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Structural Equation Modeling of Marital Burnout Based on Childhood Emotional Neglect, Attachment Anxiety, Emotion Dysregulation, and the Moderating Role of Partner Support

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A B S T R A C T

Objective: This study aimed to test a structural equation model of marital burnout based on childhood emotional neglect, attachment anxiety, and emotion dysregulation and to examine the moderating role of perceived partner support in the associations of attachment anxiety and emotion dysregulation with marital burnout.

Methods and Materials: This cross-sectional correlational study was conducted among 412 married adults residing in Canada in 2026. Participants were recruited through community organizations, family and relationship support centers, social media advertisements, university community boards, and online research participation platforms. Data were collected using the Couple Burnout Measure, the Emotional Neglect subscale of the Childhood Trauma Questionnaire–Short Form, the attachment anxiety subscale of the Experiences in Close Relationships–Revised questionnaire, the Difficulties in Emotion Regulation Scale, and partner-focused items from the Multidimensional Scale of Perceived Social Support. Data were analyzed using Pearson correlations and structural equation modeling with maximum-likelihood estimation. Moderation was examined using interaction terms and simple-slope analysis.

Findings: The structural model showed satisfactory fit, $\chi^2/df = 2.22$, CFI = .956, TLI = .947, IFI = .957, GFI = .921, RMSEA = .054, and SRMR = .046. Childhood emotional neglect significantly predicted attachment anxiety ($\beta = .46$, $p < .001$), emotion dysregulation ($\beta = .43$, $p < .001$), and marital burnout ($\beta = .13$, $p = .001$). Attachment anxiety ($\beta = .30$, $p < .001$) and emotion dysregulation ($\beta = .27$, $p < .001$) positively predicted marital burnout, whereas partner support negatively predicted marital burnout ($\beta = -.28$, $p < .001$). Partner support significantly moderated the effects of attachment anxiety ($\beta = -.12$, $p = .003$) and emotion dysregulation ($\beta = -.10$, $p = .005$) on marital burnout. The model explained 57.8% of the variance in marital burnout.

Conclusion: Marital burnout appears to reflect the combined influence of developmental adversity, attachment insecurity, emotion-regulation difficulties, and current relational resources, while perceived partner support may buffer the adverse associations of attachment anxiety and emotion dysregulation with marital burnout.

Keywords: *Marital Burnout; Childhood Emotional Neglect; Attachment Anxiety; Emotion Dysregulation; Partner Support; Structural Equation Modeling*

1. Introduction

Marriage is one of the most significant interpersonal contexts of adulthood and can function simultaneously as a source of emotional security, companionship, identity, mutual regulation, and psychological well-being and as a context in which unresolved vulnerabilities, chronic interpersonal stress, and emotional demands become especially salient. Although temporary dissatisfaction and conflict are common in intimate relationships, persistent emotional strain can gradually develop into marital burnout, a state characterized by emotional, psychological, and sometimes physical exhaustion in relation to the marital relationship. Marital burnout is qualitatively different from transient disagreement because it reflects the cumulative depletion of emotional resources and an erosion of positive expectations regarding the relationship. Individuals experiencing sustained relational exhaustion may progressively disengage from their partners, perceive routine marital demands as burdensome, and experience diminished intimacy, empathy, and responsiveness. Contemporary research on burnout in family and caregiving contexts has similarly emphasized that burnout develops when chronic interpersonal demands persist while psychological and relational resources are insufficient to offset them (Paula et al., 2022). Reviews of family-related burnout have shown that emotional exhaustion, distancing, loss of efficacy, and persistent overload can arise when demands become chronically disproportionate to available coping resources (Ren et al., 2024). Research on caregiving burden further indicates that the experience of burnout is closely connected with sustained emotional demands and the perception that one's personal and interpersonal resources have been progressively depleted (Çakmak & Arıkan, 2024). Although much of this literature has focused specifically on parental burnout, its theoretical emphasis on chronic demands, resource depletion, and emotional disengagement provides an important conceptual basis for understanding burnout within marriage.

Burnout occurring in close relationships should not be regarded solely as a response to current marital circumstances. The manner in which individuals interpret intimacy, respond to perceived rejection, regulate emotional arousal, and utilize support from a partner is shaped partly by earlier developmental experiences. Adverse childhood experiences can establish enduring patterns of emotional processing and interpersonal expectation that become particularly salient in emotionally significant adult relationships. Trauma theory suggests that repeated childhood adversity can alter affective, cognitive, and interpersonal functioning long after the original experiences have ended (Paivio & Pascual-Leone, 2023). Recent evidence also demonstrates broad associations between adverse childhood experiences and compromised adult mental health, indicating that childhood adversity may continue to influence vulnerability to stress across occupational and interpersonal settings (Wang et al., 2025). Childhood maltreatment is likewise associated with substantial psychological consequences in young adulthood, including symptoms of post-traumatic stress and difficulties in emotional and interpersonal adaptation (ElBarazi, 2025). Complex trauma histories have additionally been associated with impaired psychological functioning during major adult developmental transitions, suggesting that early adversity may remain active as a vulnerability factor even in circumstances that would otherwise be expected to provide relational security (Lapointe et al., 2025). Trauma-related experiences may also affect later bodily, emotional, and relational responses during intimate and caregiving experiences, demonstrating the persistence of early psychological learning across multiple domains of adult functioning (Purkiewicz et al., 2026).

Among various forms of childhood adversity, emotional neglect may be especially important for understanding marital functioning because it concerns what was absent from the childhood relational environment rather than only what was actively inflicted. Childhood emotional neglect involves persistent failure by caregivers to recognize, validate, or respond adequately to a child's emotional needs. A child whose emotional experiences are repeatedly ignored may learn that emotions are unimportant, burdensome, unsafe to express, or unlikely to evoke helpful interpersonal responses. Such learning can interfere with the development of emotional awareness, self-soothing, interpersonal trust, and adaptive help-seeking. Unlike more visible forms of maltreatment, emotional neglect can remain psychologically influential despite being difficult for adults to identify explicitly as trauma. Evidence linking adverse childhood experiences to maladaptive adult personality characteristics suggests that early relational adversity may become embedded in relatively enduring emotional and interpersonal patterns (Migalova et al., 2025). Childhood maltreatment has also been associated with later family dysfunction and insecure attachment, highlighting the relational pathways through which childhood adversity may

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influence adult close relationships (Paone et al., 2024). In marital contexts, childhood maltreatment has been directly linked with lower relationship quality, with evidence suggesting that its effects are transmitted through interpersonal and psychological mechanisms rather than being restricted to direct associations alone (Sokar, 2024).

The importance of childhood emotional neglect for marriage becomes even clearer when considered through attachment theory. Early interactions with caregivers contribute to internal working models concerning the availability of others, one's own worthiness of care, and the expected consequences of seeking proximity during distress. Parenting experiences have been associated with adult attachment patterns, supporting the developmental continuity between earlier caregiving experiences and later relational expectations (Chen, 2023). Although attachment representations remain open to revision through later experiences, adults exposed to inadequate or inconsistent emotional care may be more likely to develop insecure relational expectations. Childhood maltreatment has been linked to adult attachment insecurity across diverse samples, and attachment appears to provide an important mechanism connecting early adversity to later psychological outcomes (Szeifert et al., 2025). A systematic review and meta-analysis of partner effects further demonstrated that childhood maltreatment can influence not only the individual who experienced it but also the functioning and well-being of that person's intimate partner, illustrating the dyadic implications of unresolved developmental adversity (Vaillancourt-Morel et al., 2023). Such findings suggest that childhood emotional neglect may have consequences extending beyond individual distress and may influence the interpersonal processes through which marriages are sustained or depleted.

