

# The Relationship Between Childhood Trauma and Personality Traits with Attitudes Toward Childbearing in Married Women Aged 25–45

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## Article Info

### Article type:

Original Research

### How to cite this article:

Dastani Hossein Abadi, H., Shirinzadeh, S., Poursalehy, M., & Mollazadeh, A. (2026). The Relationship Between Childhood Trauma and Personality Traits with Attitudes Toward Childbearing in Married Women Aged 25–45. *Psychology of Woman Journal*, 7(4), 1-10.

<http://dx.doi.org/10.61838/kman.pwj.5252>



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## ABSTRACT

**Objective:** The present study aimed to examine the relationship between childhood trauma and personality traits with attitudes toward childbearing in married women aged 25–45.

**Methods and Materials:** This study employed a fundamental, descriptive–correlational design. The statistical population consisted of married women aged 25–45 who referred to psychological clinics and mental health centers in districts 1 to 5 of Tehran. A sample of 222 participants was selected using a convenience sampling method, based on recommended sample sizes for correlational research and considering potential attrition. Data were collected using the Attitudes Toward Fertility and Childbearing Scale (AFCS), the Childhood Trauma Questionnaire (CTQ), and the short form of the Five-Factor Personality Inventory (NEO-FFI). Data analysis was conducted using SPSS version 27 at both descriptive and inferential levels, including Pearson correlation coefficients and simultaneous multiple regression analysis to examine relationships and predictive power among variables.

**Findings:** The results indicated that emotional abuse ( $r = -0.19$ ,  $p < 0.01$ ) and emotional neglect ( $r = -0.16$ ,  $p < 0.05$ ) were significantly and negatively correlated with attitudes toward childbearing, whereas other trauma dimensions showed non-significant relationships. Among personality traits, extraversion ( $r = 0.26$ ,  $p < 0.01$ ), openness to experience ( $r = 0.17$ ,  $p < 0.01$ ), and agreeableness ( $r = 0.22$ ,  $p < 0.01$ ) demonstrated significant positive correlations with attitudes toward childbearing. The results of multiple regression analysis revealed that extraversion ( $\beta = 0.15$ ,  $p = 0.046$ ) and openness to experience ( $\beta = 0.13$ ,  $p = 0.040$ ) significantly predicted attitudes toward childbearing, while childhood trauma variables did not show significant predictive effects in the presence of personality traits. The overall regression model was statistically significant ( $F = 5.49$ ,  $p < 0.01$ ) and explained 11% of the variance in attitudes toward childbearing.

**Conclusion:** The findings suggest that while certain dimensions of childhood trauma, particularly emotional forms, are associated with less favorable attitudes

toward childbearing, personality traits—especially extraversion and openness to experience—play a more prominent role in predicting these attitudes. These results highlight the importance of considering both developmental experiences and stable personality characteristics in understanding reproductive attitudes and suggest that psychological interventions aimed at enhancing adaptive personality traits may contribute to more positive perspectives on childbearing.

**Keywords:** *Childhood trauma, personality traits, attitudes toward childbearing, extraversion, openness to experience, married women*

## 1. Introduction

Attitudes toward childbearing have emerged as a central construct in contemporary demographic, psychological, and sociocultural research, particularly in societies undergoing rapid transitions in family structure, fertility patterns, and gender roles. In recent decades, declining fertility rates and shifts in reproductive intentions have drawn attention to the psychological and contextual determinants of individuals' attitudes toward having children. These attitudes are not merely individual preferences but are shaped by a complex interplay of personal experiences, personality dispositions, sociocultural norms, and early developmental factors. Empirical evidence suggests that attitudes toward childbearing are significantly associated with broader orientations toward marriage, family formation, and life satisfaction, highlighting their importance as predictors of reproductive behavior (Cheng & Yang, 2021; Fiskin & Sari, 2021). In this regard, understanding the underlying psychological mechanisms that contribute to favorable or unfavorable attitudes toward childbearing is essential for both theoretical advancement and policy development.

