



The effect of parents' childhood traumas on violence tendencies

Ebeveynlerin çocukluk çağı travmalarının şiddet eğilimlerine etkisi

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ABSTRACT

Aim: The study was planned to determine the relationship between childhood traumas and violence tendencies of parents.

Methods: The data of the cross-sectional and descriptive study were collected online between January 10 and March 5, 2023. The study sample included 265 parents who were reached by snowball method. Data were collected through the Childhood Trauma Scale-Short Form, identifying information and violence tendency determination forms and analyzed with IBM SPSS 23 program.

Results: The rate of childhood traumas among the parents was 91.3%. The rates of emotional neglect and physical abuse were significantly higher among the participants who found it appropriate to use beating as a disciplinary tool. The rate of accepting physical violence as a means of discipline was significantly higher in parents who were exposed to emotional neglect and physical abuse. The anger reporting rates of parents who reported emotional abuse, emotional neglect, physical and sexual abuse were significantly higher. Those who reported having been exposed to emotional neglect and physical abuse during childhood reported that their spouse used violence against the child at a higher rate than those who reported this less frequently.

Conclusion: Childhood traumas are associated with violent tendencies. Childhood traumas negatively affect the mental health of the individual and his/her social environment in the long term.

Keywords: adverse childhood experiences; child abuse; parents; violence

ÖZET

Amaç: Araştırma ebeveynlerin çocukluk çağı travmalarının şiddet eğilimleri ile ilişkisinin belirlenmesi amacıyla planlanmıştır.

Yöntem: Kesitsel ve tanımlayıcı türdeki araştırmanın verileri, 10 Ocak- 5 Mart 2023 tarihleri arasında çevrimiçi ortamda toplanmıştır. Araştırmanın örneklemine kartopu yöntemi ile ulaşılan 265 ebeveyn dahil edilmiştir. Veriler Çocukluk Çağı Travmaları Ölçeği-Kısa Formu, tanıtıcı bilgiler ve şiddet eğilimi belirleme formları aracılığı ile toplanmış ve IBM SPSS 23 programı ile analiz edilmiştir.

Bulgular: Ebeveynlerin çocukluk çağı travmaları oranı %91.3 olarak saptanmıştır. Dayanın disiplin aracı olarak kullanılmasını uygun bulan katılımcıların duygusal ihmal ve fiziksel istismar bildirim oranları anlamlı düzeyde yüksektir. Duygusal ihmal ve fiziksel istismara maruz kalan ebeveynlerin fiziksel şiddetli disiplin aracı olarak kabul etme oranı anlamlı düzeyde yüksektir. Duygusal istismar, duygusal ihmal, fiziksel ve cinsel istismar bildirim oranları yüksek olan ebeveynlerin öfke bildirim oranları anlamlı düzeyde yüksektir. Çocukluk döneminde duygusal ihmal ve fiziksel istismara maruz kaldıklarını bildiren bireyler bu bildirim daha az ifade etmiş olanlara oranla daha fazla oranda eşinin çocuğa şiddet uyguladığını bildirmişlerdir.

Sonuçlar: Çocukluk çağı travmaları şiddet eğilimi ile ilişkilidir. Çocukluk çağı travmaları, uzun dönemde bireyin ve sosyal çevresinin ruhsal sağlığını olumsuz etkilemektedir.

Anahtar kelimeler: olumsuz çocukluk deneyimleri; çocuk istismarı; ebeveynler; şiddet

Introduction

Childhood trauma (CT) is defined as emotional, physical and/or sexual abuse or neglect of an individual before the age of eighteen (Şar, 2012). Child abuse or neglect is defined as actions or inactions directed at the child by an adult such as a parent or caregiver, which are considered inappropriate or harmful by social rules and professionals, which prevent or restrict the child's development, and as a result of which the child is physically, mentally, sexually or socially harmed and his/her health and safety is jeopardized (Carr et al., 2013; Çiçek, 2020). Research shows that regardless of the type of CT, it makes individuals vulnerable to re-victimization (Oruçular, 2016).

CT affects children's development in emotional, physical, cognitive, behavioral and social areas (Carr et al., 2013). At the same time, since children's cognitive and emotional development continues, they have difficulty in making sense

of trauma, and their development is hindered due to traumatic events they experience in this childhood period when they are vulnerable and need protection. For this reason, childhood traumas cause long-term effects that extend into adulthood and even psychiatric disorders (Dye, 2020). WHO reports that 18 million children are exposed to sexual abuse, 44 million to physical abuse and 55 million to emotional abuse every year (WHO, 2020).