Attachment anxiety is particularly relevant in this regard. Individuals high in attachment anxiety tend to experience heightened concern about abandonment, rejection, emotional unavailability, and the stability of close relationships. They may seek reassurance intensely while simultaneously remaining uncertain about whether reassurance can be trusted. This hyperactivation of the attachment system may increase vigilance to signs of distancing, amplify ambiguous interpersonal cues, and intensify negative emotional responses during ordinary marital disagreements. Studies of young adults have demonstrated meaningful associations between attachment styles and loneliness, suggesting that insecure attachment affects the subjective experience of connection even when interpersonal relationships are present (G. & R., 2024). Couple-focused literature similarly emphasizes that attachment patterns influence emotion regulation strategies, communication, conflict, and relational outcomes across generations (Ibrahim et al., 2023). In couples characterized by substantial psychological vulnerability, relationship dysfunction can be particularly pronounced when emotional instability and fears of abandonment interact with interpersonal stress (Kroener et al., 2023). Consequently, attachment anxiety may be one of the mechanisms through which earlier emotional neglect becomes translated into marital exhaustion.

Recent research provides more direct evidence for such a developmental-relational pathway. Childhood trauma has been associated with poorer romantic relationship satisfaction, while attachment processes and social support have been identified as important explanatory mechanisms (Quan et al., 2025). These findings are particularly relevant to marital burnout because relationship satisfaction and relational exhaustion represent closely related, although not identical, dimensions of couple functioning. When individuals enter marriage with heightened attachment anxiety, normal variations in partner availability may be interpreted as evidence of rejection or declining commitment. The resulting reassurance seeking, rumination, hypervigilance, and conflict escalation may consume emotional resources over time. Persistent insecurity can therefore transform everyday relational ambiguity into recurring psychological threat. Research examining harms experienced by married women with relationship obsessive-compulsive difficulties similarly highlights how preoccupation, doubt, relational uncertainty, and repetitive concerns can disrupt emotional well-being and intimate relationship functioning (Zarifi et al., 2026). Such evidence supports the broader proposition that enduring relational insecurity can contribute to psychological exhaustion within marriage.

Emotion dysregulation represents another central process linking developmental adversity with marital burnout. Emotion regulation encompasses the processes by which individuals recognize, understand, tolerate, modulate, and express emotional states in ways that are appropriate to situational demands. Dysregulation can involve poor emotional awareness, difficulty accepting distress, impulsive responding during emotional activation, inability to access adaptive regulatory strategies, and difficulty remaining goal-directed when distressed. Emotional functioning is especially important in intimate relationships

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because partners repeatedly encounter situations involving vulnerability, disagreement, disappointment, jealousy, competing needs, and perceived rejection. The inability to regulate strong affect may intensify these experiences and reduce opportunities for constructive communication or relational repair. Contemporary psychological work has increasingly emphasized deficits in emotional awareness and identification as meaningful components of broader emotional dysfunction. For example, recent conceptual work on alexithymia has emphasized the importance of difficulties identifying, describing, and processing emotional experiences in psychologically demanding contexts (Yiting et al., 2026). Although alexithymia and emotion dysregulation are distinct constructs, both underscore the importance of competent emotional processing for adaptive functioning.

The relationship between emotion dysregulation and interpersonal problems is supported across clinical and nonclinical contexts. Emotion dysregulation has been identified as an important mediator connecting severe interpersonal stressors with maladaptive psychological outcomes among married women (Alsawalqa et al., 2026). Evidence from couples therapy also indicates that emotional regulation capacities are intertwined with attachment patterns and relationship outcomes, suggesting that couples' relational functioning is partly dependent on how effectively each partner can process and regulate affective experiences (Ibrahim et al., 2023). In the context of early adversity, emotional regulation difficulties may emerge because children who receive insufficient emotional validation have limited opportunities to learn how emotional states can be named, tolerated, communicated, and soothed in relationships. Later, these difficulties may become especially problematic within marriage, where emotional intimacy creates frequent demands for self-regulation and co-regulation. Thus, childhood emotional neglect may contribute to marital burnout both directly and indirectly through the development of enduring difficulties in emotion regulation.

The burnout literature provides additional support for the importance of dysregulation in understanding chronic family stress. Parental burnout has been associated with adverse emotional outcomes both for parents and children, indicating that chronic emotional depletion can become part of a reciprocal dysregulatory cycle within families (Yakupova & Suarez, 2023). Research validating measures of caregiving experiences has similarly linked caregiving burden, maternal burnout, and child dysregulation, emphasizing that burnout is embedded within interactive family systems rather than occurring solely within isolated individuals (Tracchegiani et al., 2026). In parents who regret parenthood, childhood maltreatment, reduced reflective functioning, burnout, and child dysregulation have also been shown to form interconnected patterns (Carone et al., 2025). Such research suggests that chronic emotional exhaustion is likely to be intensified when individuals have difficulty interpreting and regulating both their own emotions and the emotional signals of close others.

However, not all individuals with histories of childhood emotional neglect, attachment insecurity, or emotion dysregulation experience equivalent levels of relational impairment. Protective relational resources can attenuate the impact of psychological vulnerabilities, and partner support may be especially relevant within marriage. Partner support refers to the emotional, informational, instrumental, and relational assistance perceived as available from one's spouse or intimate partner. Supportive partners can provide reassurance during emotional distress, assist in problem solving, validate emotional experiences, reduce perceived threat, facilitate adaptive regulation, and communicate commitment to the relationship. Social support has repeatedly been identified as a protective factor in the relationship between trauma and romantic functioning. In particular, research examining childhood trauma and romantic relationship satisfaction has shown that social support can play a significant protective role alongside attachment processes (Quan et al., 2025). The availability of a responsive partner may therefore reduce the extent to which attachment anxiety or dysregulated emotional responses culminate in chronic marital exhaustion.

A moderation perspective is especially useful because partner support may not merely exert an independent beneficial effect on marital burnout. Instead, it may alter the strength of the relationship between psychological risk factors and burnout. From a stress-buffering perspective, supportive interpersonal relationships reduce the harmful consequences of stress by changing how stressors are appraised and by increasing resources for coping with them. For individuals high in attachment anxiety, consistent partner responsiveness may directly challenge expectations of abandonment and provide corrective relational experiences. For individuals who struggle with emotional regulation, supportive partners may facilitate interpersonal regulation by helping to label emotions, communicate needs, de-escalate conflict, and restore emotional equilibrium. Conversely, low partner support may leave vulnerable

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individuals without an effective external regulatory resource, thereby increasing the likelihood that repeated emotional stress will culminate in burnout. Evidence concerning the interpersonal transmission of childhood maltreatment suggests that partner-related processes can either amplify or mitigate the relational consequences of early adversity (Vaillancourt-Morel et al., 2023).

