

Influence of Self-esteem on the link between Emotional Abuse and Obsessive Compulsive Disorder Symptoms among Adolescents

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ABSTRACT

The present study attempted to determine the emotional abuse and symptoms of obsessive-compulsive disorder among adolescents with the moderating role of self-esteem. The sample of 400 male and female adolescents with age range 14 to 18 years ($M = .50$, $SD = .501$) was obtained from various public and private schools and colleges of Rawalpindi through convenience sampling technique. Emotional abuse questionnaire (EAQ) (Momtaz et al., 2022), Rosenberg self-esteem scale (M. Rosenberg, 1965) and Obsessive-Compulsive Inventory– Revised (OCI-R) (Foa, Kozak, Salkovskis, Coles & Amir 1998) were used in the study. Results revealed emotional abuse positively correlated obsessive-compulsive disorder symptoms in adolescents ($\beta = .46, P < .001$). Moreover, self-esteem doesn't significantly moderate the relationship between emotional abuse and obsessive-compulsive disorder symptoms ($b = -0.006$, $p = .101$). This research emphasizes how critical it is to identify emotional abuse and its lasting effects on mental health. When evaluating well-being, mental health practitioners and educators should consider emotional abuse as a critical component, particularly for those who are reluctant to admit its impact. Self-esteem-boosting interventions may lessen its detrimental effects and improve mental health results.

Keywords: Emotional Abuse, Obsessive Compulsive Disorder, Self-Esteem, Adolescents

INTRODUCTION

Adolescence is considered as one of the critical developmental stages which is characterized by extreme social, psychological and biological changes. During this developmental period individuals are prone to environmental stressors which includes different types of abuse, which can especially enhance their mental health orbit (Patton et al., 2016). Among the different types of childhood maltreatment forms, there is paid less attention to emotional abuse instead of its intense and lasting impact on individual's psychological functioning. (Spinazzola et al., 2014). Few teenagers are more receptive to problems of mental health due to their various circumstances of living, stigma or exclusion, discrimination or failure to get support which is of good quality. Sexual origin or minority ethnic, or some other discriminated adolescents are also included, as well as pregnant, or in forced or early marriages; those who are adolescent's parents. Further adolescents with intellectual disabilities, autism spectrum disorder, or some other neurological disorders; adolescents who are prone to fragile and in humanitarian environment; adolescents in orphanages and some other discriminated group of adolescents. (World Health Organization, 2025).

In our society, it's a common practice to punish the children for his or her benefit which is considered a rule to make the child a better person in future. During the childhood, aside from the physical punishment, verbal punishment is a way to induce discipline in child. If this happens at the early life stages, its causes

deep marks may be a child already experiencing that is called emotional abuse. Emotional abuse is one of the unpliant forms of the abuse, which can be fatal for victim's self-esteem and they start to confuse about their real life and insight. From the existing literature there is found a strong relationship between childhood abuse and a wide range of adverse emotional, psychological and behavioral consequences. (Norman et al., 2012; Gilbert et al., 2009).

There are many studies which are primarily depends on cases of abuse which are officially reported or may be on clinical population, which may not depict the full pattern of experiences that are related to the maltreatment happening in the large number of people. (Widom et al., 2004; Fergusson et al., 2000). Therefore, these samples cannot be generalized to the whole population as these samples constitutes the worst cases of abuse. There are various epidemiological studies provided the evidence of the interconnection between abuse or maltreatment and critical health and psychiatric results. (Cromer & Sachs-Ericsson, 2006; Sachs-Ericsson, Blazer, Plant, & Arnow, 2005; Sachs-Ericsson, Kendall-Tackett, & Hernandez, 2007).

