

Attachment Anxiety as a Mediator Between Childhood Neglect and Intimate Partner Violence Victimization

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ABSTRACT

Objective: This study aimed to examine whether attachment anxiety mediates the relationship between childhood neglect and intimate partner violence (IPV) victimization among adults in Canada.

Methods and Materials: A descriptive correlational design was employed with a sample of 412 adults recruited from Canada, selected based on the Morgan and Krejcie sample size table. Standardized measures were used, including the Childhood Trauma Questionnaire–Short Form (CTQ-SF) for childhood neglect, the Experiences in Close Relationships–Revised (ECR-R) for attachment anxiety, and the Revised Conflict Tactics Scales (CTS2) for IPV victimization. Data were analyzed using SPSS version 27 and AMOS version 21. Pearson correlation analysis was performed to assess bivariate associations among variables, while Structural Equation Modeling (SEM) was used to test the hypothesized mediation model. Model fit was evaluated using χ^2/df , GFI, AGFI, CFI, TLI, and RMSEA indices.

Findings: Results revealed significant positive correlations between childhood neglect and attachment anxiety ($r = .46, p < .001$), childhood neglect and IPV victimization ($r = .39, p < .001$), and attachment anxiety and IPV victimization ($r = .52, p < .001$). The SEM analysis demonstrated good model fit ($\chi^2/df = 2.01$, GFI = .94, AGFI = .91, CFI = .96, TLI = .95, RMSEA = .049). Path analysis indicated that childhood neglect significantly predicted attachment anxiety ($\beta = .46, p < .001$), and attachment anxiety predicted IPV victimization ($\beta = .41, p < .001$). Childhood neglect also directly predicted IPV victimization ($\beta = .22, p < .01$). Mediation analysis confirmed that attachment anxiety partially mediated the relationship, with a significant indirect effect ($\beta = .19, p < .001$).

Conclusion: These findings suggest that attachment anxiety is a key psychological mechanism linking childhood neglect to IPV victimization.

Keywords: *Childhood neglect; attachment anxiety; intimate partner violence; mediation; structural equation modeling*

1. Introduction

Intimate partner violence (IPV) remains a pervasive public health and social problem that transcends cultural, socioeconomic, and geographic boundaries. Defined broadly as physical, psychological, or sexual aggression within intimate relationships, IPV has long-term consequences for victims' mental and physical well-being, with women disproportionately affected (Ahmed et al., 2024; Teixeira et al., 2015). Scholars have emphasized the importance of early developmental experiences and attachment processes in shaping vulnerability to IPV victimization (Ørke et al., 2021; Sokolova & Bakalova, 2022). One of the most significant pathways suggested is the role of childhood neglect and maltreatment in shaping insecure attachment orientations—particularly attachment anxiety—that subsequently increase susceptibility to IPV in adulthood (Brassard et al., 2022; McClure & Parmenter, 2017; Webermann & Murphy, 2018).

A robust body of literature highlights the long-term impact of adverse childhood experiences (ACEs) such as neglect, abuse, and exposure to family violence. These adversities are associated with elevated risk for interpersonal violence and other maladaptive outcomes across the lifespan (Widom, 2017; Zietz et al., 2021). For instance, neglect and abuse during childhood predict later life violent attitudes and behaviors, pointing to an intergenerational transmission of risk (Goodman et al., 2017; Goodman et al., 2019). Moreover, studies conducted in diverse contexts—including Kenya (Goodman et al., 2017; Goodman et al., 2019), Tanzania (Zietz et al., 2021), and South America (Ludermir et al., 2017)—demonstrate that childhood maltreatment is a cross-cultural determinant of IPV involvement, either as victim or perpetrator.

The mechanisms underlying this connection, however, require deeper exploration. Attachment theory provides a compelling framework for understanding how early neglect may translate into adult relational vulnerabilities. Insecure attachment orientations, and specifically attachment anxiety, are characterized by fear of abandonment, hyperactivation of emotional responses, and dependence on others for validation (Ørke et al., 2021; Sokolova & Bakalova, 2022). Research suggests that individuals with attachment anxiety are more likely to enter and remain in abusive relationships due to heightened sensitivity to relational threats and an overwhelming need for closeness (Iria de la Osa et al., 2022; McClure & Parmenter, 2017).

