



Maternal Adverse Childhood Experiences and the Quality of Mother-Child Attachment

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Abstract. Exposure to adverse childhood experiences (ACEs) has long-term consequences persisting into the transition to motherhood. Approximately 58.1% of Indonesian mothers in this sample reported at least one ACE. These traumatic experiences may affect the formation of secure attachment within the mother-child relationship and increase the likelihood of negative outcomes in children's development. This research aims to examine the association between maternal ACEs and the quality of mother-child attachment, operationalized through the dimensions of closeness and conflict. A quantitative approach with purposive sampling technique was used in this study. A total of 215 mother-child dyads were involved. Spearman's rank correlation was conducted for hypothesis testing. Results showed that maternal ACEs were negatively correlated with closeness ($\rho = -0.217$, $p = 0.001$) and positively correlated with conflict ($\rho = 0.311$, $p < 0.001$). The findings indicate that higher exposure to ACEs is associated with lower emotional closeness and higher conflict in the mother-child relationship. This underscores the importance of considering maternal ACEs in understanding attachment quality and may suggest the potential role of protective factors in mitigating the effects of adversity.

Keywords: *adverse childhood experiences; attachment; childhood; mother and child*

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Introduction

Across diverse cultures, mothers are typically recognized as the primary caregivers of children within the family (Mathew et al., 2023; Musick et al., 2016). A similar pattern is observed in Indonesian society, where mothers tend to play a more dominant role in fulfilling their children's physical, social, and emotional needs compared to fathers or other family members (Husnah et al., 2024; Lutfatulatifah, 2020). Interactions between mother and child during the early stages of life serves as an essential basis of attachment development (Farantika et al., 2020). Nevertheless, reality suggests that the role of mothers as primary caregivers is not always fulfilled optimally. Under certain circumstances, disruptions in mother-child interactions may arise, thereby potentially affecting the quality of attachment bonds.

Bowlby (1982) conceptualized attachment as a reciprocal emotional bond between a child and their primary caregiver that drives proximity-seeking behavior and a sense of safety, especially under distressing conditions. Such emotional bonds manifest in the quality of mother-child relationship, consequently contributing to the child's attachment security (Rostad & Whitaker, 2016). Previous literature has consistently demonstrated that mother-child attachment significantly correlates with multiple dimensions of children's later development, encompassing social interaction competence (Groh et al., 2017), emotional regulation capacity (Ferreira et al., 2024), the formation of self-esteem (Muarifah et al., 2022), self-control abilities (Agustin & Kusnadi, 2019), and independence in daily life (Rochmah et al., 2023). Therefore, as attachment plays a crucial role in child development, it is essential to understand how mother-child relationships are manifested in everyday life.

Theoretically, mothers are regarded as a child's safe haven. However, empirical data from Komisi Perlindungan Anak Indonesia (2020) reveal a contrast between this assumption and realities, whereby mothers identified as the most frequent perpetrators of child abuse, involving both physical (60%) and psychological violence (79.5%). Common forms of abuse by mothers include hitting, slapping, pinching, pulling a child's ear, insulting, comparing, and threatening (Cahayanengdian & Sugito, 2022; Widiningsih & Felayati, 2020). Maternal behaviors characterized by insensitivity, lack of responsiveness, and inconsistency suggest disruptions in the mother-child relationship that may hinder the development of secure attachment (Wright et al., 2023). Consequently, failure to establish secure attachment may result in long-term negative outcomes for individual development and increase the risk of psychological issues, such as aggression, anxiety, and depression (Li, 2023).

A mother's difficulty in establishing secure attachment with their children cannot be separated from their prior life experiences before entering parenthood. Findings by Garon-Bissonnette et al. (2022) indicate that childhood traumatic experiences are relatively common among mothers, with 35% of respondents reporting at least one traumatic experience and 49.2% having experienced multiple types of trauma. Within the field of psychology, these early-life traumatic experiences are conceptualized under the framework of Adverse Childhood Experiences (ACEs).