Burnout research also demonstrates the importance of contextual and relational resources. Studies of maternal burnout have shown that exhaustion is associated not merely with individual vulnerabilities but with broader family and relationship conditions (Kira, 2025). Research among Iranian mothers has specifically linked maternal burnout with marital quality and family-related stressors, indicating that couple functioning constitutes a relevant contextual resource in burnout processes (Mazandarani, 2026). Contemporary theoretical revisions of burnout models have further emphasized that apparently similar burnout states may arise from different combinations of demands, vulnerabilities, and resource deficits (Anders et al., 2026). This perspective supports examining marital burnout through a multivariate structural model rather than treating it as the consequence of a single psychological variable.

The wider trauma and burnout literature likewise points toward the value of integrated models. Secondary exposure to distress can produce measurable trauma-related responses and exhaustion in helping professionals, demonstrating that repeated emotional demands can accumulate into broader psychological strain (Renkiewicz & Hubble, 2023). Psychological vulnerabilities associated with traumatic histories may also manifest differently across social and relational contexts, suggesting that the effects of early adversity depend partly on later environmental resources. Research concerning childhood trauma and adult mental health repeatedly identifies heterogeneity in outcomes, indicating that adversity should not be conceptualized as having a deterministic effect (Wu et al., 2025). Rather, individual differences, interpersonal resources, and contextual variables shape whether vulnerability develops into substantial psychological impairment. This principle is particularly relevant to marriage, where partners continually influence each other's emotional experiences.

Further evidence indicates that trauma-related vulnerability can affect intimate and family processes across different stages of adulthood. Adults with histories of adverse experiences may exhibit altered emotional functioning, insecure attachment, difficulties with trust, and heightened sensitivity to stress, all of which can interfere with the maintenance of stable intimate relationships. Studies of childhood maltreatment and marital quality have identified both direct and mediated pathways between early adversity and adult relationship functioning (Sokar, 2024). Similarly, research on adult attachment and maladaptive personality features has shown that attachment-related processes help explain how childhood adversity becomes reflected in later interpersonal functioning (Migalova et al., 2025). These patterns indicate that the effects of emotional neglect are likely to be structurally interconnected with attachment anxiety and emotion dysregulation rather than operating as independent predictors.

Understanding these interconnections is important because conventional approaches examining pairwise relationships may underestimate the developmental complexity of marital burnout. Structural equation modeling provides a useful framework for testing simultaneous relationships among childhood emotional neglect, attachment anxiety, emotion dysregulation, partner support, and marital burnout while accounting for shared variance across predictors. Such a model can clarify whether childhood emotional neglect contributes independently to marital burnout after proximal emotional and relational factors are considered and can determine the relative contributions of attachment anxiety and emotion dysregulation. It can also test whether perceived partner support serves as a relational buffer by attenuating the association between key psychological vulnerabilities and marital burnout. This approach corresponds with recent family research emphasizing interaction among developmental history, emotional functioning, caregiving demands, and relationship resources (Tracchegiani et al., 2026). It is also consistent with findings that childhood maltreatment, attachment, and support jointly contribute to adult intimate relationship outcomes (Quan et al., 2025).

An additional reason for examining this model in a Canadian sample is the need to evaluate marital psychological processes within culturally diverse contemporary societies. Canada contains substantial diversity in family backgrounds, relationship norms, migration histories, and cultural expectations concerning emotional expression and partner support. Although the fundamental processes of attachment and emotion regulation are broadly applicable, their relational expression can vary according to interpersonal norms and contextual conditions. Emerging international burnout research suggests that family-related burnout is shaped by cultural and environmental context rather than representing an entirely

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context-free phenomenon (Kira, 2025). Moreover, ongoing studies of relational distress demonstrate that intimate relationship problems remain strongly connected with patterns of emotional processing, unmet expectations, and perceived interpersonal support (Zarifi et al., 2026). Examining these variables simultaneously in Canadian married adults can therefore contribute to the generalizability of developmental and relational models of marital burnout.

Taken together, previous research supports a conceptual sequence in which childhood emotional neglect creates vulnerability to insecure attachment and difficulties in emotion regulation, while attachment anxiety and emotion dysregulation increase susceptibility to chronic relational distress and exhaustion. At the same time, perceived partner support may provide an important protective resource capable of reducing the strength of these adverse relationships. Nevertheless, the available literature has more frequently examined childhood maltreatment, attachment, emotion regulation, social support, relationship satisfaction, or family burnout in separate models. Studies have also focused extensively on parental burnout, trauma-related psychopathology, and general relationship quality, leaving the integrated structural prediction of specifically marital burnout comparatively underexamined. The current study therefore sought to test a structural equation model of marital burnout based on childhood emotional neglect, attachment anxiety, and emotion dysregulation and to determine whether partner support moderates the associations of attachment anxiety and emotion dysregulation with marital burnout among married adults in Canada.

2. Methods and Materials

2.1. Study Design and Participants

The present study employed a cross-sectional correlational design using structural equation modeling to examine the relationships among childhood emotional neglect, attachment anxiety, emotion dysregulation, perceived partner support, and marital burnout among married adults residing in Canada. The statistical population consisted of legally married adults living with their spouses in Canadian provinces and territories during 2026. Participants were recruited through community organizations, family and relationship support centers, social media advertisements, university community boards, and online research participation platforms. Eligibility criteria included being at least 21 years of age, currently legally married, having lived with the current spouse for at least one year, residing in Canada at the time of participation, sufficient English proficiency to complete the questionnaires independently, and providing informed consent. Individuals who reported being separated from their spouse at the time of data collection or who submitted questionnaires with extensive missing data were excluded. A total of 447 individuals initially accessed the survey. Twenty-one questionnaires were excluded because more than 10% of responses were missing, nine were removed because eligibility criteria were not met, and five were excluded because of patterned or implausibly rapid responding. The final analytic sample therefore consisted of 412 married adults. This sample size exceeded commonly recommended requirements for structural equation modeling and provided an adequate ratio of participants to freely estimated parameters while also offering sufficient power for detecting small-to-moderate interaction effects. Participation was voluntary and anonymous, and no personally identifying information was retained in the analytic dataset. Before completing the questionnaires, all participants received an electronic description of the study objectives, confidentiality procedures, voluntary participation, and the right to discontinue participation without penalty. The study procedures were conducted in accordance with standard ethical principles for research involving human participants.

2.2. Measures

Marital burnout was assessed using the Couple Burnout Measure developed by Pines. The instrument is designed to assess the degree of physical, emotional, and mental exhaustion associated with an intimate relationship and contains 21 items reflecting experiences such as tiredness, hopelessness, emotional depletion, disappointment, and reduced psychological energy in the marital context. Items are rated on a seven-point response scale ranging from 1 indicating never to 7 indicating always. Following reverse scoring of positively worded items, higher total scores indicate greater marital burnout. The measure has been widely used in studies of couple distress and has demonstrated satisfactory internal consistency and construct validity. In the present study, the total score was used as the primary indicator of marital burnout. The scale demonstrated high internal consistency in the current sample, with Cronbach's alpha of .92 and composite reliability of .93.