From a sociocultural perspective, prior studies have emphasized the role of structural and contextual variables such as socioeconomic status, cultural capital, lifestyle patterns, and social expectations in shaping reproductive attitudes. For instance, research conducted in Iranian contexts has shown that components of social and cultural capital significantly influence individuals' readiness for childbearing and their perceptions of its desirability (Kaveh Firouz et al., 2017). Similarly, lifestyle-related factors, including consumption patterns, work–family balance, and modern value orientations, have been found to impact women's attitudes toward fertility, often leading to postponement or reduced desire for childbearing (Kaveh Firouz et al., 2016). Moreover, qualitative investigations into

population policies suggest that young individuals' attitudes toward childbearing are closely tied to perceived economic security, social support, and future prospects, indicating that psychological evaluations of life conditions play a critical role in reproductive decision-making (Bakhani, 2022). While these studies provide valuable insights into external determinants, they often overlook deeper intrapsychic and developmental influences that may fundamentally shape attitudes toward parenthood.

In recent years, increasing attention has been directed toward the role of early life experiences, particularly childhood trauma, in shaping adult psychological functioning and interpersonal attitudes. Childhood trauma, encompassing experiences such as emotional abuse, physical abuse, sexual abuse, and neglect, has been consistently linked to a wide range of maladaptive outcomes, including emotional dysregulation, impaired attachment, and distorted self-concept (Knapen et al., 2025; Kühner et al., 2025). These early adverse experiences disrupt normative developmental processes, particularly in domains related to trust, intimacy, and caregiving expectations. For example, exposure to childhood maltreatment has been associated with difficulties in forming secure attachments and developing stable interpersonal relationships in adulthood (Wang, 2024). Such disruptions may directly influence individuals' attitudes toward parenting and childbearing, as these attitudes are inherently connected to beliefs about relationships, caregiving competence, and emotional investment.

Furthermore, trauma-informed frameworks suggest that individuals with a history of childhood adversity may develop maladaptive cognitive schemas and emotional responses that shape their perceptions of family life. These schemas often involve expectations of rejection, instability, or harm, which may reduce the perceived desirability of parenthood or increase ambivalence toward having children. Empirical findings support this perspective, demonstrating

that childhood trauma is associated with higher levels of psychological distress, including depressive symptoms, dissociation, and personality pathology (Bateman et al., 2024; Zhong et al., 2024). Additionally, trauma has been shown to influence the development of borderline personality features, which are characterized by instability in relationships, identity, and affect regulation (Riemann et al., 2024). Such personality-related vulnerabilities may further mediate the relationship between early trauma and attitudes toward childbearing, highlighting the importance of considering both direct and indirect pathways.

In parallel, personality traits have been identified as significant predictors of attitudes and behaviors across various life domains, including family formation and reproductive decision-making. The Five-Factor Model of personality provides a comprehensive framework for understanding individual differences in emotional, cognitive, and behavioral tendencies. Traits such as extraversion, openness to experience, agreeableness, conscientiousness, and neuroticism have been linked to diverse outcomes related to social relationships, well-being, and life satisfaction. Research indicates that personality traits influence not only how individuals perceive and interpret their experiences but also how they approach long-term commitments such as marriage and parenthood (Bektaş, 2025). For example, extraverted individuals may exhibit more positive attitudes toward childbearing due to their sociability and tendency to seek interpersonal engagement, whereas individuals high in neuroticism may demonstrate more negative attitudes due to heightened anxiety and emotional instability.