Felitti et al. (1998) introduced the concept of ACEs as a framework for identifying various forms of abuse, neglect, and household dysfunction experienced prior to the age of 18, which are associated with long-term adverse consequences across the lifespan. Evidence suggests that a cumulative ACE is associated with heightened vulnerability to anxiety and depression (Arulsamy et al., 2025), as well as to emotional dysregulation and both internalizing and externalizing behavioral problems (Zhou et al., 2025). Moreover, individuals with higher ACE scores are more likely to encounter difficulties in interpersonal relationships, as reflected in poorer communication and lower relationship quality, which may negatively affect parent-child relationships later in life (Maloney et al., 2025)

Meta-analytic studies reveal that mothers with a history of childhood trauma, such as abuse and neglect, are more vulnerable to experiencing difficulties in developing relationships with their children (Savage et al., 2019). Such traumatic experiences may lead mothers to interpret their children's cues more negatively, ultimately reducing their responsiveness to child distress (Girod et al., 2023). This condition is linked to the development of insecure attachment patterns and has significant implications for mothers' ability to maintain adaptive interpersonal relationships over time (Dunford, 2025). Furthermore, exposure to childhood trauma combined with insecure attachment can impair reflective functioning, limiting mothers' capacity to understand their children's emotional and psychological needs (Cristobal et al., 2017). Consequently, a mother's failure to consistently recognize and meet her child's needs increases the likelihood of insecure attachment (Kostova & Matanova, 2024).

Although previous studies have examined maternal adverse childhood experiences and mother-child attachment, findings across studies remain inconsistent. Berthelot et al. (2015) reported that the majority of children born to mothers with a history of childhood abuse and neglect were identified as exhibiting insecure attachment (83%), whereas only 17% demonstrated secure attachment. However, Karakaş et al. (2021) reported that although insecure

attachment was more prevalent among mothers with trauma histories (34%) than among those without such histories (19.1%), this difference was not statistically significant.

Furthermore, empirical research regarding ACEs and attachment within Indonesian mother–child dyads are still limited. Despite existing studies involving participants across various ages, from adolescence to adulthood, research specifically focusing on mothers and mother–child dyads remain relatively scarce (Damayanti & Margaretha, [2021](#); Sari & Hapsari, [2022](#); Ziliwu et al., [2020](#)). Consequently, the novelty of this study lies in examining the association between ACEs and attachment dynamics within mother–child relationships in Indonesia, a setting that remains underexplored. This study is expected to enhance empirical understanding in this area of research and support the development of intervention programs targeting mothers with a history of ACEs.

Based on these considerations, the present study aims to examine the association between maternal ACEs and the quality of mother-child attachment operationalized by the dimensions of closeness and conflict. This study hypothesizes that maternal ACEs are negatively associated with closeness and positively associated with conflict in mother–child attachment quality.

Methods

The present study applied a quantitative cross-sectional design to explore the association between maternal ACEs as the independent variable and the quality of mother–child attachment as the dependent variable. The data were collected in Indonesia between September and November 2025.

A total of 215 mother–child dyads participated in this study. Participants were recruited through collaboration with several kindergartens and elementary schools, as well as via social media platforms (e.g., Twitter, Instagram, and WhatsApp) using a purposive sampling technique. The inclusion criteria were: (1) mothers who had children aged 4–12 years, and (2) living in the same household as their child. This age range was selected based on the consideration that during this developmental period, mothers typically remain the primary attachment figure for the child. Data were collected using self-report questionnaires administered in printed booklet format for offline respondents and in Google Form format for online respondents. All participants provided informed consent, which emphasized that participation was voluntary and they were free to withdraw at any point during the process.

Two instruments were employed to assess the study variables. Maternal ACEs were assessed using the Indonesian version of WHO Adverse Childhood Experience International Questionnaire (WHO ACE-IQ), which was developed by Rahapsari et al. ([2021](#)). This instrument consists of 29 items representing 13 categories, including various forms of abuse and neglect,

household dysfunction, bullying, as well as community and collective violence. Items are presented in two response formats: frequency-based (e.g., always, mostly, occasionally, rarely, never; or many times, sometimes, once, never) and dichotomous option (yes/no). Scoring was conducted at the category level, with each category received a maximum score of 1 if the respondent reported at least one experience within that category. The overall score is calculated by summing all categories, resulting in a range from 0 to 13. These were further classified into no exposure (0), low exposure (1-3), and high exposure (≥ 4). In the current study, reliability testing demonstrated acceptable internal consistency ($\alpha = 0.791$).