Childhood emotional neglect was assessed using the Emotional Neglect subscale of the Childhood Trauma

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Questionnaire–Short Form developed by Bernstein and colleagues. The Childhood Trauma Questionnaire is a 28-item retrospective self-report instrument assessing multiple forms of childhood maltreatment, including emotional abuse, physical abuse, sexual abuse, physical neglect, and emotional neglect. For the purposes of the present study, only the five-item Emotional Neglect subscale was used because childhood emotional neglect constituted the developmental predictor specified in the hypothesized model. Items assess insufficient emotional availability, lack of perceived care, absence of emotional closeness, and unmet emotional needs during childhood. Responses are provided on a five-point Likert scale ranging from 1 indicating never true to 5 indicating very often true. After appropriate reverse scoring, higher scores indicate greater childhood emotional neglect. Previous research has supported the reliability and factorial validity of the Childhood Trauma Questionnaire across clinical and community samples. In the present sample, the Emotional Neglect subscale showed acceptable internal consistency, with Cronbach's alpha of .86 and composite reliability of .87.

Attachment anxiety was measured using the anxiety dimension of the Experiences in Close Relationships–Revised questionnaire developed by Fraley, Waller, and Brennan. The full instrument contains 36 items distributed equally across attachment anxiety and attachment avoidance dimensions. Because the theoretical model specifically focused on attachment anxiety, the 18-item attachment anxiety subscale was administered and analyzed. Items assess fear of rejection or abandonment, excessive concern regarding a partner's availability, need for reassurance, and worry about being insufficiently valued or loved by the intimate partner. Participants rated each statement on a seven-point Likert scale ranging from 1 indicating strongly disagree to 7 indicating strongly agree. Several items were reverse scored according to the original scoring procedure. Higher scores indicate greater attachment anxiety. The Experiences in Close Relationships–Revised questionnaire has consistently demonstrated strong psychometric properties in research on adult romantic attachment. In the present study, the attachment anxiety subscale demonstrated high internal consistency, with Cronbach's alpha of .91 and composite reliability of .92.

Emotion dysregulation was assessed using the Difficulties in Emotion Regulation Scale developed by Gratz and Roemer. The instrument contains 36 items measuring difficulties across six domains: nonacceptance of emotional responses, difficulties engaging in goal-directed behavior when distressed, impulse-control difficulties, lack of emotional awareness, limited access to effective emotion-regulation strategies, and lack of emotional clarity. Items are scored on a five-point Likert scale ranging from 1 indicating almost never to 5 indicating almost always. After reverse scoring the appropriate items, scores are summed to produce an overall index, with higher scores reflecting greater difficulties regulating emotions. The scale has demonstrated strong internal consistency, convergent validity, and construct validity across community and clinical populations. In the current study, the total emotion dysregulation score was used in structural analyses. Cronbach's alpha was .94 and composite reliability was .94.

Perceived partner support was measured using the partner-focused items of the Multidimensional Scale of Perceived Social Support, adapted so that the significant-other referent explicitly indicated the participant's spouse or marital partner. The partner-support component consists of four items assessing the extent to which the respondent perceives the spouse as emotionally available, supportive during difficulties, willing to share joys and concerns, and available when needed. Items are rated on a seven-point Likert scale ranging from 1 indicating very strongly disagree to 7 indicating very strongly agree. Higher scores represent greater perceived partner support. The Multidimensional Scale of Perceived Social Support has demonstrated strong reliability and convergent validity in diverse adult populations, and partner-specific scoring is particularly appropriate for examining perceived interpersonal resources within intimate relationships. In the present study, Cronbach's alpha for perceived partner support was .90 and composite reliability was .91.

2.3. Data Analysis

Data were analyzed using IBM SPSS Statistics version 30 and IBM SPSS AMOS version 30. Preliminary screening included examination of missing values, response patterns, univariate outliers, multivariate outliers, normality, and multicollinearity. Less than 1% item-level missingness remained among otherwise eligible questionnaires and was handled using expectation-maximization procedures before computation of scale scores. Univariate normality was evaluated using skewness and kurtosis, with absolute skewness values below 2 and absolute kurtosis values below 7 considered acceptable for maximum-likelihood structural equation modeling. Multivariate outliers were evaluated using Mahalanobis distance, while multicollinearity was

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assessed through tolerance and variance inflation factor values. Descriptive statistics, including mean, standard deviation, minimum, maximum, skewness, and kurtosis, were calculated for all study variables. Internal consistency was evaluated using Cronbach's alpha and composite reliability. Pearson correlation coefficients were computed to examine bivariate associations among childhood emotional neglect, attachment anxiety, emotion dysregulation, partner support, and marital burnout.

The hypothesized structural model was estimated using maximum-likelihood estimation. Model fit was evaluated using multiple complementary indices, including chi-square divided by degrees of freedom, the Comparative Fit Index, Tucker–Lewis Index, Incremental Fit Index, Goodness-of-Fit Index, Root Mean Square Error of Approximation with its 90% confidence interval, and Standardized Root Mean Square Residual. Values below 3.00 for χ^2/df, values of .90 or higher for incremental fit indices, and values below .08 for RMSEA and SRMR were interpreted as indicating acceptable model fit. Standardized direct effects were estimated from childhood emotional neglect, attachment anxiety, emotion dysregulation, and partner support to marital burnout. In addition, childhood emotional neglect was modeled as a predictor of attachment anxiety and emotion dysregulation to examine the developmental organization of the proposed structural relationships.

Moderation was tested by examining the interaction of attachment anxiety with partner support and the interaction of emotion dysregulation with partner support in predicting marital burnout. Predictor variables were mean-centered before interaction terms were created to reduce nonessential multicollinearity. The interaction effects were entered into the structural model after estimation of the main effects. Statistically significant interaction effects were further interpreted using simple-slope analysis at one standard deviation below the mean, at the mean, and one standard deviation above the mean of partner support. Statistical significance was evaluated at $p < .05$, while 95% confidence intervals were used in the interpretation of direct and moderation effects.

3. Findings and Results

The final sample consisted of 412 married adults residing in Canada. Participants ranged in age from 24 to 67 years, with a mean age of 41.36 years (SD = 9.74). Of the participants, 224 were women (54.4%) and 188 were men (45.6%). The mean duration of marriage was 13.18 years (SD = 8.72), with marital duration ranging from 1 to 39 years. A total of 298 participants (72.3%) reported having at least one child, whereas 114 (27.7%) reported having no children. Regarding education, 58 participants (14.1%) had completed high school or an equivalent qualification, 86 (20.9%) held a college or technical diploma, 173 (42.0%) held a bachelor's degree, and 95 (23.1%) held a master's or doctoral degree. Regarding employment, 304 participants (73.8%) were employed full-time, 51 (12.4%) were employed part-time, 29 (7.0%) were unemployed or seeking employment, and 28 (6.8%) were retired, full-time caregivers, or otherwise outside the paid labor force. The demographic distribution indicated adequate variability in age, marital duration, education, and employment status for the investigation of marital burnout within a community sample of Canadian married adults.