Adolescent psychopathology has been repeatedly associated with emotional abuse, which is frequently typified by verbal abuse, humiliation, intimidation, and rejection. According to research, emotional maltreatment in early life can cause permanent changes in cognitive and emotional functioning, making a person more susceptible to anxiety disorders, depression, and obsessive-compulsive symptoms (Norman et al., 2012). Adolescents who experience emotional abuse may internalize their distress, which can result in obsessive behaviors and intrusive thoughts as coping strategies. Research has shown a strong positive correlation between emotional abuse and OCD symptoms, indicating that these early negative experiences may be a factor in the intensity and duration of OCD symptoms (Caldwell et al., 2014). It's possible that the compulsions are an attempt to lessen the powerlessness and worry brought on by recent or continuing abuse.

Self-esteem, which Rosenberg (1965) defines as a person's entire feeling of personal value and self-worth, is a key factor in influencing how teenagers understand and manage emotional situations. One protective element that can lessen the psychological effects of emotional abuse is high self-esteem. By affecting a person's resilience and coping mechanisms, self-esteem may mitigate the association between emotional abuse and the intensity of symptoms in the context of OCD (Sowislo & Orth, 2013). Low self-esteem in adolescents might cause them to internalise abusive experiences more deeply, which can lead to increased degrees of compulsive and obsessive symptoms. On the other hand, those with higher self-esteem might have more psychological resources to fend off the damaging consequences of emotional abuse, which would lessen their susceptibility to pathology linked to OCD.

Traumatic events of childhood have been characterized potentially happenings which are traumatizing and may leave long term harmful effects on health and well-being of individual. They also lead to the most common types of stress which young age of children face in their initial years. Acquisition of OCD symptoms, particularly when combined with additional environmental and hereditary variables. Due to abuse, content of OCD symptoms can alter throughout the childhood and also enhance their severity and frequency (Norman et al., 2012).

In investigating the reasons for emotional abuse, Sharma (2012) examined that psychological symptoms in the emotional abuse context can be prevented by having high sense of self-worth. Furthermore, there are number of different studies which examined the connection between emotional abuse and self-esteem and the results of these studies particularly show youngsters with poorer self-esteem having experience of emotional and attitudinal tendencies (Inuwa, 2020).

Nonetheless, there have been conflicting results from studies on the moderating function of self-esteem. Other research reveal minimal or inconsistent moderating effects, presumably as a result of

methodological discrepancies or sample characteristics (Trzesniewski et al., 2006), while other studies indicate self-esteem considerably buffers the consequences of emotional abuse (Turner et al., 2006). More importantly, despite adolescence being a developmental stage characterized by increased emotional sensitivity and identity formation, there is a dearth of research that explicitly looks at these linkages within the adolescent population (Steinberg, 2014). A notable gap in the literature is highlighted by the paucity of research on emotional abuse, OCD symptoms, and the moderating influence of teenage self-esteem. Thus, by examining the interaction of these factors in a non-clinical adolescent sample empirically, this study seeks to close that gap.

The objective of this study is to examine the relationship between emotional abuse and symptoms of obsessive-compulsive disorder (OCD) among adolescents with the moderating role of self esteem.

Emotional abuse

Emotional abuse is considered as a type of interpersonal violence that circumscribe all non- physical acts of distress and aggression inflicted through non- verbal and verbal behaviors. Sometimes it is manipulative, deliberate and used as a method of control. In accordance with the Collins Sroufe's (2000) "Transactional Model," since early childhood experiences have their impact on the present outcomes and also emotional abuse effectuate from the period of infancy may be more disastrous than emotional abuse during maturity. According to (Carbone, 2006), early parental abuse can cause deficiencies in interpersonal functioning, which results in hostility and poor relationships with peers.

Self esteem

Self – esteem can be defined as the conviction and ongoing assessment that one is well- known, powerful, prosperous and deserving (Mostafavi, Daniali, & Leila, 2013). Accordingly, the individual who have a high sense of self- worth are ultimately assured of their characteristics and abilities which can increase their well- being overall. In contrast low self esteem results various emotional and behavioral issues, such as violent crime, poor academic performance, substance misuse and rape (Arslan, 2014).

There are several studies which also investigated the relationship between self- esteem and behavioral issues (Arslan, 2014). The findings of these studies demonstrate that those who have more emotional and behavioral issues also liable to have lower level self – esteem. Consequently, for the development of child's self- concept parents can play very crucial role, which in turn able the child to reflect how they view their skills and themselves (Seok, 2008).