The mother-child attachment construct in this study is conceptualized within the framework of attachment theory and operationalized as the quality of the mother-child relationship as perceived by the mother. Measurement was conducted using the Child-Parent Relationship Scale-Short Form (CPRS-SF), which was adapted into Indonesian by Helmiyanti & Fikrie (2024). The adapted version underwent psychometric evaluation, resulting in 11 final items. It consists of two dimensions: closeness and conflict. The closeness dimension reflects positive emotional interaction, warmth, comfort, and a sense of connectedness, whereas the conflict dimension captures tension, negative relational patterns, and the frequency of conflict within the dyadic relationship. Higher closeness scores indicate a more positive relational quality and are conceptually associated with characteristics of secure attachment. In contrast, higher conflict scores indicate less adaptive relational quality and are linked to insecure attachment characteristics. Thus, the assessment centered on these two dimensions as indicators of attachment quality. Each item was evaluated using a five-point Likert scale, spanning from *strongly disagree* to *strongly agree*. The reliability analysis in this study yielded a Cronbach's alpha of 0.811 for the closeness dimension and 0.450 for the conflict dimension. The relatively low reliability coefficient observed in the conflict dimension may be attributed to the limited number of items, which can affect the estimation of internal consistency. Nevertheless, the results of the confirmatory factor analysis (CFA) demonstrated an acceptable model fit (CFI = 0.922, TLI = 0.900, SRMR = 0.057, and RMSEA = 0.067), supporting the construct validity of the instrument.

Data analysis was conducted in several stages. The normality assumption test was first examined using the Shapiro-Wilk test to determine the appropriate analysis approach. As the data did not meet the normality assumption, non-parametric analysis was employed. Spearman's rank correlation was conducted hypothesis testing regarding the relationship between maternal ACEs and the dimensions of closeness and conflict. Additionally, differences between groups based on

ACE exposure categories was assessed using the Kruskal–Wallis’s test. All data analysis were carried out using Jamovi software (version 2.4.14).

Results

The present study involved 215 mother–child dyads (N=215). Participants characteristics based on age, number of children, educational background, employment status, and monthly income are presented in Table 1.

Table 1.
Participant Characteristic

Characteristic	n (%) / M (SD)
Mother’s age	37.18 (6.104)
Child’s age	8.55 (2.395)
Number of children	2.17 (0.822)
Education level	
Middle school	15 (7%)
High school	73 (34%)
Undergraduate	115 (53.5%)
Postgraduate	12 (5.6%)
Employment status	
Employed	128 (59.5%)
Unemployed	87 (40.5%)
Monthly income	
< Rp1.500.000	56 (26%)
Rp1.500.000 – Rp2.500.00	31 (14.4%)
Rp2.501.000 – Rp3.500.000	44 (20.5%)
> Rp3.500.000	84 (39.1%)

As shown in Table 1, the average age of mothers was 37.18 years (SD = 6.10), while the average age of children was 8.55 years (SD = 2.40), indicating that the mothers were generally in early adulthood. Respondents had an average of 2.17 children (SD = 0.82), suggesting typically small family size. As for education level, most mothers had completed a bachelor’s degree (53.5%), followed by senior high school (34%), junior high school (7%), and postgraduate degree holders (5.6%). More than half of the respondents (59.5%) were employed. Regarding monthly income,

the highest proportion fell within the category of > IDR 3.500.000 (39.1%), followed by < IDR 1.500.000 (26%), IDR 2.500.000–3.500.000 (20.5%), and IDR 1.500.000–2.500.000 (14.4%). Overall, most participants in this study had relatively high levels of education and stable socioeconomic status.

Table 2.
Descriptive Data for Study Variables

Variable	Mean	SD	Min	Max
Adverse Childhood Experiences	2.86	2.222	0	11
Closeness	4.39	0.465	2	5
Conflict	2.05	0.508	1	3.5

Table 2 presented a summary of the descriptive data for the study variables. Participants reported a mean ACEs score of 2.86 (SD = 2.22), with a minimum of 0 and a maximum of 11. For the attachment dimensions, the mean score for closeness was 4.39 (SD = 0.47), ranging from 2 to 5, while the conflict dimension showed a mean of 2.05 (SD = 0.51), with scores ranging from 1 to 3.5. Overall, respondents reported relatively high levels of mother–child closeness and low levels of conflict. However, although the average ACEs score was relatively low, the wide distribution of scores suggests that some respondents had experienced higher adversity than others.