Table 1

Descriptive Statistics, Distributional Indices, and Reliability of the Study Variables

Variable	M	SD	Minimum	Maximum	Skewness	Kurtosis	Cronbach's α	Composite Reliability
Childhood Emotional Neglect	12.84	4.39	5.00	24.00	0.48	-0.36	.86	.87
Attachment Anxiety	61.47	17.63	21.00	112.00	0.31	-0.42	.91	.92
Emotion Dysregulation	91.26	23.18	43.00	157.00	0.42	-0.27	.94	.94
Partner Support	21.63	5.08	6.00	28.00	-0.69	0.08	.90	.91
Marital Burnout	72.91	20.46	27.00	131.00	0.39	-0.31	.92	.93

As shown in Table 1, all variables demonstrated adequate variability and satisfactory distributional characteristics. Absolute skewness values ranged from 0.31 to 0.69 and absolute kurtosis values ranged from 0.08 to 0.42, indicating no substantial deviation from univariate normality. Marital burnout had a mean score of 72.91 (SD = 20.46), whereas the mean scores for childhood emotional neglect, attachment anxiety, emotion dysregulation, and partner support were 12.84 (SD = 4.39), 61.47 (SD = 17.63), 91.26 (SD = 23.18), and 21.63 (SD = 5.08), respectively. Internal consistency was satisfactory for all measures. Cronbach's alpha coefficients ranged from .86 to .94, while composite

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reliability values ranged from .87 to .94. These findings indicated that all measures had adequate reliability for inclusion in the subsequent correlational and structural analyses. Preliminary examination of multicollinearity further showed tolerance values ranging from .51 to .76 and variance inflation factor values ranging from 1.32 to 1.96, indicating that multicollinearity did not constitute a serious concern.

Table 2

Pearson Correlations Among Childhood Emotional Neglect, Attachment Anxiety, Emotion Dysregulation, Partner Support, and Marital Burnout

Variable	1	2	3	4	5
1. Childhood Emotional Neglect	1				
2. Attachment Anxiety	.46**	1			
3. Emotion Dysregulation	.43**	.55**	1		
4. Partner Support	-.31**	-.42**	-.36**	1	
5. Marital Burnout	.45**	.61**	.58**	-.57**	1

Table 2 shows that all correlations among the principal study variables were statistically significant at $p < .01$ and were in the theoretically expected directions. Childhood emotional neglect was positively correlated with attachment anxiety (r = .46), emotion dysregulation (r = .43), and marital burnout (r = .45), while it was negatively associated with partner support (r = -.31). Attachment anxiety was strongly and positively associated with marital burnout (r = .61) and was also positively correlated with emotion dysregulation (r = .55). Emotion dysregulation showed a substantial positive correlation with marital burnout (r = .58). In contrast, partner support was negatively correlated with attachment anxiety (r = -.42), emotion dysregulation (r = -.36), and marital burnout (r = -.57). The magnitude of the correlations remained below levels that would indicate problematic construct redundancy, supporting the inclusion of the variables as distinct predictors within the structural equation model.

Table 3

Goodness-of-Fit Indices for the Structural Equation Model

Fit Index	Obtained Value	Recommended Criterion	Interpretation
χ^2	386.42	—	—
df	174	—	—
χ^2/df	2.22	< 3.00	Acceptable
CFI	.956	≥ .90	Good
TLI	.947	≥ .90	Good
IFI	.957	≥ .90	Good
GFI	.921	≥ .90	Good
RMSEA	.054	< .08	Good
90% CI for RMSEA	.047–.061	—	—
SRMR	.046	< .08	Good

As presented in Table 3, the hypothesized structural equation model demonstrated a satisfactory fit to the observed data. The ratio of chi-square to degrees of freedom was 2.22, which was below the recommended threshold of 3.00. The CFI (.956), TLI (.947), IFI (.957), and GFI (.921) all exceeded the conventional criterion of .90. The RMSEA was .054, with a 90% confidence interval ranging from .047 to .061, and the SRMR was .046. Both residual-based indices were well below the .08 threshold. Taken together, these indicators supported the adequacy of the hypothesized structural model and justified interpretation of the estimated structural pathways.

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Table 4

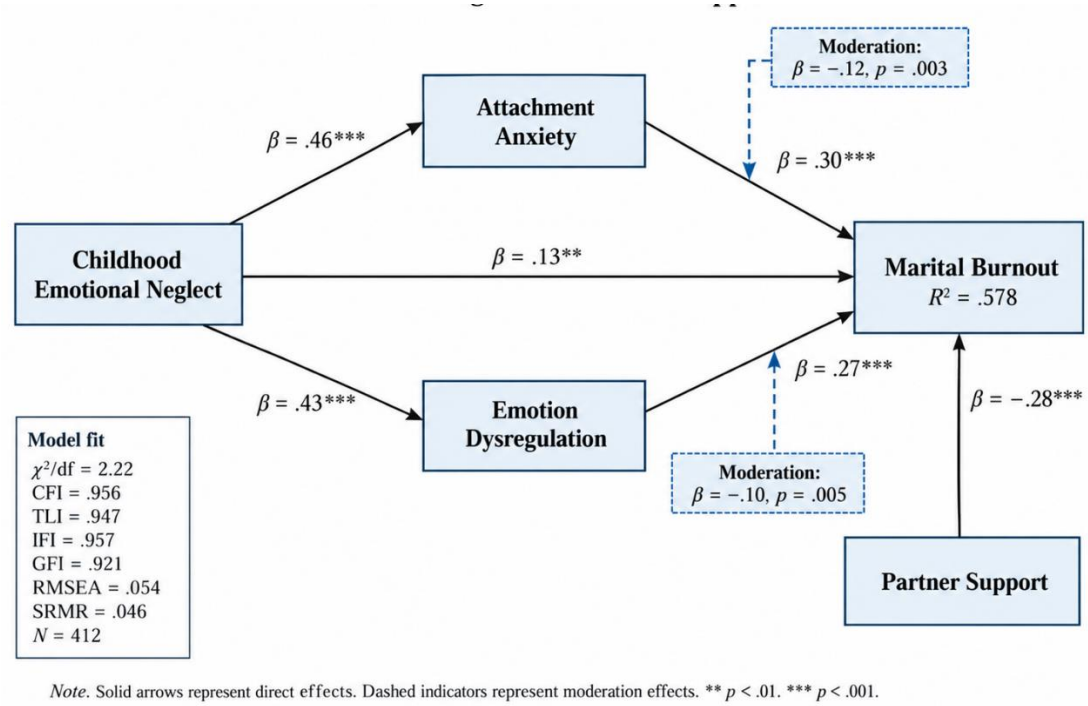
Standardized Direct and Moderating Effects in the Structural Model

Structural Path	B	SE	β	Critical Ratio	p
Childhood Emotional Neglect → Attachment Anxiety	1.42	0.15	.46	9.47	< .001
Childhood Emotional Neglect → Emotion Dysregulation	2.25	0.26	.43	8.65	< .001
Childhood Emotional Neglect → Marital Burnout	0.58	0.17	.13	3.41	.001
Attachment Anxiety → Marital Burnout	0.35	0.05	.30	7.00	< .001
Emotion Dysregulation → Marital Burnout	0.24	0.04	.27	6.00	< .001
Partner Support → Marital Burnout	-1.11	0.14	-.28	-7.93	< .001
Attachment Anxiety × Partner Support → Marital Burnout	-0.018	0.006	-.12	-3.00	.003
Emotion Dysregulation × Partner Support → Marital Burnout	-0.014	0.005	-.10	-2.80	.005

