( )	( )	( )	( )
7. Kendi kararlarımı vermemden memnuniyet duyardı.	( )	( )	( )	( )
8. Büyümemi istemezdi.	( )	( )	( )	( )
9.Yaptığım her şeyi kontrol etmeye çalışırdı.	( )	( )	( )	( )
10. Mahremiyetime müdahale ederdi.	( )	( )	( )	( )
11.Olan-bitenler hakkında benimle konuşmaktan keyif alırdı.	( )	( )	( )	( )
12. Genellikle bana karşı güler yüzlüydü.	( )	( )	( )	( )
13.Bana, bebekmişim gibi davranma eğilimi vardı.	( )	( )	( )	( )
14. İhtiyaçlarımı ve isteklerimi anlamıyor gibiydi.	( )	( )	( )	( )
15. Kendimle ilgili kararları almama izin verirdi.	( )	( )	( )	( )
16. İstenmediğimi hissettirirdi.	( )	( )	( )	( )
17. Üzgün olduğum zamanlarda kendimi daha iyi hissetmemi sağlardı	( )	( )	( )	( )
18. Benimle pek fazla konuşmazdı.	( )	( )	( )	( )
19. O'na bağımlı olduğum duygusunu yaşatmaya çalışırdı.	( )	( )	( )	( )
20. Babam yanımda olmadığı zaman, kendime bakamayacağımı hissederdim.	( )	( )	( )	( )
21. İstediğim kadar özgürlük tanırdı.	( )	( )	( )	( )
22. İstediğim zaman dışarı çıkmama izin verirdi	( )	( )	( )	( )
23. Bana karşı aşırı koruyucuydu.	( )	( )	( )	( )
24. Beni övmezdi.	( )	( )	( )	( )
25.İstediğim gibi giyinmeme izin verirdi.	( )	( )	( )	( )

EBEVEYN TUTUM ÖLÇEĞİ	1	2	3	4	5
1. Ben bir başkasıyla konuşurken çocuğumun araya girmesine izin veririm.					
2. Çocuğmun kendine özgü bir bakış açısı olduğunu kabul ederim.					
3. Çocuğumla aynı fikirde olmadığımız zaman, benim fikirlerimi kabul etmesi için onu zorlarım.					
4. Çocuğumu, hayatın ufak tefek güçlüklerinden korurum.					
5. Çocuğuma bağımsız olmayı öğrenmesi konusunda yardımcı olurum.					
6. Çocuğuma, kurallara neden uyması gerektiğini açıklarım.					
7. Çocuğuma yaptığı şeyin önemli olduğunu hissettiririm.					
8. Çocuğumu, kendisi için yorucu olabilecek işlerden korurum.					
9. Çocuğum söz dinlemediğinde ona vururum.					
10. Çocuğumu başka çocuklarla kıyaslarım.					
11. Çocuğumu yola getirmek için onu azarlarım.					
12. Çocuğuma karşı koruyucu davranırım.					
13. Çocuğum iyi davrandığında onu överim.					
14. Çocuğumun kişisel görüşlerine saygı gösteririm.					
15. Çocuğumu bir şeyleri kendi başına yapması konusunda cesaretlendiririm.					
16. Arkadaşları çocuğuma sataştığı zaman onu korurum.					
17. Çocuğumun başkaları konuşurken araya girmesine izin veririm.					
18. Çocuğumun cinsel konularda sorduğu soruları anlayacağı bir dilde doğru olarak cevaplarım.					
19. Çocuğum yanlış bir şekilde davrandığında ona bağırırım.					
20. Ebeveynlik konusunda bir yanlışlık yaptığımda çocuğumdan özür dilerim.					
21. Çocuğumu, kendisi için zor olabilecek işlerden korurum.					
22. Çocuğumun hastalanmasından endişe ederim.					
23. Çocuğumun duygularını serbestçe ifade etmesine izin veririm.					
24. Çocuğumun istediği saatte uyumasına izin veririm.					
25. Çocuğum yanlış davrandığında, bunun neden yanlış olduğunu ona açıklarım.					
26. Çocuğuma kızdığımda çocuğumu cezalandırırım.					
27. Fiziksel cezayı, çocuğumu disipline sokmanın bir yolu olarak kullanırım.					
28. Çocuğumun hayal kırıklığına uğramaması için elimden geleni yaparım.					

	1	2	3	4	5
29. Çocuğumun büyüdükçe yeni şeyler denemeyi göze alması gerektiğine inanırım.					
30. Çocuğumun her şeyi yapmasına izin veririm.					
31. Çocuğumun iyi ve kötü davranışı karşısında neler hissettiğimi ona açıklarım.					
32. Çocuğumun yanlış davranışını görmezden gelirim.					
33. Çocuğumun şımarıklıklarına göz yumarım.					
34. Çocuğumu şımartırım.					
35. Çocuğuma karşı çabuk öfkelenirim.					
36. Çocuğum bana bir şey anlatırken sözünü kesmeden dinlerim.					
	1	2	3	4	5
37. Çocuğuma bir şey alırken onun da fikrini alırım.					
38. Çocuğumla her konuyu konuşabilirim.					
39. Çocuğuma karşı sabırsızım.					
40. En ufak bir hatasında, çocuğumu cezalandırırım.					
41. Çocuğum için hemen hemen bütün eğlencelerimden fedakarlık ederim.					
42. Çocuğumun kendi başına becerebileceği şeyleri denemesi için ona fırsat tanırım.					
43. Çocuğuma bana sormaksızın şahsi eşyalarımdan herhangi birini alıp kullanmasına izin veririm.					
44. Evimizde hangi televizyon programının izleneceği, çocuğumun isteğine göre belirlenir.					
45. Çocuğumu yapabileceğinden fazlasını yapması için zorlarım.					
46. Çocuğumu, onun cesaretini kırabilecek zor işlerden uzak tutarım.					