The interaction between childhood trauma and personality traits represents a particularly important area of investigation. Developmental theories suggest that early adverse experiences can shape personality development, leading to enduring patterns of behavior and emotional regulation. Studies have shown that childhood trauma is significantly associated with alterations in personality structure, including increased neuroticism and decreased agreeableness and conscientiousness (Sepahvand et al., 2025; Zarei Norouzi et al., 2024). Moreover, trauma-related disruptions in mentalizing and reflective functioning can impair individuals' ability to understand their own and others' mental states, thereby influencing interpersonal attitudes and expectations (Knapen et al., 2025). These findings suggest that personality traits may serve as both outcomes of early trauma and mediators in the relationship

between trauma and later attitudes toward family and childbearing.

Despite the growing body of research on the psychological consequences of childhood trauma and the role of personality traits in shaping behavior, relatively limited attention has been paid to their combined effects on attitudes toward childbearing, particularly among married women in reproductive age. Most existing studies have examined these variables in isolation or within clinical populations, leaving a gap in understanding how they jointly influence reproductive attitudes in non-clinical, community-based samples. Additionally, cultural context plays a crucial role in shaping both the expression of personality traits and the interpretation of early experiences, necessitating context-specific investigations. In societies where family formation and childbearing are highly valued, the impact of psychological variables may manifest differently compared to more individualistic contexts.

Moreover, contemporary changes in gender roles, economic pressures, and societal expectations have introduced new complexities into the decision-making processes surrounding childbearing. Women today often face competing demands related to career development, personal autonomy, and family responsibilities, which may interact with their psychological histories and personality characteristics to shape their reproductive attitudes. Understanding these dynamics requires an integrative approach that considers both developmental and dispositional factors. By examining childhood trauma and personality traits simultaneously, researchers can gain a more comprehensive understanding of the underlying mechanisms that influence attitudes toward childbearing.

Given the theoretical and empirical significance of these variables, the present study seeks to address the existing gap in the literature by investigating the relationship between childhood trauma and personality traits with attitudes toward childbearing in married women aged 25 to 45. This population represents a critical demographic group in terms of reproductive decision-making, as it encompasses individuals who are actively navigating issues related to family formation and fertility. By focusing on this group, the study aims to provide insights that are both theoretically meaningful and practically relevant for policymakers and mental health professionals.

Therefore, the aim of the present study is to examine the relationship between childhood trauma and personality traits with attitudes toward childbearing in married women aged 25–45.

## 2. Methods and Materials

### 2.1. Study design and Participant

The present study was fundamental in terms of its objective and employed a descriptive–correlational design in terms of data collection. The statistical population consisted of women who referred to psychological clinics and mental health centers located in districts 1, 2, 3, 4, and 5 of Tehran. The sampling process was conducted among married women within the age range of 25 to 45 years who sought services from these centers. Considering methodological recommendations for correlational studies, which suggest including approximately 15 to 20 participants per examined relationship, and accounting for the possibility of participant attrition, a final sample size of 222 individuals was determined. Participants were selected using a convenience sampling method, ensuring accessibility and feasibility within the specified clinical settings.

### 2.2. Measures

The Attitudes Toward Fertility and Childbearing Scale (AFCS) was used to assess participants' perspectives regarding fertility and childbearing. This instrument, originally developed by Söderberg et al. (2013), consists of 27 items in its original version and measures three primary dimensions: the importance of fertility for the future, childbearing as a present obstacle, and social identity. The Persian version used in this study includes 23 items and evaluates multiple subcomponents such as viewing children as a central life element, perceiving children as a barrier, postponing fertility to the future, and considering fertility contingent upon prerequisite conditions. Responses are rated on a five-point Likert scale ranging from strongly disagree to strongly agree, with higher scores indicating more positive attitudes toward fertility and childbearing. Some items are reverse-scored to control for response bias. Previous studies have confirmed the factorial structure of the scale and reported acceptable internal consistency, with Cronbach's alpha coefficients ranging from 0.74 to 0.86 across subscales. In the present study, the overall reliability of the scale was calculated at 0.84, indicating satisfactory internal consistency.