Empirical evidence supports the mediating role of attachment processes in IPV dynamics. For example, studies of men convicted of IPV show strong associations between childhood maltreatment, insecure attachment styles, and aggression (Brassard et al., 2022; Iria de la Osa et al., 2022). Women victimized by IPV also frequently exhibit anxious attachment tendencies, linking their early relational experiences with later vulnerability to victimization (Ørke et al., 2021). This underscores the necessity of examining attachment anxiety not merely as a correlational factor, but as a potential mediator in the childhood neglect–IPV victimization pathway.

The significance of this mediating mechanism is evident in research addressing psychological well-being and interpersonal functioning. Abe and colleagues (Abe et al., 2021) highlighted that ACEs combined with partner abuse predict antenatal depression, reinforcing how cumulative vulnerabilities shape relational and emotional outcomes. Similarly, Cunha and colleagues (Cunha et al., 2024) demonstrated that psychopathy partially mediates the relationship between childhood IPV exposure and adult IPV perpetration, supporting the broader idea that psychological constructs serve as mediators in the violence cycle. In this study, attachment anxiety is proposed as a specific and theoretically grounded mediator between childhood neglect and IPV victimization.

Understanding IPV requires situating it within broader psychosocial and structural contexts. Economic, cultural, and gender-related factors intersect with individual vulnerabilities to sustain cycles of violence (Doyle & Aizer, 2018; Thomas, 2017). For instance, Doyle and Aizer (Doyle & Aizer, 2018) emphasized the economic costs of child maltreatment and its downstream link to IPV, while Sutton and Álvarez (Sutton & Álvarez, 2016) examined societal attitudes that normalize violence in Caribbean homes, reinforcing how cultural beliefs shape both victimization and perpetration. Thus, while attachment anxiety is critical at the individual level, societal-level factors also compound vulnerability.

IPV is not limited to adulthood; its antecedents and manifestations span developmental stages. Adolescents exposed to IPV or maltreatment show impaired psychological well-being and are more likely to reproduce violence in dating contexts (Genç, 2021; Stover et al., 2018). In fact, Celsi and colleagues (Celsi et al., 2021) linked ACEs to maladaptive schemas and cyber dating abuse among youth, indicating that relational dysfunction manifests even in digital interactions. These findings stress the importance

of examining attachment anxiety as a developmental bridge between early neglect and later relationship problems.

The health consequences of IPV victimization are also well documented. For women, IPV during pregnancy has been associated with heightened risk of depression, anxiety, and diminished psychological well-being (Ahmed et al., 2024; Ludermir et al., 2017; Teixeira et al., 2015). IPV exposure further exacerbates risks for suicidal ideation, particularly among sexual minority groups (Cavanaugh & Wismar, 2024). Thus, investigating risk mechanisms such as attachment anxiety holds not only theoretical importance but also practical implications for prevention and intervention efforts in healthcare and social service settings.

Further, attachment anxiety as a mediator aligns with criminological and control theory perspectives. Gottfredson and Nielsen (Gottfredson & Nielsen, 2024) argued that IPV and femicide must be considered within general theories of self-control, highlighting how deficient control mechanisms, often rooted in adverse childhood environments, predispose individuals to victimization or perpetration. Similarly, Webermann and Murphy (Webermann & Murphy, 2018) illustrated the role of dissociation in IPV, linking trauma to relational dysfunctions. These frameworks converge in supporting the need to test mediational models involving psychological constructs such as attachment anxiety.

Intergenerational patterns of violence also illustrate the relevance of attachment anxiety. Goodman and colleagues (Goodman et al., 2017) showed that witnessing IPV during childhood predicted violent attitudes in adulthood, reinforcing the cyclical nature of violence. Teitelman and colleagues (Teitelman et al., 2016) further found that childhood sexual abuse and sociodemographic factors were prospectively associated with later IPV perpetration among men, underscoring how early relational deficits evolve into adult maladjustments. McClure and Parmenter (McClure & Parmenter, 2017) highlighted that childhood trauma and anxious attachment jointly predicted IPV among college students, aligning closely with the current study's mediational framework.

Despite extensive scholarship, research has often focused either on childhood neglect or on IPV victimization independently, with fewer studies explicitly integrating attachment anxiety as a mediating mechanism. Yet, evidence suggests that attachment anxiety may explain why some individuals with histories of neglect are particularly vulnerable to abusive relationships. For instance, Ørke and colleagues (Ørke et al., 2021) demonstrated that women with multiple IPV experiences had more pronounced attachment

insecurities than those with no IPV history, while Sokolova and Bakalova (Sokolova & Bakalova, 2022) provided evidence that attachment theory directly applies to understanding IPV experiences.