In Turkey, it is reported that emotional abuse (78%) is the most common type of CT, followed by physical abuse and sexual abuse (Turhan et al., 2006). Physical violence is one of the most frequently encountered types of IPV (Genç & Ayhan, 2021). Violence is increasing with the changing social structure and 30,000 individuals die every year in the European Region due to interpersonal violence (WHO, 2020). In the literature, the emergence of violent behavior is tried to be explained by different models such as biological,

psychosocial developmental factors and social learning theory (Geçtan, 2010). Social learning theory is among the most frequently used theories to explain the causes of domestic violence. According to Albert Bandura's social learning theory, violence is a phenomenon arising from the influence of role models observed during childhood or directly learned. According to this theory, violence is a learned behavior. Especially in childhood, situations such as being exposed to violence and/or witnessing violence lead to the normalization of violence (Bandura, 1973). Research on the subject reveals that witnessing violence or being exposed to violence increases the acceptance of violence and violent behavior (Ayhan & Özkan, 2016; Forke et al., 2018). It is stated that the experience of physical abuse in childhood may cause the development of violence and psychopathology, especially in men (Karabulut et al., 2020). It is known that individuals who witnessed or were exposed to violence in their childhood have a higher risk of inflicting violence on their children when they themselves become parents (Crandell et al., 2012). A model for the dysfunctional use of violence as a conflict resolution for adults who experienced abuse and/or neglect in childhood has also been developed (Bandura, 1977, 1986). Since a complete recovery will not be possible without erasing the traces of past traumas, access to psychological counseling and therapy services for individuals who have been exposed to trauma is essential for creating a healthy society and breaking the cycle of violence that has the risk of being transferred to future generations (Tortamış Özkaya, 2020). In the literature, studies investigating the effect of parents' childhood traumas on violent tendencies are limited. For this reason, the aim of this study was to evaluate the relationship between parents' childhood traumas and violent tendencies.

Methods

Study design and setting

The study is cross-sectional and descriptive. The study was conducted online between January 10 and March 5, 2023.

Sampling procedure

The population of the study consisted of parents aged 18 and over in Turkey. The inclusion criteria were volunteering to participate, having at least one child, and using any of the social media accounts (e.g. LinkedIn, Facebook, Twitter, Instagram, WhatsApp). The sample size of the study was determined by G Power analysis (0.90 power; 0.20 effect size) and it was determined that at least 255 participants should be included. Snowball sampling method, one of the purposive sampling methods, was used to determine the parents. For this purpose, in the first stage of the study, parents who met the inclusion criteria and could be reached online via social media were included in the study. At the end of the questionnaire form, parents were asked to share the questionnaire form with other parents they knew who met the inclusion criteria. Data collection tools were presented to the participants via Google Forms and they were asked to approve the voluntary consent form, which included a brief information about the research, at the beginning of the survey. Each question in the questionnaire had to be completed, and parents were given the chance to go back and change their answers. The study was conducted with 265 participating parents who voluntarily agreed to participate.

Measures

Data were collected through the Childhood Trauma Questionnaire-Short Form, identifying information and violence tendency determination forms.

Identifying information form

It consists of questions aimed at determining some sociodemographic characteristics of the parents such as age, gender, and educational status.

Violence Tendency Determination Forms

In the form prepared by the researchers by reviewing the literature, there are questions such as "Recognizing violence as a reason for divorce", "Appropriate to use beating as a discipline", "Sudden anger towards spouse and child" regarding the evaluation of parents' tendencies towards violence (Ayhan & Özkan, 2016; Crandell et al., 2012; Forke et al., 2018).

The Childhood Trauma Questionnaire-Short Form (CTQ-SF)

The Turkish adaptation, validity and reliability study of the scale developed by Bernstein et al. was conducted by Şar et al. (2012). The scale, which consists of twenty-eight items, covers five sub-dimensions related to childhood abuse including sexual, physical, emotional abuse and emotional and physical neglect, and a total score consisting of five sub-scores related to physical, emotional abuse and emotional and physical neglect and their combination is obtained. Cronbach's alpha value indicating the internal consistency of the scale was found to be 0.93 for the group consisting of all participants (N=123) in the Turkish adaptation and validity and reliability study, while the Guttman half test coefficient was 0.97.

Data collection procedure

Parents who agreed to participate in the study completed the questionnaire online. The data obtained in the study were stored by the researchers in a computerized environment and were not shared with third parties other than the researchers.