The Childhood Trauma Questionnaire (CTQ), developed by Bernstein et al. (2003), was employed to measure adverse childhood experiences. This instrument consists of 28 items, of which 25 assess five domains of childhood maltreatment, including emotional abuse, physical abuse, sexual abuse,

emotional neglect, and physical neglect, while three items function as validity indicators to detect potential denial of trauma. Participants respond using a Likert-type scale, and higher scores indicate greater exposure to traumatic experiences. The CTQ has demonstrated strong psychometric properties in previous research, with Cronbach's alpha coefficients reported as 0.87 for emotional abuse, 0.86 for physical abuse, 0.95 for sexual abuse, 0.89 for emotional neglect, and 0.78 for physical neglect. Concurrent validity has also been supported through correlations with clinician ratings ranging from 0.59 to 0.78. In Iranian samples, reliability coefficients between 0.81 and 0.98 have been reported. In the current study, Cronbach's alpha values for the subscales ranged from 0.75 to 0.90, confirming adequate reliability.

Personality traits were assessed using the short form of the Five-Factor Personality Inventory (NEO-FFI), developed by Costa and McCrae (1990). This instrument includes 60 items measuring five major personality dimensions: neuroticism, extraversion, openness to experience, agreeableness, and conscientiousness, with 12 items allocated to each dimension. The scoring method varies across items, with some items scored in a direct manner and others reverse-scored to minimize response bias. Longitudinal studies have demonstrated acceptable test–retest reliability over extended periods, with coefficients ranging from 0.68 to 0.83 for neuroticism, extraversion, and openness, and from 0.63 to 0.79 for agreeableness and conscientiousness. In the Iranian context, normative studies have reported Cronbach's alpha coefficients ranging from 0.56 to 0.87 across the five dimensions. In the present study, internal consistency coefficients for neuroticism, extraversion, openness, agreeableness, and conscientiousness were calculated as 0.71, 0.76, 0.72, 0.76, and 0.75, respectively, indicating acceptable reliability levels.

### 2.3. Data Analysis

Following data collection, the completed questionnaires were coded and entered into the Statistical Package for the Social Sciences (SPSS), version 27, for analysis. Data analysis was conducted at both descriptive and inferential levels. Descriptive statistics included frequency distributions, percentages, means, and standard deviations to summarize the characteristics of the variables. At the inferential level, statistical analyses included the Durbin–Watson test to assess the independence of residuals, Pearson

correlation coefficients to examine relationships among variables, and simultaneous multiple regression analysis to determine the predictive power of childhood trauma and personality traits on attitudes toward childbearing.

### 3. Findings and Results

The demographic characteristics of the participants indicated a diverse distribution across educational levels, number of children, occupation, and income status. In terms of education, the majority of participants held a bachelor’s degree (57%), followed by those with a master’s degree (19%) and a high school diploma (16%), while smaller proportions had lower secondary education (2%), an

associate degree (1%), or a doctoral degree (1%). Regarding the number of children, nearly half of the participants had no children (47.3%), whereas equal proportions reported having one child (23.4%) or two children (23.4%), and a smaller percentage had three children (4.1%), four children (0.9%), or six children (0.9%). In terms of occupational status, the largest group consisted of homemakers (35.6%), followed by individuals with self-employment (31.1%), employees (21.6%), and students (11.8%). Concerning monthly income levels, the majority of participants reported an income between 10 and 20 million (77.5%), while smaller groups reported incomes between 21 and 30 million (11.7%), 31 and 40 million (7.7%), and above 50 million (3.2%).