Furthermore, the distribution of ACE categories revealed that 18 participants (8.4%) were classified as none category, 125 respondents (58.1%) in the low category, and 72 respondents (33.5%) in the high category. These findings indicate that most respondents in this study had experienced at least one to three types of ACEs.

Table 3.
Shapiro-Wilk Test

Variable	W	p	Description
Adverse Childhood Experiences	0.898	< 0.001	Not normal
Closeness	0.928	< 0.001	Not normal
Conflict	0.974	< 0.001	Not normal

A normality test was performed using the Shapiro–Wilk analysis to assess whether the assumption of normal distribution was met (see Table 3). The results revealed that the significance values for ACEs, closeness, and conflict were less than 0.05 ($p < 0.001$), suggesting that the data were not normally distributed. Therefore, further analyses were conducted using nonparametric tests.

Table 4.
Spearman's Rank Test

Variable	ρ	p	Description
Adverse Childhood Experiences and Closeness	-0.217	0.001	Negative and significant correlation
Adverse Childhood Experiences and Conflict	0.311	< 0.001	Positive and significant correlation

As shown in Table 4, Spearman's rank correlation analysis demonstrated a significant negative association between ACEs and the closeness dimension ($\rho = -0.217$, $p = 0.001$), as well as a significant positive relationship between ACEs score and the conflict dimension ($\rho = 0.311$, $p < 0.001$). These findings support the hypothesis that there is a correlation between maternal ACEs and mother-child attachment quality.

Further analysis using the Kruskal-Wallis's test was performed to examine differences in closeness and conflict scores based on ACEs exposure categories. The results showed that there are no significant differences between groups in the closeness dimension ($\chi^2 = 5.11$, $p = 0.078$). However, there was a significant difference in the conflict dimension ($\chi^2 = 14.80$, $p < 0.001$), suggesting that at least one ACEs exposure category differed in conflict scores.

Discussion

This present study demonstrated a significant association between maternal ACEs and the quality of mother-child attachment, as manifested in the dimensions of closeness and conflict. Higher levels of ACEs exposure correlated with lower emotional closeness and greater conflict within the mother-child relationship. This finding aligns with previous research carried out by Berthelot et al. (2015) and Karakaş et al. (2021), which also found that mothers' early traumatic experiences were related to mother-child attachment. Given that the closeness dimension is related to secure attachment characteristics, while conflict reflects dynamics commonly associated with insecure attachment, this observed pattern may indicate a tendency toward insecure attachment characteristics.

The relational pattern observed through the dimensions of closeness and conflict in this study are consistent with previous research. Guss et al. (2020) stated that exposure to ACEs was associated with greater intensity of conflict in parent-child relationships. Such exposure may lead mothers to exhibit maladaptive and more conflictual behaviors in daily interactions with their children (Tambelli et al., 2015). Furthermore, early childhood trauma may hinder mothers' ability to build meaningful emotional closeness with their children (Akintunde et al., 2024). Difficulties

in establishing closeness may be linked to a lack of responsive interaction between mother and child, as mothers with a history of ACEs tend to struggle with recognizing and accurately addressing their children's emotional needs (Septiyani & Kristiana, [2025](#)). Thus, these findings suggest that ACEs are not only associated with decline in attachment quality, as reflected in low closeness, but also with more strained relational dynamics in mother-child interactions.

Taken together, the present study supports the view that maternal ACEs are associated with a heightened likelihood of insecure attachment characteristics within the mother-child relationship. However, no significant differences were found in the closeness dimension among mothers with high, low, or no ACEs exposure. This finding is consistent with research by Karakaş et al. ([2021](#)), which reported a trend toward increased insecure attachment among mothers with a history of ACEs, although the difference compared to the general maternal population did not reach statistical significance. This underscores that ACEs exposure does not automatically lead to negative outcomes (Sawyer et al., [2024](#)). Therefore, the risk of insecure attachment among children of mothers with childhood trauma histories may depend less on the trauma itself and more on whether those experiences have been resolved through adaptive reflection (Sirparanta et al., [2025](#)).