Data analysis

The data obtained as a result of the study were analyzed using IBM SPSS 23 (Statistic Package For Social Science) program. Descriptive statistics (number, percentage distribution, mean and standard deviation) were used. The suitability of the data for normal distribution was examined by Kolmogorov-Smirnov and Shapiro-Wilk tests. Since the data in the study were not normally distributed, nonparametric tests were used. For this purpose, Mann-Whitney U test and Kruskal-Wallis analyses were performed to determine whether the mean scores of the ESRT-SF showed significant differences with the sociodemographic and participants' responses to violence tendencies. Statistical significance level was accepted as $p < 0.05$ to determine the relationship between variables.

Ethical statement

Ethics committee approval was obtained from Batman University Ethics Committee for the study (Number: 2023/01-18, date: 04.01.2023). Voluntary consent of the parents was obtained online. For this purpose, written information about the purpose and subject of the study was presented on the first page of the survey link sent to the participants online. If the participants agreed to participate in the study, they were asked to check the phrase "I voluntarily agree to participate in the study".

Results

A total of 265 parents were included in the study. Descriptive characteristics of the parents are presented in Table 1. 71.7% of the parents were female, 96.2% were married and the mean age was 37.06 ±9.2 years. 47.2% of the parents were university graduates and 27.5% were primary school graduates. When the education levels of the spouses of the participants were analyzed, it was found that 44.2% were university graduates and 31.6% were primary school graduates. When the marriage styles of the parents were evaluated, it was determined that 66.8% of the parents got married through acquaintance and 33.2% through arranged marriages. It was reported that 4.5% of the participants were married for the second time and 3.4% were married for the second time to their spouses. 10.6% of the parents were subjected to violence by their spouses, but 6.4% did not consider violence as a reason for divorce. While 12.5% of the parents stated that their spouses inflicted violence on their children, 26.4% stated that their spouses beat their children. While 15.1% of the parents stated that beating is used as a disciplinary method, 25.3% stated that they get angry with their spouses and children suddenly.

Table 1. Distribution of participants' descriptive characteristics

Descriptive Characteristics	n	%
Average age (Mean±SD)	37.06 ±9.2, Min=19; Max=67	
Sex		
Female	90	71.7
Male	75	28.3
Marital status		
Married	255	96.2
Single	10	3.8
Education status		
Elementary school	73	27.5
High school	67	25.3
University	125	47.2
Spouse's education status		
Elementary school	84	31.6
High school	64	24.2
University	117	44.2
Form of marriage		
Arranged marriage	88	33.2
By own acquaintance/agreement	177	66.8
Number of marriages		
One time	253	95.5
Second time	12	4.5
Number of marriages of the spouse		
One time	256	96.6
Second time	9	3.4
Spousal violence		
Yes	28	10.6
No	237	89.4
Recognizing violence as a reason for divorce		
Yes	229	86.4
No	17	6.4
Spousal violence against the child		
Yes	33	12.5
No	232	87.5
Finding beating appropriate as a discipline		
Yes	40	15.1
No	225	84.9
Sudden anger towards spouse and child		
Yes	67	25.3
No	198	74.7
Beating your child		
Yes	70	26.4
No	195	73.6

The total score of the childhood traumas scale and the median values of the scores of the sub-dimensions of the scale are given in Table 2. When the cut-off score of the childhood traumas scale was accepted as 35, it was determined that the participants had a minimum score of 33, a maximum score of 109 and a median value of 44±12.69 points.

When the sub-dimensions of the CTQ-SF were evaluated, the median value of the Emotional Abuse sub-dimension was 7±3.8, Emotional Neglect was 11±4.8, Physical Abuse was 5±3.3 and the median value of the Physical Neglect sub-dimension was 15±2.4.