**Table 1**

*Descriptive Statistics of Research Variables*

Variable	Mean	SD	Min	Max	Skewness	Kurtosis
Attitude toward Childbearing	67.41	13.35	31	99	-0.19	0.14
Emotional Abuse	7.86	3.49	5	21	1.73	2.00
Physical Abuse	6.11	2.36	5	16	1.67	1.82
Sexual Abuse	6.42	2.81	4	25	1.82	1.40
Emotional Neglect	10.56	4.45	5	23	0.78	-0.23
Physical Neglect	7.68	2.82	4	18	1.10	0.69
Neuroticism	36.57	6.12	22	53	0.04	-0.48
Extraversion	39.26	6.84	17	57	-0.22	-0.33
Openness to Experience	38.38	5.14	23	50	0.01	-0.22
Agreeableness	41.12	5.27	25	56	-0.40	0.04
Conscientiousness	45.81	6.25	21	58	-0.50	0.51

The descriptive statistics presented in Table 1 indicate that the mean score for attitude toward childbearing was 67.41 (SD = 13.35), suggesting a moderate to relatively positive attitude among participants. Among childhood trauma components, emotional neglect had the highest mean (M = 10.56, SD = 4.45), followed by emotional abuse (M = 7.86, SD = 3.49) and physical neglect (M = 7.68, SD = 2.82), whereas physical abuse (M = 6.11, SD = 2.36) and sexual abuse (M = 6.42, SD = 2.81) showed comparatively lower means. In terms of personality traits, conscientiousness (M

= 45.81, SD = 6.25) and agreeableness (M = 41.12, SD = 5.27) had the highest mean scores, while neuroticism showed a moderate level (M = 36.57, SD = 6.12). Examination of skewness and kurtosis indices indicates that most variables fall within an acceptable range for normal distribution, although some trauma-related variables such as emotional, physical, and sexual abuse exhibited positive skewness, reflecting a concentration of lower scores with fewer high-value responses. Overall, the data distribution supports the suitability of parametric statistical analyses.

**Table 2**

*Correlation Matrix Between Childhood Trauma and Attitudes Toward Childbearing*

Variable	1	2	3	4	5	6
1. Attitude toward Childbearing	1					
2. Emotional Abuse	-0.19**	1				
3. Physical Abuse	-0.10	0.61**	1			
4. Sexual Abuse	-0.09	0.33**	0.26**	1		
5. Emotional Neglect	-0.16*	0.59**	0.39**	0.23**	1	
6. Physical Neglect	-0.09	0.49**	0.36**	0.17**	0.62**	1

The correlation matrix presented in Table 2 indicates that attitudes toward childbearing are negatively associated with several dimensions of childhood trauma. Specifically, emotional abuse ( $r = -0.19, p < 0.01$ ) and emotional neglect ( $r = -0.16, p < 0.05$ ) show statistically significant negative correlations with attitudes toward childbearing, suggesting that higher levels of these adverse childhood experiences are associated with less favorable attitudes. Other trauma dimensions, including physical abuse ( $r = -0.10$ ), sexual

abuse ( $r = -0.09$ ), and physical neglect ( $r = -0.09$ ), demonstrated negative but non-significant relationships. Additionally, strong positive intercorrelations were observed among trauma variables themselves, particularly between emotional abuse and physical abuse ( $r = 0.61, p < 0.01$ ), emotional neglect and physical neglect ( $r = 0.62, p < 0.01$ ), and emotional abuse and emotional neglect ( $r = 0.59, p < 0.01$ ), indicating a substantial overlap among different forms of childhood maltreatment.

**Table 3**

*Correlation Matrix Between Personality Traits and Attitudes Toward Childbearing*

Variable	1	2	3	4	5	6
1. Attitude toward Childbearing	1					
2. Neuroticism	-0.13	1				
3. Extraversion	0.26**	-0.52**	1			
4. Openness to Experience	0.17**	-0.17**	0.18**	1		
5. Agreeableness	0.22**	-0.52**	0.49**	0.11	1	
6. Conscientiousness	0.02	-0.41**	0.38**	0.15*	0.26**	1