Victim of emotional abuse may exhibit marks of low self- worth which in turn results in undesirable attitudes. In some developing countries, various studies conducted that showed the logical association between low self- esteem and mental abuse (Seok, 2008). Conclusion drawn from these surveys demonstrated that victim of emotional abuse had experienced high levels of psychological abuse. A recent study conducted in Nigeria investigated that children are exposed to hard emotional and physical punishment methods by parents who unfortunately have illusory belief that there is no harmful effect of that punishment techniques on their mental health, which is typically associated to low self- esteem. Consequently, in some group including teenagers and college students' low self – esteem enhances the chances of deviant behavior.

Obsessive- compulsive disorder

The hallmarks of obsessive – compulsive disorder are obsessions and compulsions rituals or most frequently both. There exist four characteristics that characterize an obsession: these are characterizes by frequent impulses or persistent thoughts and images which are perceived as intrusive and results in significant anxiety. There are different forms of obsessions which included persistent worries about

whether or not one has switched off electrical appliances or may the door is locked, intrusive thoughts of contamination, unpleasant thoughts of injuring loved ones, and thoughts related to sexually revolting or morality.

Compulsions can be defined as strict rules that the affected person feels compelled to perform in response to obsession. These can be repetitive actions (like checking or ordering , washing hands) or mental acts (like praying , thinking positive thoughts to counteract or replace negative thoughts or counting). Compulsions results in to lessen or avoid the distress or to stop a feared outcome. Obsessive – compulsive disorder has various symptoms which includes different forms of obsessions and compulsions.

Cognitive -behavioral approach is one of the modern model of obsessive- compulsive disorder which has strong empirical background. According to it , set of dysfunctional beliefs is the underlying root cause of developing obsessions and compulsions. A person's tendency to develop these obsessions and compulsions is influenced by the strength of these beliefs. This stereotype has bases on the fact that majority among the general public has the experience to unwelcome the cognitive intrusions that are unpleasant feelings, thoughts and images that enter their mind.

Hypothesis

Following hypothesis were formulated for the study in consistence with the literature review:

H1: There will significant positive relationship between emotional abuse and obsessive – compulsive disorder symptoms in adolescents.

H2: Self-esteem will moderate the relationship between emotional abuse and obsessive-compulsive disorder symptoms among adolescents.

Material and methods

In the present study, cross sectional survey research design was used.

Participants

The participants were 400 adolescents, 200 males and 200 females of age group 14 to 18 years from the public and private schools and colleges of Rawalpindi. Convenience sampling technique was used for the selection of this sample.

Instruments

For those aged 12 and up, a 30-item self-report Emotional Abuse Questionnaire (EAQ) was used. The Emotional Abuse Questionnaire (EAQ), which has subscales for verbal abuse, emotional rejection, overcontrol, inadequate control, over expectation, and terrorizing, can be used to assess all facets of emotional abuse. (Momtaz et al., 2022)

The most popular tool for measuring self-esteem is most likely Rosenberg's Self-Esteem Scale was used. There are ten items on the scale. The scale is 4-point Likert scale ranges from highly agree to strongly disagree.

Obsessive-Compulsive Disorder (OCD) symptoms are measured using the OCI-R, a self-report scale that is a shortened form of the OCD. A 5-point Likert scale is used to rate each of the 18 questions.

Procedure

The authors were asked in writing for permission to use their scales in this study. The principal and vice principal of the government and private schools and colleges were contacted personally by the researcher where data was collected. They were approached within their classroom after obtaining their consent. An explanation of the nature and purpose of the study was provided to them. The participants provided their written consent. For statistical analysis Statistical package for social sciences (SPSS) version 26 was utilized.

RESULTS

The present study was design to assess the relationship between the emotional abuse and obsessive – compulsive disorder symptoms with moderating role of self- esteem in adolescents. Descriptive analysis conducted to analyze variables. Reliability analysis conducted for the assessment measures to check the reliability of variables. Pearson correlation was done to assess the relationship between the study variables. Moderation analysis was performed to analyze the moderating role of self- esteem in study variables.