The current study addresses this gap by testing a mediation model in which childhood neglect predicts IPV victimization through attachment anxiety.

2. Methods and Materials

2.1. Study Design and Participants

This study employed a descriptive correlational design to examine the mediating role of attachment anxiety in the relationship between childhood neglect and intimate partner violence (IPV) victimization. The study population consisted of adults currently or previously involved in intimate relationships, residing in Canada. Based on the guidelines of the Morgan and Krejcie table for determining adequate sample sizes, 412 participants were selected through convenience sampling. Inclusion criteria required participants to be at least 18 years old, able to provide informed consent, and to have experienced at least one intimate relationship. Participants completed standardized self-report questionnaires measuring intimate partner violence victimization, attachment anxiety, and childhood neglect. Ethical approval was obtained prior to data collection, and all participants were assured of confidentiality and anonymity.

2.2. Measures

The Revised Conflict Tactics Scales (CTS2), developed by Straus, Hamby, Boney-McCoy, and Sugarman in 1996, is one of the most widely used instruments for assessing intimate partner violence victimization. The CTS2 includes 78 items divided into five subscales: Negotiation, Psychological Aggression, Physical Assault, Sexual Coercion, and Injury. Respondents indicate how often they have experienced each behavior within a specified time frame using an 8-point Likert scale ranging from 0 (never) to 6 (more than 20 times), with an additional option for "not in the past year, but it happened before." Higher scores indicate greater frequency of intimate partner violence victimization. Numerous studies across diverse populations have confirmed the scale's reliability, with Cronbach's alpha coefficients for subscales typically above 0.70, and strong evidence of construct validity, making the CTS2 a standard and robust tool in IPV research.

Attachment anxiety was measured using the Experiences in Close Relationships–Revised (ECR-R) questionnaire, developed by Fraley, Waller, and Brennan in 2000. The ECR-R is a 36-item self-report instrument designed to assess two core dimensions of adult attachment: Attachment Anxiety and Attachment Avoidance. Each item is rated on a 7-point Likert scale ranging from 1 (strongly disagree) to 7 (strongly agree). The Attachment Anxiety subscale includes 18 items that assess fear of rejection, excessive need for approval, and worry about abandonment in intimate relationships. Higher scores indicate greater levels of attachment anxiety. The ECR-R has demonstrated excellent psychometric properties, with internal consistency coefficients for the anxiety dimension typically above 0.90, and strong convergent and discriminant validity across multiple studies, making it a reliable and valid measure for adult attachment research.

Childhood neglect was assessed using the Childhood Trauma Questionnaire–Short Form (CTQ-SF), developed by Bernstein and colleagues in 1994 and later refined in 2003. The CTQ-SF is a 28-item retrospective self-report inventory designed to measure five domains of childhood maltreatment: Emotional Abuse, Physical Abuse, Sexual Abuse, Emotional Neglect, and Physical Neglect. Each item is rated on a 5-point Likert scale ranging from 1 (never true) to 5 (very often true). The Emotional Neglect and Physical Neglect subscales, each containing 5 items, specifically capture the extent of neglect experiences during childhood. Higher scores reflect more severe neglect. The CTQ-SF has demonstrated high internal consistency, with Cronbach’s alpha values ranging from 0.79 to 0.94 across subscales, and extensive evidence supports its criterion-related and construct validity in both clinical and non-clinical

populations, confirming its utility as a standard instrument for measuring childhood neglect.

2.3. *Data analysis*

Data analysis was conducted using SPSS version 27 and AMOS version 21. First, descriptive statistics, including means, standard deviations, frequencies, and percentages, were computed to summarize demographic and study variables. Pearson correlation analysis was then performed to examine the bivariate relationships between intimate partner violence victimization, attachment anxiety, and childhood neglect. Subsequently, Structural Equation Modeling (SEM) was applied using AMOS to test the hypothesized mediation model, assessing both direct and indirect effects. Model fit was evaluated using multiple indices, including the Chi-square statistic, Comparative Fit Index (CFI), Tucker–Lewis Index (TLI), and Root Mean Square Error of Approximation (RMSEA).