Table 2. Distribution of CTQ-SF and subscale median scores

Scale and its subdimensions	Median ±SD	Min	Max
Emotional abuse	7±3.8	5	25
Emotional neglect	11±4.8	5	25
Physical abuse	5±3.3	5	23
Physical neglect	15±2.4	6	24
Sexual abuse	5±1.79	5	19
CTQ total score	44± 12.69	33	109

The distribution of the total score of the childhood traumas scale and the sub-dimension scores of the scale according to the cut-off scores of the parents is given in Table 3. When the cut-off score of the childhood traumas scale was accepted as 35, it was determined that 91.3% of the parents scored 36 and above. When evaluated in terms of sub-dimensions, it was seen that 40.4% of the parents who participated in the study were exposed to emotional abuse and 37.7% were exposed to emotional neglect. It was determined that 99.6% of the parents were affected by physical neglect and 35.5% by physical abuse. It was determined that 12.8% of the parents were exposed to sexual abuse. Statistical analyses of the CTQ and its sub-dimensions and the descriptive characteristics of the parents are given in Table 4. According to Table 4, as the educational level of the parents decreases, reports of physical abuse increase. Among the parents, those who reported that their spouses used violence against their children reported more emotional neglect and physical abuse. Among the parents, those who said yes to the use of beating as discipline reported more emotional neglect and physical abuse. Among the parents, those who reported sudden anger towards their spouse and child reported significantly more emotional abuse and neglect, physical and sexual abuse than those who did not. Parents who used physical violence against their children reported more emotional, physical and sexual abuse than those who did not.

When the level of education of the parents and the scores of the CTQ and its sub-dimensions were compared in pairs, the physical abuse scores of the parents with primary education were significantly higher than those of the parents with university education (p=0.046; U=3908). No significant difference was found between high school and university education in the other sub-dimensions. When spousal education level was compared in paired comparisons of the CTQ and sub-dimension scores, physical abuse and emotional neglect scores were significantly higher in those with primary education compared to those with university education (physical abuse: p=0.041; U=4212; Z=-2.040;

emotional neglect: $U=4195$; $p=0.038$, $Z=-2.079$). No significant difference was found between secondary education and university education level.

Table 3. Distribution of scale and subscale scores according to cutoff points

Scale and its sub-dimensions	n	%
CTQ total score		
35≤	23	8.7
36 and above	242	91.3
Emotional abuse		
7 ≤	158	59.6
8 and above	107	40.4
Emotional neglect		
12 ≤	165	62.5
13 and above	100	37.7
Physical abuse		
5 ≤	171	64.5
6 and above	94	35.5
Physical neglect		
7 ≤	1	0.4
8 and above	264	99.6
Sexual abuse		
5 ≤	231	87.2
6 and above	34	12.8

Discussion

The study results are important in terms of being the first one in the literature. For this reason, the most recent literature and study results were discussed.

It was determined that the attitudes of the menopausal women participating in the study towards cancer were negative. Some studies stated that having a cancer history in the family was a predictive variable in diagnosis, treatment, and prognosis. Ersin and Bahar (2012) stated in his study that a woman who had high sensitivity towards breast cancer and saw herself under threat tended to have self-breast examination, mammography, and clinical breast examination compared to another woman of the same age. In the study by Açıkgöz et al. (2011) it was stated that women who had cancer in their family or themselves had higher rates of having pop-smear and mammography. The word cancer is matched with the concepts like suffering, death, and fear by individuals diagnosed with cancer. All of these matches could increase negative attitudes towards cancer by society. In addition, when the descriptive characteristics of menopausal women participating in the study were examined, most had no cancer history in their families. All of these reasons are believed to increase negative attitudes towards cancer.

It was determined that the participants had high mean scores from negative automatic thoughts towards cancer. Having cancer, receiving cancer treatment and the sequelae left by cancer are seen as negative experiences. All of these are major stressors for many people, and cancer is a traumatic situation for some people. The nature of cancer may lead to the development of such negative automatic thoughts towards cancer (Öcel, 2017). According to Hallaç and Öz, (2011) a person who learns that he/she has been diagnosed with cancer may think that everything is over and his/her life is about to end. Such automatic thoughts may prevent the individual from assessing events realistically, may cause him/her to stigmatize individuals diagnosed with cancer or lead to bad results in diagnosis, treatment and especially in prognosis if he/she shows a prognosis of cancer (Hallaç &

Öz, 2011). The fact that the menopausal women participating in the study had high negative automatic thoughts towards cancer may be due to these reasons.

The study determined that menopausal women's negative automatic thoughts explained cancer stigma by 35.3%. The study results are important in terms of being the first one in the literature. Having cancer, receiving cancer treatment, and the sequelae left by cancer were seen as negative experiences. For many, these are all major stressors, and cancer is also a traumatic situation for some people. The nature of cancer may lead to the development of such negative automatic thoughts towards cancer (Öcel, 2017).

Limitations of the study

The results can only be generalized to the sample group since the study was conducted in a limited number of centres. The improbable sampling method was chosen for the sample group.