Table 1
Socio Demographic Characteristics of Participants (N= 400)

Demographic variables	<i>f</i>	%
Gender		
Male	200	50.0
Female	200	50.0
Age		
14 to 16	135	33.8
17 to 18	265	66.3
Birth order		
Eldest	95	23.8
Middle	117	29.3
Youngest	163	40.8
Only child	25	6.3
Family System		
Joint	205	41.2
Nuclear	195	48.8
Socio economic status		
Upper	28	7.0
Middle	338	84.5
Lower	34	8.5

Note: *f* = frequency, % = percentage

The following are the sample's demographic characteristics: There were 50% males (n = 200) and 50% females (n = 200), representing an equal gender distribution. Age-wise, 66.3% were between the ages of 17 and 18 (n = 265), while 33.8% were between the ages of 14 and 16 (n = 135). 23.8% of the children were the oldest (n = 95), followed by the middle kid (n = 117) at 29.3%, the youngest (n = 163) at 40.8%, and the only children (n = 25) at 6.3%. According to the family system, 48.8% of the participants were from nuclear families (n = 195), whereas 41.2% were from joint families (n = 205). The majority of participants (84.5%, n = 338) belonged to the middle class, with 7.0% coming from upper class origins (n = 28) and 8.5% from lower class backgrounds (n = 34).

Table 2

Psychometric properties of study variables (N=400)

Variable	<i>k</i>	<i>α</i>	<i>M(SD)</i>	Range		Skewness	Kurtosis
				Potential	Actual		
Emotional Abuse questionnaire	30	.95	53.3(26.2)	98	.00-98.0	-.63	-.66
Obsessive compulsive inventory-Revised	18	.89	35.3(14.4)	62	.00-62.0	-.71	-.36
Rosenberg Self - Esteem scale	10	.79	12.9(6.0)	23	2.-25.0	.24	-1.0

Note: M= mean, SD = Standard deviation

The study variables' descriptive statistics are displayed in Table 2. The emotional abuse scale, the obsessive -compulsive inventory-revised, and the Rosenberg self-esteem scale all had Cronbach's alpha values of .95, .89, and .79, respectively, indicating sufficient internal consistency. According to George and Mallery (2010), the skewness score of our data falls between +1 and -1, indicating a normal distribution.

Table 3

Pearson Correlation Between Emotional Abuse and Obsessive-Compulsive Inventory Scores (N = 400)

Variables	1	2
1. Emotional Abuse	—	.46**
2. Obsessive-Compulsive Inventory	.46**	—

Note. N = 400. p < .01 (2-tailed).

The association between emotional abuse and obsessive-compulsive disorder symptoms in teenagers was investigated using a Pearson correlation. The findings showed a moderately favorable and statistically significant relationship between obsessive-compulsive symptoms and emotional abuse ($r(398) = .46$, $p < .001$). This implies that adolescents who endure greater emotional abuse are more likely to report having more obsessive-compulsive disorder symptom.

Table 4

Moderating role of self-esteem in the relationship between emotional abuse and obsessive – compulsive disorder symptoms in adolescents (N=400)

	<i>B</i>	<i>SE</i>	<i>t</i>	<i>p</i>	95%CI		<i>R</i>	<i>R</i> ²	<i>F</i>
					LL	Up			
Constant	34.81	.685	50.85	.000	33.47	36.16	.51	.26	48.5
EA(X)	.185	.027	6.81	.000	.131	.238			
SE (M)	-.644	.116	-5.53	.000	-.872	-.415			
Interaction (X*M)	-.006	.004	-1.64	.101	-0.14	.001			

Note: EA= Emotional Abuse; SE=Self esteem

According to Table 4, OCD symptoms were significantly positively impacted by emotional abuse (X), with an increase of 0.185 in OCD symptoms predicted for every unit increase in emotional abuse ($b = 0.185$, $p < .001$). Self-esteem (M) showed a substantial negative impact; obsessive-compulsive disorder symptoms were expected to decrease by 0.644 for every unit rise in self-esteem ($b = -0.644$, $p < .001$). However, the association between emotional abuse and obsessive-compulsive disorder symptoms in this population is not significantly moderated by self-esteem, as indicated by the lack of statistical significance in the interaction between emotional abuse and self-esteem ($X*M$) ($b = -0.006$, $p = .101$).