Table 4 indicates that childhood emotional neglect significantly predicted both attachment anxiety (β = .46, p < .001) and emotion dysregulation (β = .43, p < .001). Even after these more proximal psychological variables were incorporated into the model, childhood emotional neglect retained a smaller but statistically significant direct association with marital burnout (β = .13, p = .001). Attachment anxiety positively predicted marital burnout (β = .30, p < .001), as did emotion dysregulation (β = .27, p < .001), indicating that greater interpersonal insecurity and greater difficulty regulating emotions were independently associated with greater marital exhaustion. Partner support was inversely related to marital burnout (β = -.28, p < .001), demonstrating that greater perceived support from one's spouse was associated with lower burnout after controlling for the other predictors. Importantly, both hypothesized interaction effects were statistically significant. Partner support moderated the relationship between attachment anxiety and marital burnout (β = -.12, p = .003) and also moderated the relationship between emotion dysregulation and marital burnout (β = -.10, p = .005). The negative interaction coefficients indicated that the positive effects of attachment anxiety and emotion dysregulation on marital burnout became weaker as perceived partner support increased. The complete structural model explained 57.8% of the variance in marital burnout.

Figure 1

Structural Equation Model of Childhood Emotional Neglect, Attachment Anxiety, Emotion Dysregulation, Partner Support, and Marital Burnout



Note. Solid arrows represent direct effects. Dashed indicators represent moderation effects. ** $p < .01$. *** $p < .001$.

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The structural model depicted in Figure 1 showed a developmental and relational pattern in which childhood emotional neglect was positively associated with attachment anxiety and emotion dysregulation, which in turn independently contributed to marital burnout. A smaller direct pathway from childhood emotional neglect to marital burnout remained significant, indicating that the association between early emotional deprivation and current marital exhaustion was not entirely accounted for by attachment anxiety and emotion dysregulation. Partner support demonstrated both a direct protective association with marital burnout and significant buffering effects on the associations of attachment anxiety and emotion dysregulation with burnout. Simple-slope analyses supported the interpretation of these interactions. For participants reporting low partner support, defined as one standard deviation below the mean, attachment anxiety was strongly associated with marital burnout ($\beta = .42$, $p < .001$), whereas the association was weaker at average partner support ($\beta = .30$, $p < .001$) and further reduced at high partner support, defined as one standard deviation above the mean ($\beta = .18$, $p = .012$). A similar pattern was observed for emotion dysregulation: the association with marital burnout was strongest at low partner support ($\beta = .37$, $p < .001$), decreased at average partner support ($\beta = .27$, $p < .001$), and was weakest at high partner support ($\beta = .16$, $p = .021$). Thus, partner support did not eliminate the detrimental associations of attachment anxiety and emotion dysregulation with marital burnout, but it significantly attenuated both relationships.

4. Discussion

The present study examined a structural model of marital burnout based on childhood emotional neglect, attachment anxiety, and emotion dysregulation while investigating perceived partner support as a moderator of the relationships between proximal psychological vulnerabilities and marital burnout. The findings supported the proposed model. Childhood emotional neglect significantly predicted greater attachment anxiety and emotion dysregulation and also retained a smaller direct association with marital burnout. Attachment anxiety and emotion dysregulation independently predicted greater marital burnout, whereas perceived partner support predicted lower burnout. More importantly, partner support significantly moderated both the attachment anxiety–burnout and emotion dysregulation–burnout relationships. The positive associations of attachment anxiety and emotion dysregulation with marital burnout were substantially stronger when partner support was low and progressively weaker when support was average or high. Collectively, the predictors accounted for 57.8% of the variance in marital burnout, suggesting that marital exhaustion can be meaningfully understood through an integrated developmental, emotional, attachment-based, and relational framework.

The significant relationship between childhood emotional neglect and marital burnout is consistent with theoretical perspectives proposing that early relational experiences remain relevant to functioning in adult intimate relationships. Childhood emotional neglect involves repeated experiences in which emotional needs are insufficiently recognized, validated, or responded to by caregivers. Such experiences may contribute to internalized expectations that emotional support will not reliably be available and that vulnerable emotional expression is unlikely to produce care or comfort. Trauma research demonstrates that the consequences of childhood adversity frequently persist into adulthood and affect emotional, cognitive, and interpersonal functioning (Paivio & Pascual-Leone, 2023). The current findings are also compatible with evidence that childhood maltreatment is associated with impaired marital relationship quality (Sokar, 2024). An individual who enters marriage with developmental expectations of emotional unavailability may be more sensitive to ordinary failures of responsiveness and may find it more difficult to use the marital relationship as a source of restoration during stress. Over time, repeated experiences of perceived emotional disappointment may increase psychological exhaustion and contribute to burnout.

The present results also correspond with evidence demonstrating that the consequences of childhood maltreatment are not limited to individual psychopathology but extend into couple functioning. Vaillancourt-Morel and colleagues showed that childhood maltreatment can produce measurable partner effects, indicating that the relational consequences of early adversity affect both members of the couple system (Vaillancourt-Morel et al., 2023). This dyadic perspective is important for interpreting marital burnout. Emotional neglect may shape patterns of reassurance seeking, emotional withdrawal, difficulty communicating needs, or heightened reactivity to perceived partner disengagement. These behaviors can influence the spouse's responses, creating reciprocal interaction cycles that increase relational strain. Thus, the significant direct association observed between childhood emotional neglect

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and marital burnout may reflect the cumulative influence of developmental expectations on current relationship interpretations and behaviors, even after attachment anxiety and emotion dysregulation are statistically controlled.

One of the strongest developmental pathways in the model was the positive association between childhood emotional neglect and attachment anxiety. This result is consistent with attachment theory and previous evidence linking early caregiving behavior with adult attachment orientations. Parenting behavior has been associated with later adult attachment, supporting continuity between formative relational experiences and expectations within adult intimacy (Chen, 2023). Similarly, adverse childhood experiences have been linked to attachment insecurity and maladaptive adult personality characteristics (Migalova et al., 2025). When children's requests for comfort, validation, or emotional responsiveness are inconsistently addressed, they may develop uncertainty regarding whether close others will remain available. In adulthood, this uncertainty can manifest as heightened vigilance toward signs of rejection, fear of abandonment, reassurance seeking, and excessive concern regarding relationship stability. The relatively substantial standardized pathway from childhood emotional neglect to attachment anxiety in the present study supports this developmental interpretation.