Conclusion

This study, which evaluated the relationship between parents' childhood traumas and violent tendencies, revealed that childhood traumas had a significant relationship with violent tendencies. In this study, it was determined that 91.3% of the parents in this study had been exposed to CTQ in general, 40.4% to emotional abuse, 37.7% to emotional neglect, 99.6% to physical neglect, 35.5% to physical abuse, and 12.8% to sexual abuse. Supporting our research findings, in a study using similar cut-off scores, it was found that 99.67% of the parents were exposed to sexual abuse, 99.23% to physical abuse, 37.83% to physical neglect, 25.55% to emotional abuse, 22.90% to emotional neglect and 32.19% to multiple abuse (Özgen & Yöyen, 2017). In UNICEF's "Child Abuse and Domestic Violence" study (2010), which is one of the most comprehensive studies on the subject, it was found that 56% of children between the ages of 7-18 living in Turkey were victims of physical abuse, 49% of emotional abuse and 10% of sexual abuse (UNICEF, 2010). In Yöyen's (2017) study involving university students, it was reported that 31.1% had childhood trauma, 26.4% emotional abuse, 12.5% physical abuse, 30.4% physical neglect, 15.7% emotional neglect and 18.1% sexual abuse. In an international study involving women between the ages of 18-44, 48.1% of women reported being victims of emotional abuse, 53.2% physical abuse, 36.4% sexual abuse, 49.4% emotional neglect and 50.6% physical neglect (Schmidt et al., 2020). Although there are differences in the rates of CTQ in national and international studies, the high rates are alarming. It is thought that the differences related to the rates of CTQ are due to reasons such as sample group, cultural and social structure differences, and differences in the scales used in the research.

In our study, the rates of emotional neglect and physical abuse reported by participants who found it appropriate to use beating as a disciplinary tool were higher than those who did not find it appropriate to use beating as a disciplinary tool. Another important finding of the study is that the rate of emotional, physical and sexual abuse reporting rates of parents who stated that they beat their children were higher than those who did not beat their children. The aforementioned findings of the study show that CTQ increases the risk of acceptance and perpetration of violence.

Table 4. Statistical analysis of CTQ-SF and its subscales and descriptive characteristics

Descriptive Characteristics	Emotional abuse	Emotional neglect	Physical abuse	Physical neglect	Sexual abuse	CTQ total score
Sex	U*= 8150; p=0.52	U=8157 p=0.84	U=7852 p=0.69	U=95.50 p=0.71	U=7378 p=0.37	U=2585 p=0.47
Education status	χ^2 **=1.03 p=0.59	χ^2 =2.45 p=0.29	χ^2 =8.10 p=0.017	χ^2 =2.95 p=0.22	χ^2 =1.91 p=0.38	χ^2 =0.57 p=0.75
Marriage style	U=7593; p=0.69	U=7153; p=0.19	U=7021 p=0.11	U=7744 p=0.48	U=7429 p=0.29	U=7438 p=0.22
Spouse's violence against the child	U=3473 p=0.31	U=3093 p=0.03	U=3126 p=0.04	U=3811 p=0.70	U=3461 p=0.12	U=3581 p=0.21
The use of beatings as discipline	U=4255 p=0.51	U=3585 p=0.01	U=3730 p=0.03	U=4480 p=0.67	U=4252 p=0.33	U=4172 p=0.13
Sudden anger towards spouse and child	U=4917 p=0.000	U=5213 p=0.002	U=4747 p=0.000	U=6534 p=0.08	U=5519 p=0.000	U=6127 p=0.05
Beating your child	U=5800 p=0.028	U=6217 p=0.18	U=5875 p=0.037	U=6727 p=0.09	U=5895 p=0.004	U=6417 p=0.12

U*: Mann-Whitney U Test; χ^2 **: Kruskal Wallis Test

This finding is consistent with the information that individuals who witness violence or are exposed to violence accept violence more and have a high rate of violence themselves (Ayhan & Özkan, 2016, Crandell et al., 2012; Forke et al., 2018, Karabulut et al., 2020; Ma et al., 2022; Schwarzer et al., 2021). These results may be due to the fact that violence can be learned and transmitted from generation to generation and traumas related to violence cause the development of various psychopathologies related to violent tendencies in individuals. As a matter of fact, among the various factors affecting aggression, it is accepted that CAC is one of the most important factors (Li et al., 2022). Aggressive behavior is one of the outward symptoms of individuals exposed to childhood adversity (Fava et al., 2019).