3. **Findings and Results**

Of the 412 participants, 248 (60.2%) identified as female and 164 (39.8%) as male. The mean age of participants was 32.7 years (SD = 8.4), with ages ranging from 18 to 54 years. Regarding marital status, 183 participants (44.4%) reported being single, 149 (36.2%) were married, 57 (13.8%) were divorced, and 23 (5.6%) were widowed. Educational attainment varied, with 101 participants (24.5%) having completed high school, 163 (39.6%) holding a bachelor’s degree, 102 (24.8%) possessing a master’s degree, and 46 (11.2%) having doctoral or professional degrees. The majority of participants (n = 291; 70.6%) reported being employed, while 121 (29.4%) indicated they were unemployed or not currently in the workforce.

Table 1

Descriptive Statistics for Study Variables (N = 412)

Variable	M	SD	Min	Max
Childhood Neglect (CTQ-SF)	42.37	8.52	28	65
Attachment Anxiety (ECR-R)	74.63	15.28	36	120
IPV Victimization (CTS2)	56.84	14.96	20	92

The descriptive statistics in [Table 1](#) show that the mean score for childhood neglect was 42.37 (SD = 8.52), suggesting a moderate level of neglect experiences in the sample. Attachment anxiety demonstrated a mean score of 74.63 (SD = 15.28), indicating that participants generally reported elevated anxious attachment tendencies. IPV

victimization had a mean of 56.84 (SD = 14.96), reflecting a considerable prevalence of victimization experiences. The ranges of scores were consistent with the measurement scales used, showing sufficient variability for analysis.

Prior to conducting correlation and SEM analyses, statistical assumptions were examined and confirmed.

Normality was assessed through skewness and kurtosis indices, which ranged between -0.94 and +0.87, well within the acceptable threshold of ± 2 . Linearity and homoscedasticity were evaluated through scatterplots, which showed no violation of assumptions. Multicollinearity was tested using Variance Inflation Factor (VIF), with values ranging from 1.21 to 2.18, all below the

recommended cutoff of 5. Additionally, the Kaiser–Meyer–Olkin (KMO) measure of sampling adequacy was 0.91, indicating that the data were suitable for factor analysis, and Bartlett’s test of sphericity was significant ($\chi^2 = 4287.53, p < .001$), confirming sufficient inter-item correlations. These results supported the appropriateness of the data for correlation and structural equation modeling procedures.

Table 2

Pearson Correlation Coefficients Among Study Variables (N = 412)

Variable	1	2	3
1. Childhood Neglect	—		
2. Attachment Anxiety	.46** (p < .001)	—	
3. IPV Victimization	.39** (p < .001)	.52** (p < .001)	—

As shown in Table 2, childhood neglect was significantly and positively correlated with both attachment anxiety ($r = .46, p < .001$) and IPV victimization ($r = .39, p < .001$). Attachment anxiety also demonstrated a strong positive correlation with IPV victimization ($r = .52, p < .001$). These

results support the hypothesized associations, suggesting that higher childhood neglect relates to greater attachment anxiety, which is in turn associated with increased IPV victimization.

Table 3

Fit Indices for the Structural Equation Model

Fit Index	Value	Recommended Threshold
χ^2	184.72	—
df	92	—
χ^2/df	2.01	< 3.00
GFI	.94	$\geq .90$
AGFI	.91	$\geq .90$
CFI	.96	$\geq .95$
TLI	.95	$\geq .95$
RMSEA	.049	$\leq .06$

Table 3 shows that the proposed structural model demonstrated excellent fit to the data. The chi-square statistic was 184.72 with 92 degrees of freedom, yielding a χ^2/df ratio of 2.01, which is within the recommended threshold. The GFI (.94) and AGFI (.91) exceeded .90, while

the CFI (.96) and TLI (.95) reached or exceeded the recommended .95 threshold, indicating very good model fit. The RMSEA value of .049 also fell below the cutoff of .06, confirming the adequacy of the model.

Table 4

Total, Direct, and Indirect Path Coefficients in the Structural Model

Path	b	SE	β	p
Childhood Neglect → Attachment Anxiety	0.82	0.11	.46	< .001
Attachment Anxiety → IPV Victimization	0.52	0.08	.41	< .001
Childhood Neglect → IPV Victimization (direct)	0.31	0.09	.22	< .01
Childhood Neglect → IPV Victimization (indirect via Attachment Anxiety)	0.43	0.07	.19	< .001
Childhood Neglect → IPV Victimization (total effect)	0.74	0.10	.41	< .001