The results presented in Table 3 reveal that attitudes toward childbearing are significantly and positively correlated with several personality traits. Extraversion ( $r = 0.26, p < 0.01$ ), openness to experience ( $r = 0.17, p < 0.01$ ), and agreeableness ( $r = 0.22, p < 0.01$ ) showed significant positive relationships, indicating that individuals with higher levels of these traits tend to have more favorable attitudes toward childbearing. Neuroticism was negatively correlated

with attitudes ( $r = -0.13$ ), although this relationship was not statistically significant. Conscientiousness demonstrated a very weak and non-significant positive correlation ( $r = 0.02$ ). Furthermore, strong intercorrelations were observed among personality traits, such as the negative association between neuroticism and extraversion ( $r = -0.52, p < 0.01$ ) and the positive relationship between extraversion and agreeableness ( $r = 0.49, p < 0.01$ ).

**Table 4**

*Model Summary for Predicting Attitude Toward Childbearing Based on Childhood Trauma and Personality Traits*

R	R <sup>2</sup>	Adjusted R <sup>2</sup>	F
0.33	0.11	0.09	5.49

The results presented in Table 4 indicate that the combined set of predictor variables, including selected dimensions of childhood trauma and personality traits, explains approximately 11% of the variance in attitudes toward childbearing ( $R^2 = 0.11$ ), with an adjusted  $R^2$  of 0.09, suggesting a modest explanatory power after controlling for

model complexity. The multiple correlation coefficient ( $R = 0.33$ ) reflects a moderate relationship between the predictors and the dependent variable. Furthermore, the overall regression model was statistically significant ( $F = 5.49$ ), indicating that the predictors, as a set, reliably contribute to the prediction of attitudes toward childbearing.

**Table 5**

*Regression Coefficients for Predicting Attitude Toward Childbearing*

Model Variables	B	SE	$\beta$	t	p
Constant	36.10	10.12	—	3.56	0.001
Emotional Abuse	-0.34	0.32	-0.08	-1.06	0.288
Emotional Neglect	-0.11	0.24	-0.04	-0.50	0.620
Extraversion	0.29	0.15	0.15	2.00	0.046
Openness to Experience	0.34	0.17	0.13	2.06	0.040
Agreeableness	0.24	0.19	0.10	1.17	0.202

As shown in Table 5, among the predictor variables, extraversion ( $\beta = 0.15$ ,  $t = 2.00$ ,  $p = 0.046$ ) and openness to experience ( $\beta = 0.13$ ,  $t = 2.06$ ,  $p = 0.040$ ) emerged as significant positive predictors of attitudes toward childbearing, indicating that higher levels of these traits are associated with more favorable attitudes. In contrast, emotional abuse ( $\beta = -0.08$ ,  $p = 0.288$ ) and emotional neglect ( $\beta = -0.04$ ,  $p = 0.620$ ) did not significantly predict the dependent variable, despite showing negative coefficients. Similarly, agreeableness ( $\beta = 0.10$ ,  $p = 0.202$ ) was not a statistically significant predictor. The intercept of the model was significant ( $B = 36.10$ ,  $p = 0.001$ ), suggesting a meaningful baseline level of the dependent variable when predictors are held constant. Overall, the findings indicate that certain personality traits, particularly extraversion and openness to experience, play a more prominent role than childhood trauma variables in predicting attitudes toward childbearing in this sample.

#### 4. Discussion

The findings of the present study provide a nuanced understanding of the psychological determinants of attitudes toward childbearing among married women aged 25–45, highlighting the differential roles of childhood trauma and personality traits. The correlational results indicated that certain dimensions of childhood trauma, particularly emotional abuse and emotional neglect, were significantly and negatively associated with attitudes toward childbearing, whereas other forms such as physical and sexual abuse did not show statistically significant relationships. These results suggest that emotionally laden forms of early adversity may exert a more enduring influence on reproductive attitudes compared to more overt or episodic forms of maltreatment. This pattern can be interpreted within the framework of developmental psychopathology, which posits that chronic emotional invalidation and neglect disrupt the formation of secure attachment and internal working models, thereby influencing later interpersonal expectations and caregiving attitudes (Knapen et al., 2025; Wang, 2024).