Among the participants in our study, it was determined that the rate of expressing emotional abuse and neglect, physical and sexual abuse was higher among those who expressed sudden anger towards their spouses and children. In support of our research findings, it has been reported that individuals exposed to abuse are more introverted or aggressive (Bostancı, 2006), students exposed to physical, emotional, sexual abuse and neglect have higher trait anger scores (Eroğul et al., 2013), as exposure to abusive behaviors increases, students' trait anger levels increase and they reflect their anger inappropriately more (Altınbaş et al., 2016). It is known that emotional neglect and emotional abuse during childhood increase anger expression. Some studies have revealed that individuals exposed to trauma feel anger towards themselves and others, and as a result, they experience deterioration in social relationships, loss of appetite, depression, anxiety, post-traumatic stress disorders and impaired self-perception (Bal et al., 2018; Kong & Benstein, 2009). This study and the aforementioned studies clearly reveal the negative impact of the CTQ on anger.

Among the parents who participated in the study, those who reported that their spouses inflicted violence on their children had higher rates of emotional neglect and physical abuse than those who reported that their spouses did not

inflict violence on their children. In a study examining the effects of CTQ on parental attitudes, it was reported that emotional neglect and physical abuse had a significant effect on the formation of authoritarian attitudes in parents (Özgen & Yöyen, 2017). In this study, the inability of parents who were exposed to emotional neglect and physical abuse in their own childhood to prevent violence against their own children may have emerged due to many factors such as seeing violence as a means of discipline or not feeling strong enough to stand against violence. In future studies on the subject, it would be useful to investigate in detail the reasons for parents' inability to prevent violence against their children.

In our study, the physical abuse reporting rates of parents with primary education were higher than those of parents with university education. Similarly, in a study conducted among individuals over the age of 18, it was determined that the higher the level of education, the lower the exposure to CTQ (Peker & Tinaz, 2017). In Aydın and İşmen's (2003) study, it was found that men who graduated from primary/middle school had a higher rate of physical, emotional, sexual abuse and total abuse compared to higher education groups. The relationship between the educational status of the child exposed to CTQ may be a result of the fact that the families of the child exposed to CTQ are not aware of the importance of education and therefore do not provide adequate support for education, or that the education process of the individual exposed to abuse is interrupted and the individual cannot find the strength to move forward. In future studies on the subject, it can be investigated in more detail how CTQ constitutes an obstacle to the advancement of the level of education.

There was no difference between the gender of the parents in our study and the total and sub-dimensions of the CTQ. It is reported that the rate of child abuse in the world is 52% for girls and 48% for boys (Tirali et al., 2014). In our country, studies involving university students revealed that the total, physical neglect and sexual abuse (Yoyan, 2017), emotional, physical, sexual abuse and neglect scores (Zeren et al., 2012) were higher in male students than in female

students. Similarly, in a study conducted on adolescents, it was reported that male students were exposed to sexual abuse at a higher rate than female students (Eroğul & Türk, 2013; Kalkan & Özbek, 2011). It is seen that there are differences in research findings on the relationship between CTQ and gender. These differences are thought to be due to the selection of samples from different socioeconomic and cultural backgrounds and the difficulties in reporting neglect and abuse.

Conclusion and Recommendations

The high rate of 91.3% of the CTQ is quite alarming. It is seen that exposure to emotional neglect and physical abuse is an important factor in the acceptance of physical violence. Emotional abuse and neglect, physical and sexual abuse are important factors in expressing anger. Emotional neglect and physical abuse may increase the use of violence against children. Declining education level may increase exposure to physical abuse. Considering the results of the study, it can be said that CTQ increases parents' use of violence and acceptance of violence. In future studies on the subject, it is recommended to determine the effects of CTQ on the status between genders and education level, and to evaluate the reasons for not being able to prevent violence against children in more detail. It would be useful for policies to be made to reduce violence in society to examine and take into account these wide-ranging effects of CTQ on violence in more detail.

Conflict of Interest

The author(s) declared no potential conflicts of interest with respect to the research, authorship, and/or publication of this article

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Ethics Committee Approval

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Informed Consent

Voluntary consent of the parents was obtained online. For this purpose, written information about the purpose and subject of the study was presented on the first page of the survey link sent to the participants online. If the participants agreed to participate in the study, they were asked to check the phrase "I voluntarily agree to participate in the study."

Peer-review

Externally peer-reviewed.

Author Contributions

C.T.: Concept, Data Collection and/or Processing, Literature Search, Design, Writing Manuscript.

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