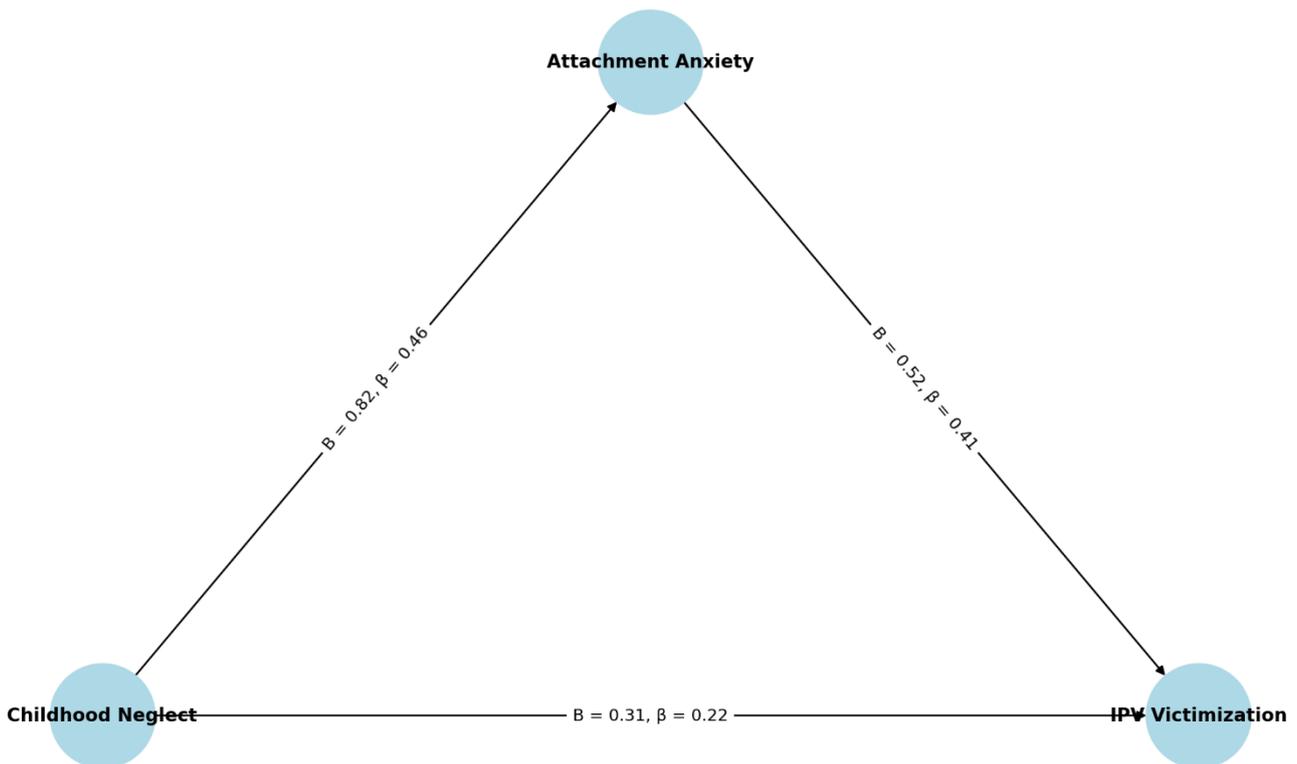
Table 4 indicates that childhood neglect significantly predicted attachment anxiety ($b = 0.82, \beta = .46, p < .001$). In turn, attachment anxiety strongly predicted IPV victimization ($b = 0.52, \beta = .41, p < .001$). Childhood neglect also directly predicted IPV victimization ($b = 0.31, \beta = .22, p < .01$), though the indirect effect via attachment anxiety (b

$= 0.43, \beta = .19, p < .001$) was stronger. The total effect of childhood neglect on IPV victimization ($b = 0.74, \beta = .41, p < .001$) confirms that attachment anxiety partially mediated the relationship, highlighting its critical role in the pathway from early neglect to adult IPV victimization.

Figure 1

Model with Beta Coefficients

Structural Model of Childhood Neglect, Attachment Anxiety, and IPV Victimization



4. Discussion and Conclusion

The findings of this study provide important insights into the mechanisms linking childhood neglect with intimate partner violence (IPV) victimization in adulthood. Results indicated that childhood neglect significantly predicted IPV victimization, consistent with an extensive body of evidence showing that adverse childhood experiences are powerful risk factors for future violence involvement (Goodman et al., 2019; Widom, 2017; Zietz et al., 2021). More critically, this study confirmed the mediating role of attachment anxiety, demonstrating that individuals with histories of neglect are more likely to develop anxious attachment orientations, which subsequently increase their vulnerability to IPV victimization. This finding aligns with theoretical

perspectives from attachment theory and developmental psychopathology that emphasize the enduring effects of early relational deprivation on adult interpersonal functioning (Ørke et al., 2021; Sokolova & Bakalova, 2022).