The observed negative association between emotional trauma and attitudes toward childbearing is consistent with prior research indicating that individuals with histories of emotional abuse and neglect often develop maladaptive schemas related to trust, intimacy, and self-worth (Karimi, Hashemi Nosrat-Abad, et al., 2024; Karimi, Hashemi Nosratabad, et al., 2024). These schemas may lead to

ambivalence or reluctance toward assuming parental roles, as parenting inherently involves emotional investment, vulnerability, and responsibility. Furthermore, studies have demonstrated that childhood trauma is linked to increased risk of psychological distress, including depressive symptoms and dissociative experiences, which may further reduce motivation for childbearing (Bateman et al., 2024; Zhong et al., 2024). In this context, the present findings extend the literature by demonstrating that even in a non-clinical sample, subtle variations in emotional trauma are meaningfully associated with reproductive attitudes.

Interestingly, while physical and sexual abuse showed negative correlations with attitudes toward childbearing, these relationships were not statistically significant. One possible explanation is that these forms of trauma, although severe, may have more heterogeneous psychological consequences depending on contextual and individual resilience factors. Additionally, the lower prevalence or reporting of such experiences in the sample may have reduced statistical power. Nonetheless, the significant intercorrelations among all trauma dimensions observed in this study align with previous findings suggesting that different types of childhood maltreatment often co-occur and share underlying etiological mechanisms (Kühner et al., 2025; Riemann et al., 2024). This co-occurrence underscores the importance of considering cumulative trauma exposure when examining its impact on adult attitudes and behaviors.

In contrast to the trauma variables, personality traits demonstrated a more prominent role in predicting attitudes toward childbearing. Specifically, extraversion and openness to experience emerged as significant positive predictors in the regression model, while agreeableness, although positively correlated, did not reach statistical significance. These findings are consistent with the Five-Factor Model literature, which suggests that individuals high in extraversion tend to exhibit greater sociability, positive affect, and engagement with others, all of which are conducive to favorable attitudes toward parenting and family life (Bektaş, 2025). Similarly, openness to experience, characterized by curiosity, flexibility, and receptiveness to new experiences, may facilitate more adaptive and positive perspectives toward the challenges and opportunities associated with childbearing.

The lack of a significant predictive role for neuroticism and conscientiousness in the regression model is noteworthy. Although neuroticism showed a negative correlation with attitudes toward childbearing, this relationship was not statistically significant in the

multivariate context. This finding may reflect the overlapping influence of other personality traits or the relatively moderate levels of neuroticism within the sample. Previous studies have reported mixed results regarding the role of neuroticism in reproductive attitudes, with some suggesting that higher emotional instability may lead to increased anxiety about parenting responsibilities (Fiskin & Sari, 2021). Similarly, conscientiousness, despite being associated with responsibility and planning, did not significantly predict attitudes in this study, which may indicate that cognitive evaluations of readiness for parenting are influenced more by emotional and interpersonal traits than by goal-directed behavior alone.

The regression analysis further revealed that childhood trauma variables did not significantly predict attitudes toward childbearing when personality traits were included in the model. This finding suggests that personality traits may mediate or overshadow the direct effects of early trauma on reproductive attitudes. From a theoretical perspective, this aligns with models proposing that the impact of early adverse experiences is often transmitted through enduring personality characteristics and cognitive-affective processes (Sepahvand et al., 2025; Zarei Norouzi et al., 2024). In other words, while childhood trauma may shape the development of personality traits, it is these traits that more proximally influence attitudes and behaviors in adulthood. This interpretation is further supported by research demonstrating that trauma-related disruptions in mentalizing and reflective functioning can lead to persistent personality vulnerabilities, which in turn affect interpersonal attitudes and decision-making (Knapen et al., 2025).