Attachment anxiety, in turn, significantly predicted marital burnout. This finding can be understood through the chronic activation of attachment-related threat monitoring. Individuals with elevated attachment anxiety may devote substantial cognitive and emotional resources to monitoring their spouse's responsiveness, interpreting ambiguous behavior, seeking reassurance, and attempting to prevent perceived abandonment. Such hyperactivation can increase emotional intensity during ordinary conflicts and make minor relational fluctuations psychologically costly. Previous research has demonstrated meaningful associations between insecure attachment and loneliness even among young adults who may have existing interpersonal relationships (G. & R., 2024). In couple contexts, intergenerational attachment patterns influence emotional regulation and relational outcomes (Ibrahim et al., 2023). The present results extend these observations by suggesting that attachment anxiety is not merely associated with dissatisfaction or insecurity but may contribute specifically to chronic marital exhaustion.

The findings are particularly consistent with recent evidence showing that attachment plays an important role in the association between childhood trauma and romantic relationship satisfaction. Quan and colleagues reported that attachment and social support help explain how childhood trauma is connected with romantic relationship functioning (Quan et al., 2025). The current model similarly showed that early emotional neglect contributed to attachment insecurity and that attachment anxiety subsequently predicted marital burnout. These findings suggest that the marital consequences of childhood adversity may be partly understood as the continuation of relational threat expectations. A spouse's temporary unavailability, reduced emotional expressiveness, fatigue, or need for autonomy may be interpreted by a highly anxious partner as evidence of rejection or loss of affection. Repeated threat appraisal may increase interpersonal conflict and emotional depletion, thereby accelerating burnout.

The observed relationship between childhood emotional neglect and emotion dysregulation also supports developmental models of emotional functioning. Children learn to regulate emotions partly through interactions in which caregivers recognize distress, help name emotional experiences, model regulation strategies, and provide reassurance during high arousal. Emotional neglect deprives children of repeated opportunities for such co-regulation. Consequently, they may enter adulthood with difficulties understanding emotions, accepting negative affect, tolerating distress, or selecting effective strategies when emotionally activated. The current finding is compatible with broader trauma literature showing persistent psychological dysfunction among adults exposed to childhood adversity (Lapointe et al., 2025). It is also consistent with evidence that traumatic histories can remain relevant across later emotionally demanding experiences (Purkiewicz et al., 2026). Although childhood neglect does not invariably produce dysregulation, the present results suggest that inadequate childhood emotional responsiveness represents an important developmental risk factor.

Emotion dysregulation independently predicted marital burnout even when attachment anxiety, childhood emotional neglect, and partner support were statistically controlled. This finding highlights the importance of regulatory capacity in sustaining intimate relationships. Marriage repeatedly requires individuals to manage disappointment, anger, jealousy, anxiety, vulnerability, and frustration without allowing short-term emotional activation to undermine long-term relational goals. Individuals with greater emotion-regulation difficulties may be more likely to respond impulsively during conflict, engage in repetitive negative thinking, withdraw when distressed, or experience

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prolonged emotional activation after disagreements. Such patterns can increase the frequency and intensity of relational conflict and reduce successful repair. Over time, this continuous emotional demand may contribute to exhaustion. Evidence that emotion dysregulation mediates adverse outcomes among married women exposed to severe relational stress further supports its central role in converting interpersonal adversity into psychological dysfunction (Alsawalqa et al., 2026).

The current findings also correspond with research highlighting reciprocal relationships between family burnout and dysregulation. Parental burnout has been associated with emotional difficulties in children, indicating that exhaustion and dysregulation may interact within family systems (Yakupova & Suarez, 2023). Research examining caregiving experiences has likewise connected maternal burnout with child dysregulation (Tracchegiani et al., 2026). Although the present study focused on marital rather than parental burnout, the underlying principle may be similar: when emotional demands are persistent and regulation resources are insufficient, individuals are more likely to become exhausted and disengaged. The family system may subsequently reinforce these difficulties by producing additional interpersonal stress. Thus, marital burnout may represent both an outcome of emotion dysregulation and a context capable of perpetuating dysregulated interaction.

The inverse association between partner support and marital burnout was another important finding. Participants perceiving greater emotional and practical support from their spouses reported substantially less marital exhaustion. This result is consistent with resource-based models of burnout, according to which exhaustion develops when chronic demands exceed available coping resources. A supportive partner may reduce relationship-related demands while simultaneously increasing emotional resources. Support can communicate acceptance, provide reassurance, distribute practical responsibilities, facilitate problem solving, and make stressful experiences feel more manageable. Research examining romantic relationships after childhood trauma has similarly emphasized the protective importance of social support (Quan et al., 2025). In the context of marriage, support is especially consequential because the spouse is simultaneously a primary attachment figure and one of the most immediate potential sources of interpersonal coping resources.

The association between partner support and reduced burnout is also compatible with family burnout literature demonstrating that burnout is shaped by the wider relational context rather than by individual characteristics alone. Research on maternal burnout in different cultural settings has highlighted the influence of contextual and family factors on exhaustion (Kira, 2025). Similarly, evidence from Iranian mothers indicates that marital quality is meaningfully associated with maternal burnout (Mazandarani, 2026). These findings reinforce the interpretation that close relationship quality can either protect against or contribute to emotional exhaustion. The present results extend this principle directly to marital burnout by demonstrating that perceived support from the spouse is not merely indirectly relevant but constitutes an independent protective predictor after developmental and psychological vulnerabilities are considered.

A particularly important contribution of the study was the significant moderating effect of partner support on the association between attachment anxiety and marital burnout. Attachment anxiety remained positively associated with marital burnout at all levels of partner support, but its effect was considerably stronger among individuals reporting low support. At high support, the association was substantially attenuated. This pattern is theoretically meaningful because consistent support from a spouse may weaken attachment-related expectations of abandonment. Individuals high in attachment anxiety may be especially sensitive to evidence concerning a partner's availability. When the partner behaves consistently supportively, this responsiveness may reduce uncertainty and decrease the need for hyperactivation strategies such as excessive reassurance seeking, vigilance, or relational rumination. The result therefore supports a stress-buffering rather than merely additive conceptualization of partner support.

This moderating effect is broadly consistent with previous work demonstrating that attachment and social support jointly influence romantic functioning after childhood trauma (Quan et al., 2025). It also accords with the broader evidence that the impact of childhood maltreatment extends into dyadic functioning and may be shaped by partner processes (Vaillancourt-Morel et al., 2023). From this perspective, attachment anxiety should not be considered a fixed determinant of poor marital outcomes. Its consequences may depend partly on whether the current relationship repeatedly confirms or challenges expectations of abandonment. A responsive and emotionally available spouse may function as a corrective interpersonal context in which insecure expectations are gradually weakened. By contrast, inconsistent or low partner support may confirm

pre-existing fears, strengthen attachment-system activation, and increase vulnerability to burnout.

Partner support also moderated the association between emotion dysregulation and marital burnout. Emotion dysregulation was strongly associated with burnout when partner support was low but showed a substantially weaker association when support was high. This finding can be interpreted through the concept of interpersonal emotion regulation. Although emotion regulation is often described as an individual ability, adults routinely regulate affect through social relationships. A supportive spouse can facilitate regulation by listening, validating emotional experiences, providing alternative interpretations, encouraging adaptive coping, and helping de-escalate conflict. For individuals whose intrapersonal regulatory resources are limited, these interpersonal processes may be particularly protective. Thus, partner support may compensate partially for individual difficulties in emotion regulation.