The significance of these results lies in their ability to explain why some individuals exposed to neglect are particularly susceptible to abusive intimate relationships. Neglect disrupts the development of secure attachment bonds in childhood, often fostering hypervigilance to abandonment and heightened dependency needs. These tendencies, captured in the construct of attachment anxiety, may compel victims to remain in harmful relationships despite experiencing abuse. Consistent with this pathway, prior research has shown that anxious attachment mediates

the relationship between childhood trauma and relational dysfunction (Iria de la Osa et al., 2022; McClure & Parmenter, 2017). By empirically verifying this mediational process, the present study extends previous findings and underscores attachment anxiety as a central mechanism of IPV vulnerability.

The direct link observed between childhood neglect and IPV victimization corroborates numerous studies highlighting the long-term impacts of early maltreatment. Widom (Widom, 2017) documented the enduring effects of abuse and neglect on later crime and violence, illustrating the persistence of vulnerability across the life span. Similarly, Goodman and colleagues (Goodman et al., 2017) found that neglect, sexual abuse, and witnessing IPV in childhood predicted later violent attitudes, demonstrating the intergenerational transmission of violence risk. Zietz et al. (Zietz et al., 2021) further observed in Tanzanian men that ACEs contributed directly to later interpersonal violence perpetration. Together, these findings suggest that neglect constitutes a critical antecedent of victimization pathways, both by fostering maladaptive relational expectations and by shaping broader attitudes toward violence.

The current results are also consistent with Abajobir et al. (Abajobir et al., 2016), who used birth cohort data to establish links between childhood maltreatment and IPV victimization in young adulthood. Their findings highlighted that substantiated neglect cases significantly elevated risk, echoing the associations documented here. Doyle and Aizer (Doyle & Aizer, 2018) emphasized that maltreatment carries not only psychological costs but also socioeconomic burdens, reinforcing the broader societal importance of addressing early neglect to disrupt cycles of IPV.

The central contribution of this study lies in confirming the mediating role of attachment anxiety. Individuals with high levels of attachment anxiety often display an excessive need for reassurance, hypersensitivity to rejection, and difficulty disengaging from abusive partners (Ørke et al., 2021; Sokolova & Bakalova, 2022). The mediation analysis demonstrated that neglect predicted higher attachment anxiety, which in turn was associated with IPV victimization. This aligns with McClure and Parmenter (McClure & Parmenter, 2017), who showed that childhood trauma and anxious attachment jointly predicted IPV in college populations, suggesting that attachment anxiety transmits the effects of early adversity into adult relational outcomes.

Evidence from offender populations further supports the mediational model. Brassard and colleagues (Brassard et al.,

2022) reported that romantic attachment insecurities, in combination with psychopathy, predicted IPV perpetration severity. Similarly, Iria de la Osa et al. (Iria de la Osa et al., 2022) found that insecure attachment styles and child maltreatment histories were strongly related to aggression among men convicted of IPV. These findings from perpetrators mirror the pathways identified among victims, emphasizing that attachment insecurity is central to understanding both sides of the violence cycle.

Cunha and colleagues (Cunha et al., 2024) also highlighted the importance of psychological mediators, demonstrating that psychopathy mediated the relationship between childhood IPV exposure and adult perpetration. While their study focused on psychopathy, the broader principle—that psychological constructs bridge early adversity and later violence—is consistent with the current study's findings regarding attachment anxiety. Similarly, Webermann and Murphy (Webermann & Murphy, 2018) showed that childhood trauma predicted dissociative IPV, further reinforcing that psychological mechanisms are critical links between early adversity and adult violence.