One possible explanation for the association between maternal ACEs and the quality of mother-child attachment lies in reflective functioning. Although attachment patterns may change throughout the lifespan, childhood traumatic experiences are frequently associated with a stronger tendency toward insecure attachment patterns (Janse van Rensburg et al., [2024](#); Widom et al., [2018](#)). When individuals with a history of childhood trauma transition into parenthood, the presence of insecure attachment is found to be associated with impairments in mentalization capacity, characterized by a difficulty understanding one's own mental state as well as their children (Cristobal et al., [2017](#)). The findings further suggests that the combination of insecure attachment and childhood traumatic experiences, particularly physical neglect, has a serious impact on reflective functioning. In fact, reflective functioning is considered as an essential basis for secure attachment development in children of mothers with a history of childhood trauma (Doyle & Cicchetti, [2017](#)). Consequently, mothers' failure to adequately mentalize their traumatic experiences may increase the risk of insecure attachment in their children through insensitivity and a lack of responsiveness to the child's distress (Berthelot et al., [2015](#)).

As previously explained, not all mothers with a history of ACEs in this study sample showed patterns associated with insecure attachment characteristics. These findings suggest that differences in mother-child attachment characteristics among mothers with a history of ACEs are

likely shaped not only by the adverse experiences themselves, but also by the presence of protective factors that may buffer their impact on attachment quality. Resilience emerges as a key protective factor in explaining these results. In a study conducted by Widyorini et al. (2022), within the Indonesian context, resilience was found to facilitate post-traumatic growth among individuals with a history of ACEs. Their findings highlight specific dimensions of resilience, particularly spirituality, as critical elements that promote positive adaptation.

Moreover, longitudinal research suggests that social support serves a crucial function in reducing the long-term psychological burden of childhood trauma on adulthood (Buchanan et al., 2024). In line with this, greater interpersonal emotion regulation may enhance the efficacy of social support, thereby functioning as a stronger protective factor for individuals with ACEs when facing parenting stress (Nakajima, 2025). Additionally, a high level of awareness to breaking the intergenerational transmission of trauma has been identified as a motivational protective factor that encourages mothers to proactively build a more positive relationship with their children (Karakaş et al., 2021). Thus, these results suggest that certain mothers with ACEs histories may possess resilience, emotional regulation, social support, and self-awareness to maintain the quality of attachment with their children despite their prior traumatic experiences.

Certain limitations in the current study need to be considered. First, the assessment of all variables relied on maternal self-reports, potentially leading to bias in recalling ACEs as well as in perceiving dyadic closeness and conflict. Second, attachment was operationalized through relational behavioral manifestations (i.e., closeness and conflict) rather than observational measures of attachment. Third, the use of cross-sectional correlational design restricts conclusions about causal direction in the association between maternal ACEs and the quality of mother-child attachment.

Although there are limitations, this study also offers a number of strengths. It addresses a notable gap in the literature by presenting empirical data on maternal ACEs in Indonesia that remains relatively scarce. In addition, the combination of dimensional and categorical analyses provides complementary perspectives on the observed associations. The inclusion of children across a wide age range, from early childhood through elementary school years, also broadens the relevance of the findings. Overall, despite limitations in design and measurement, this study offers meaningful empirical contributions to understanding the relationship between maternal ACEs and the quality of mother-child attachment in the Indonesian context.

Further research is recommended to employ longitudinal designs to clarify the directionality of the relationship and the possible underlying mechanisms between maternal ACEs

and the quality of mother–child attachment. More comprehensive assessment strategies are also needed, such as involving children's perceptions and observational measures of mother–child interactions. In addition, future studies are encouraged to explore protective factors in mothers with a history of ACEs to explain variability in attachment patterns and support the development of more targeted interventions.

Conclusion

This study aimed to examine the association between maternal ACEs and the quality of mother–child attachment, operationalized through the dimensions of closeness and conflict. The findings highlight that higher levels of ACEs exposure correlated with lower emotional closeness and greater conflict in the mother–child relationship. This pattern reflects relational dynamics commonly related to insecure attachment characteristics. However, significant differences across ACEs exposure categories were observed only for the conflict dimension, whereas differences in closeness were not statistically significant. These findings may be explained by reflective functioning, which is associated with maternal mentalization capacity and sensitivity to a child's distress. Importantly, not all mothers with a history of ACEs exhibited characteristics associated with insecure attachment, suggesting that protective factors such as resilience, emotional regulation, social support, and self-awareness may mitigate the impact of ACEs on the quality of mother–child attachment.

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