DISCUSSION

The current study aimed to explore the moderating impact of self-esteem in the association between emotional abuse and obsessive-compulsive disorder in teenagers. The results showed that emotional abuse and obsessive-compulsive disorder symptoms were positively correlated ($r = .46$, $p < .001$). The conclusion was supported by a substantial amount of evidence and literature. The prevalence of childhood maltreatment, such as emotional neglect and physical, sexual, and emotional abuse, was higher among OCD patients who did not respond to therapy than among those who did (Semiz et al., 2014). Those who were abused and neglected as children had more severe symptoms at the beginning and end of treatment than those who were not, according to a small sample of OCD patients. By the end of the course of treatment, both groups had improved, but to the same degree (Fricke et al., 2007). Additionally, compared to the general community, OCD patients had higher rates of childhood maltreatment. Furthermore, OCD symptoms were more severe before, during, and after therapy, as well as at six months, in patients who had greater childhood trauma than in those who did not (Bogers et al., 2020). Childhood traumatic experiences, such as abuse and neglect, have been linked to mental health disorders in later life (Copeland, Shanahan, Hinesley, et al., 2018).

A significant association between CTs and the severity of OCD was identified in some studies (Briggs & Price, 2009; Cromer, Schmidt, & Murphy, 2007), but not in others (Visser et al., 2014; Selvi, Besiroglu et al., 2012). A more recent meta-analysis found that exposure to trauma was associated with the strength of

compulsions but not with the intensity of obsessions (Miller & Brock, 2017). Among the various subtypes of emotional abuse in our sample, verbal abuse had the highest mean ($M=15.13$, $SD=7.63$) score. These subtypes include verbal abuse, emotional rejection, excessive or inadequate control, excessive expectations, and terrorizing. Verbal abuse also encourages obsessive behavior ($M=7.64$, $SD=3.91$) in all symptoms of obsessive-compulsive disorder. The results are consistent with previous research showing that verbal abuse is a direct risk factor for psychopathology. (Allen B, 2008).

The impact of emotional abuse (X) and self-esteem (M) on obsessive compulsive disorder symptoms in teenagers was also investigated in this study, as was the possibility that self-esteem moderates the association between emotional abuse and symptoms of OCD. The findings showed that emotional impairment significantly improved obsessive-compulsive disorder symptoms, our finding suggest it doesn't moderate the relationship between emotional abuse and obsessive-compulsive disorder symptoms which is consistent with earlier research showing that abuses of this nature typically have negative effects on a person (Semiz et al., 2014). The characteristics of obsessive-compulsive disorder symptoms are negatively impacted by self-esteem, suggesting that lower self-esteem may exacerbate the negative effects of emotional abuse. This supports previous research by Johnson (2017), who claims that self-esteem may act as a buffer between negative experiences and their consequences.

However, self-esteem does not significantly mitigate the association between emotional abuse and symptoms of obsessive-compulsive disorder. These results are in contrast to research that suggested self-esteem might operate as a protective factor in mitigating the consequences of emotional abuse, such as those conducted by Anderson (2021) and Williams et al. (2018).

CONCLUSION

In conclusion, the findings of this study confirm a significant positive relationship between emotional abuse and obsessive-compulsive symptoms in adolescents, indicating that higher levels of emotional abuse are associated with increased OCD symptoms. However, contrary to expectations and some prior research, self-esteem did not significantly moderate this relationship. This demonstrates the possibility of self-esteem-boosting treatment techniques as a means of lessening the psychological effects of emotional abuse. All things considered, the study advances our understanding of adolescent mental health and aids in the creation of more focused psychological treatments.

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