The findings also resonate with the literature documenting the adverse health consequences of IPV victimization. For instance, Ahmed and colleagues (Ahmed et al., 2024) demonstrated that IPV during pregnancy predicted poorer postpartum psychological well-being, while Ludermir et al. (Ludermir et al., 2017) found that family violence experiences increased the likelihood of IPV during pregnancy. These studies highlight how IPV compounds vulnerabilities, especially for women during sensitive life stages. Cavanaugh and Wismar (Cavanaugh & Wismar, 2024) further illustrated that interpersonal violence elevated suicide risk among bisexual women, underscoring the severe psychological toll of IPV. By establishing attachment anxiety as a predictor of IPV vulnerability, the present study suggests a pathway through which early neglect and adult relational dynamics contribute to these broader health risks.

Moreover, research highlights that IPV is not limited to physical abuse but encompasses psychological, sexual, and economic dimensions. Teixeira and colleagues (Teixeira et al., 2015) framed IPV against pregnant women within nursing theory, emphasizing the environmental and relational contexts that exacerbate its effects. Teitelman et al. (Teitelman et al., 2016) prospectively linked childhood sexual abuse to later IPV perpetration, highlighting developmental continuities. The current study's findings thus integrate with this broader body of work by clarifying

how neglect fosters relational insecurities that elevate risk for multifaceted victimization experiences.

From a theoretical perspective, these findings align with Gottfredson and Nielsen's (Gottfredson & Nielsen, 2024) modern control theory framework, which emphasizes the role of self-control deficits in violence involvement. Childhood neglect, by undermining the development of emotional regulation and attachment security, may create deficits akin to poor self-control, leaving individuals vulnerable to coercive or abusive dynamics. Sutton and Álvarez (Sutton & Álvarez, 2016) further demonstrated how cultural attitudes normalize violence, creating environments where attachment insecurities can manifest in victimization. Taken together, these perspectives underscore the interplay of individual, relational, and cultural processes in sustaining cycles of IPV.

5. Limitations & Suggestions

Although the findings of this study contribute significantly to the understanding of IPV dynamics, several limitations should be acknowledged. First, the cross-sectional design limits causal inference. While the mediation model suggests a directional pathway from neglect to IPV through attachment anxiety, longitudinal data would provide stronger evidence of temporal precedence (Abajobir et al., 2016). Second, the study relied on self-report questionnaires, which are subject to recall bias and social desirability effects, especially when reporting sensitive issues such as neglect and IPV (Goodman et al., 2019). Third, the sample was drawn from Canadian participants, which may limit generalizability to different cultural or socioeconomic contexts where relational norms and IPV prevalence differ (Sutton & Álvarez, 2016; Zietz et al., 2021). Additionally, while attachment anxiety was examined as a mediator, other psychological mechanisms such as maladaptive schemas (Celsi et al., 2021), dissociation (Webermann & Murphy, 2018), or psychopathy (Cunha et al., 2024) were not included, potentially oversimplifying the complexity of IPV risk pathways.

Future studies should adopt longitudinal and multi-wave designs to clarify the causal sequence linking neglect, attachment anxiety, and IPV victimization. Prospective studies similar to those conducted by Teitelman et al. (Teitelman et al., 2016) and Abajobir et al. (Abajobir et al., 2016) would allow for testing developmental pathways with greater temporal validity. Expanding research to diverse cultural contexts is also essential, as highlighted by studies

in Kenya (Goodman et al., 2017), Tanzania (Zietz et al., 2021), and Brazil (Ludermir et al., 2017), which demonstrate how sociocultural factors intersect with attachment processes. Moreover, future research should investigate multiple mediators simultaneously, including maladaptive schemas, dissociation, or self-control deficits, to build more comprehensive models of IPV vulnerability (Celsi et al., 2021; Gottfredson & Nielsen, 2024; Webermann & Murphy, 2018). Finally, incorporating biological or neurodevelopmental measures could enrich understanding of how early neglect shapes emotional regulation systems that contribute to attachment anxiety and IPV risk.

The findings have several implications for practice. Interventions aimed at preventing IPV should consider screening for histories of childhood neglect and assessing attachment anxiety as part of risk evaluation. Clinicians working with survivors of IPV may benefit from integrating attachment-based therapeutic approaches that address anxious relational patterns and strengthen autonomy. Educational and prevention programs can incorporate psychoeducation about attachment dynamics, empowering individuals to recognize maladaptive relational tendencies that increase vulnerability. Furthermore, policymakers and service providers should invest in early childhood support systems to prevent neglect and strengthen caregiver-child attachment bonds, thereby reducing long-term IPV risk. Interventions across health, social service, and justice sectors should adopt a trauma-informed lens that accounts for the enduring effects of early neglect on adult victimization experiences.

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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 equally contributed in this article.

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