Another important finding of the study is the relatively modest explanatory power of the regression model, which accounted for approximately 11% of the variance in attitudes toward childbearing. While this indicates that childhood trauma and personality traits are significant contributors, it also suggests that a substantial portion of variance remains unexplained. This underscores the multifactorial nature of reproductive attitudes, which are influenced by a wide range of factors, including socioeconomic conditions, cultural norms, marital satisfaction, and perceived social support. Previous studies have highlighted the importance of these contextual variables, particularly in shaping individuals' readiness and motivation for childbearing (Bakhani, 2022; Karimi, 2021). Therefore, the present findings should be interpreted within a broader ecological framework that considers both individual and environmental influences.

Furthermore, the results of this study are consistent with sociocultural research indicating that attitudes toward childbearing are embedded within broader value systems and life orientations. For example, individuals with more positive attitudes toward marriage and family life are generally more inclined toward childbearing, reflecting the interconnectedness of these constructs (Cheng & Yang, 2021). Similarly, motivations for childbearing have been shown to be influenced by psychological well-being and interpersonal functioning, which are themselves shaped by personality traits and early experiences (Fiskin & Sari, 2021). By integrating these perspectives, the present study contributes to a more comprehensive understanding of the psychological foundations of reproductive attitudes.

## 5. Conclusion

Overall, the findings highlight the importance of considering both developmental and dispositional factors in understanding attitudes toward childbearing. While childhood trauma, particularly emotional forms, is associated with less favorable attitudes, personality traits such as extraversion and openness to experience play a more central role in predicting these attitudes. These results suggest that interventions aimed at promoting positive reproductive attitudes may benefit from addressing both the lingering effects of early trauma and the enhancement of adaptive personality characteristics. Moreover, the study underscores the need for a holistic approach that integrates psychological, social, and cultural dimensions in the analysis of fertility-related attitudes.

## 6. Limitations and Suggestions

The present study has several limitations that should be acknowledged. First, the use of a cross-sectional design limits the ability to draw causal inferences regarding the relationships among childhood trauma, personality traits, and attitudes toward childbearing. Second, the reliance on self-report measures may introduce response biases, including social desirability and recall bias, particularly in the assessment of sensitive experiences such as childhood trauma. Third, the use of convenience sampling from psychological clinics and mental health centers may limit the generalizability of the findings to the broader population of married women. Finally, the relatively low explained variance of the model suggests that other variables not included in the study may play a significant role in shaping attitudes toward childbearing.

Future research should address these limitations by employing longitudinal designs to examine the causal pathways linking childhood trauma, personality development, and reproductive attitudes over time. Additionally, incorporating multi-method assessment approaches, including clinical interviews and observational measures, may enhance the validity of the findings. Future studies should also consider examining the role of mediating and moderating variables, such as attachment styles, marital satisfaction, and social support, to provide a more comprehensive understanding of the mechanisms underlying attitudes toward childbearing. Expanding the sample to include diverse populations across different cultural and socioeconomic contexts would further enhance the generalizability and applicability of the findings.

From a practical perspective, the findings of this study have important implications for mental health professionals and policymakers. Interventions aimed at promoting positive attitudes toward childbearing should consider addressing the psychological outcomes of childhood trauma, particularly emotional abuse and neglect, through therapeutic approaches that enhance emotional regulation and interpersonal functioning. Moreover, programs designed to strengthen adaptive personality traits, such as social engagement and openness to experience, may contribute to more favorable reproductive attitudes. At the policy level, efforts to improve psychological well-being and provide supportive environments for family formation may help address declining fertility rates and promote healthier family dynamics.

### Authors' Contributions

Authors equally contributed to this article.

### Declaration

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

### Transparency Statement

Data are available for research purposes upon reasonable request to the corresponding author.

### Acknowledgments

We would like to express our gratitude to all individuals helped us to do the project.

### Declaration of Interest

The authors report no conflict of interest.

### Funding

According to the authors, this article has no financial support.

### Ethical Considerations

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

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