The moderating result also helps explain why emotion dysregulation does not uniformly produce severe relationship dysfunction. Emotional vulnerabilities exist within relational systems that can intensify or attenuate their behavioral consequences. Research involving couples with significant psychological difficulties has shown that relationship dysfunction reflects complex interactions between individual vulnerability and interpersonal processes (Kroener et al., 2023). Similarly, the association of emotion dysregulation with adverse outcomes among married women exposed to intimate partner violence demonstrates the importance of emotional regulation in highly stressful relational environments (Alsawalqa et al., 2026). The present findings suggest that in supportive marriages, dysregulated individuals may have access to interpersonal resources that reduce the likelihood that emotional difficulties accumulate into chronic exhaustion.

The persistence of a direct pathway from childhood emotional neglect to marital burnout after accounting for attachment anxiety and emotion dysregulation is also noteworthy. This finding indicates that the consequences of emotional neglect may not be fully reducible to the two proximal mechanisms examined in the model. Emotional neglect may influence marriage through additional pathways such as low self-worth, impaired trust, difficulties identifying relational needs, avoidance of vulnerability, maladaptive beliefs about dependence, sensitivity to criticism, or reduced expectations that support will be available. Previous research has similarly demonstrated multiple pathways linking childhood maltreatment with adult relationship quality (Sokar, 2024). Early adversity may therefore constitute a broad developmental vulnerability that affects marriage through several interconnected mechanisms.

The overall explanatory power of the model further supports an integrated approach to marital burnout. The model accounted for more than half of the variance in marital burnout, indicating that developmental history, attachment processes, emotion regulation, and current partner support collectively represent substantial determinants of relational exhaustion. Burnout research increasingly emphasizes that burnout states are heterogeneous and may arise through different configurations of vulnerability, chronic demand, and insufficient resources (Anders et al., 2026). Similarly, reviews of parental burnout identify multiple individual, relational, and contextual correlates rather than a single causal factor (Ren et al., 2024). The present findings indicate that this multidimensional conceptualization is equally useful for understanding burnout in marital relationships.

The results also carry implications for understanding persistent forms of marital distress. Research examining relationship-centered obsessive-compulsive difficulties has described substantial harms among married women whose intimate relationships become characterized by persistent doubt and psychological distress (Zarifi et al., 2026). Although such clinical difficulties differ from attachment anxiety, both involve heightened relational threat processing and sustained cognitive-emotional investment in perceived relationship problems. The present findings suggest that chronic relational insecurity can become exhausting, particularly when partner support is insufficient. Consequently, marital burnout may be conceptualized not simply as dissatisfaction with a spouse but as a state of depleted relational resources produced by the interaction of developmental vulnerability, emotional processes, and current interpersonal conditions.

The study also supports a non-deterministic interpretation of childhood adversity. Although childhood emotional neglect predicted attachment anxiety, emotion dysregulation, and marital burnout, the significant moderating effects of partner support demonstrate that early adversity does not determine subsequent relational outcomes. Contemporary trauma research consistently indicates substantial heterogeneity in adaptation following adversity (ElBarazi, 2025). Even individuals with significant developmental vulnerabilities may experience more adaptive functioning when protective interpersonal

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resources are available. This interpretation is clinically important because it shifts attention from immutable developmental history toward modifiable relational processes. Childhood experiences cannot be changed, but the meanings attributed to them, the emotion-regulation strategies used in adulthood, attachment-related responses, and the quality of current partner support can potentially be addressed through intervention.

5. Conclusion

The present study demonstrated that marital burnout is meaningfully associated with both developmental vulnerability and current relational functioning. Childhood emotional neglect predicted greater attachment anxiety and emotion dysregulation and retained a direct association with marital burnout. Attachment anxiety and emotion dysregulation independently increased marital burnout, whereas perceived partner support was associated with lower burnout. Most importantly, partner support buffered the adverse effects of both attachment anxiety and emotion dysregulation, such that these psychological vulnerabilities were substantially less strongly associated with burnout among participants experiencing high levels of spousal support. The findings therefore support a developmental-relational model in which early emotional deprivation contributes to adult interpersonal and regulatory vulnerability, while current supportive marital processes can partially protect against the translation of these vulnerabilities into chronic relational exhaustion.

6. Limitations & Suggestions

One limitation of the present study was its cross-sectional design, which prevents definitive conclusions regarding temporal or causal ordering among childhood emotional neglect, attachment anxiety, emotion dysregulation, partner support, and marital burnout. The retrospective assessment of childhood emotional neglect may also have been influenced by memory processes and current psychological state. All variables were assessed using self-report measures completed by one member of each couple, creating the possibility of shared method variance and preventing direct examination of spouse-reported support or dyadic agreement. Although the sample included adults with varied ages, educational backgrounds, and marital durations, participation was voluntary and largely facilitated through online and community-based recruitment, which may limit the representativeness of the sample. The study also did not directly assess potentially relevant variables such as marital conflict frequency, relationship satisfaction, financial stress, parenting burden, physical health, personality characteristics, or current psychiatric symptoms.

Future studies should employ longitudinal designs to determine whether childhood emotional neglect prospectively predicts changes in marital burnout through attachment anxiety and emotion dysregulation and whether changes in partner support alter these trajectories over time. Dyadic studies involving both spouses would allow use of actor–partner interdependence models to distinguish the effects of an individual's childhood history and psychological characteristics from partner effects. Future research should also evaluate whether partner support similarly buffers attachment avoidance, rejection sensitivity, rumination, maladaptive schemas, and other pathways connecting childhood adversity with marital burnout. Comparative studies across different cultural groups, relationship durations, age groups, and family structures could clarify whether the proposed model is culturally invariant. Intervention studies would additionally be valuable for determining whether experimentally or therapeutically increasing partner responsiveness and emotion-regulation capacity produces measurable reductions in marital burnout.

In practice, assessment and treatment of marital burnout should extend beyond current marital disagreements and consider the developmental and emotional vulnerabilities that individuals bring into intimate relationships. Couple therapists and family psychologists may benefit from screening for childhood emotional neglect, attachment insecurity, and difficulties in emotion regulation when marital exhaustion is prominent. Interventions may target recognition and communication of attachment needs, reduction of threat-based interpretations of partner behavior, improvement of emotional awareness and regulation, and development of constructive conflict-management strategies. Because partner support demonstrated both direct and buffering effects, couple-based interventions should also emphasize consistent responsiveness, emotional validation, supportive communication, and effective co-regulation. Strengthening supportive interactions between spouses may be particularly valuable for individuals with elevated attachment anxiety or emotion-regulation difficulties because relational support appears capable of reducing the extent to which these vulnerabilities develop into chronic marital burnout.

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Declaration of Interest

The authors of this article declared no conflict of interest.

Ethical Considerations

The study protocol adhered to the principles outlined in the Helsinki Declaration, which provides guidelines for ethical research involving human participants.

Transparency of Data

In accordance with the principles of transparency and open research, we declare that all data and materials used in this study are available upon request.

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Authors' Contributions

All authors have equally contributed to the research process and the development of the manuscript.

Declaration

In order to correct and improve the academic writing of our paper, we have used the language model ChatGPT.

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