
PERCEIVED PARENTAL BLAME AND EMOTION REGULATION AS PREDICTORS OF ADULT PSYCHOLOGICAL DISTRESS: DEVELOPMENT AND VALIDATION OF THE PERCEIVED PARENTAL BLAME SCALE

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Abstract

The present study developed and validated the Perceived Parental Blame Scale (PPBS) and examined the underlying psychological mechanisms that connect perceived parental blame experienced during childhood to emotional distress in adulthood. The present study is anchored in attachment theory and emotion regulation frameworks. Its objective is to explore how early perceptions of parental blame may shape long-term emotional functioning and vulnerability to psychological difficulties. Specifically, a mediation model was tested in which difficulties in emotion regulation were hypothesized to explain the relationship between parental blame and adult symptoms of depression, anxiety, and stress. Two independent adult samples were recruited to ensure methodological robustness. The initial sample (N = 308) was utilised to conduct exploratory and confirmatory factor analyses, which substantiated a unidimensional and psychometrically sound factor structure of the PPBS with high internal consistency. The second sample (N = 576) was used for structural equation modelling, which confirmed that perceived parental blame significantly predicted elevated levels of psychological distress. Furthermore, it was demonstrated that this association was partially mediated by emotion regulation deficits. The findings emphasise the long-lasting impact of early family interactions on adult emotional well-being, suggesting that experiences of blame from caregivers may result in the internalisation of maladaptive emotional schemas that persist into adulthood. The PPBS thus offers a novel and reliable instrument for future research and clinical assessment of family-based emotional dynamics. The results of the study provide valuable

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implications for prevention and intervention programs aiming to strengthen emotion regulation skills and address maladaptive parental patterns within family and systemic therapy contexts.

Keywords: perceived parental blame, emotion regulation, adult psychological distress, attachment theory, family dynamics, scale development

It is an established fact that early relational experiences have a significant impact on psychological well-being throughout the lifespan. Among these, perceived parental blame represents a specific dimension of negative parent–child interaction that has received limited empirical attention (Bowlby, 1988; Knappe et al., 2019). Perceived parental blame is defined as a child's experience of being unfairly or repeatedly held responsible by caregivers for mistakes or failures. This construct is conceptually related to parental criticism and expressed emotion, which have been extensively studied as risk factors for psychopathology (Hooley & Parker, 2006; Renshaw, 2008). However, extant measures such as the Parental Bonding Instrument (Parker, Tupling, & Brown, 1979), the Perceived Criticism Measure (Renshaw, 2008), or expressed emotion scales (Hooley & Parker, 2006) primarily capture general caregiving attitudes or critical communication styles rather than the child's retrospective perception of being personally blamed by parents.

Such experiences of perceived parental blame have been shown to disrupt the development of self-worth and emotional security, resulting in heightened vulnerability to stress, impaired socio-emotional development, and long-term psychological difficulties, including cognitive distortions, reduced self-efficacy, and difficulties in emotion regulation (Brown & Harris, 2020; Kline et al., 2022; Monroe & Simons, 1991; Morris et al., 2017). Despite these associations, there is currently no standardized tool specifically designed to measure perceived parental blame as a distinct relational adversity. The present study introduces the Perceived Parental Blame Scale (PPBS), a retrospective self-report instrument developed to capture emotionally salient parent–child dynamics from the adult's perspective.

In addition to validating the instrument, the study investigates the long-term psychological consequences of perceived parental blame, particularly its associations with depression, anxiety, and stress. The present study draws upon attachment theory and emotion regulation frameworks to hypothesise that emotion regulation, defined as the ability to modulate one's emotional responses in challenging interpersonal contexts (Gross & Jazaieri, 2014; Aldao et al., 2010), serves as a mediating factor in these relationships. The study's objective is twofold: firstly, to elucidate the role of emotion regulation, and secondly, to contribute to a

more nuanced understanding of how parental blame experiences shape adult psychological functioning.

Parental Blame and Psychological Health

Perceived parental blame refers to relational patterns in which children are persistently criticised, reminded of failures, or implicitly held responsible for familial problems (Knappe et al., 2019). This form of interpersonal dynamic has conceptual overlap with expressed emotion and perceived criticism, constructs which emphasise the impact of critical and blaming communication on children's psychological functioning (Hooley & Parker, 2006; Renshaw, 2008). From a developmental and attachment perspective, repeated experiences of parental blame have the potential to undermine children's self-concept and emotional security, contributing to vulnerabilities such as low self-esteem, reduced resilience, and difficulties in regulating emotions (Bowlby, 1988; Morris et al., 2017). Empirical studies suggest that individuals exposed to such relational patterns are more likely to develop insecure attachment orientations, particularly anxious and avoidant styles, which heighten risks for depression and anxiety across the lifespan (Mikulincer & Shaver, 2016; Dagan et al., 2018).

Furthermore, children who internalise parental blame may adopt maladaptive cognitive styles, including self-blame, helplessness, and negative automatic thoughts. These have been established as risk factors for affective disorders (Ingram et al., 2006; Chang et al., 2021). These cognitive-emotional vulnerabilities frequently persist into adulthood, manifesting as challenges in trust, boundary-setting, and self-compassion—domains closely tied to family functioning and relational well-being (Scharf & Goldner, 2018). Psychological distress in adulthood is commonly measured with instruments such as the Depression Anxiety Stress Scale-21 (DASS-21), which has been demonstrated to have strong psychometric validity in assessing symptomatology linked to adverse relational experiences (Lovibond & Lovibond, 1995; Henry & Crawford, 2005). It is evident from previous studies that early relational adversities, including perceived parental blame, are associated with elevated levels of distress and may also contribute to symptoms reminiscent of trauma. This underscores the importance of assessing this construct in both research and clinical practice (Steele et al., 2018; Infurna & Luthar, 2018).

Parental Blame and Emotion Regulation

Emotion regulation is defined as the individual's capacity to monitor, evaluate, and modify emotional responses in order to adapt to distressing or

challenging situations (Gross & John, 2003; Gratz & Roemer, 2004). Adaptive strategies, such as cognitive reappraisal, have been demonstrated to be consistently linked to psychological resilience. Conversely, maladaptive approaches, including avoidance or suppression, have been shown to be associated with increased vulnerability to emotional distress (Aldao et al., 2010; Joormann & Stanton, 2016; Schäfer et al., 2017). Within the family context, parental behaviours are of particular significance in the socialisation of children's regulatory abilities. Supportive parenting, characterised by validation and guidance, has been shown to foster the development of adaptive regulation strategies in children. Conversely, critical or blame-oriented interactions have been demonstrated to impede children's ability to manage emotions effectively (Morris, Silk, Steinberg, Myers, & Robinson, 2007; Luyten et al., 2020). It is hypothesised that, over time, repeated exposure to parental blame may reinforce maladaptive regulation patterns, leaving individuals more vulnerable to psychological distress in adulthood.

Utilising the theoretical framework outlined above, the present study hypothesises that emotion regulation serves as a mediator in the association between perceived parental blame and the subsequent development of psychological symptoms in adults. Specifically, individuals reporting higher levels of parental blame are expected to demonstrate greater emotional difficulties, which in turn contribute to elevated levels of depression, anxiety, and stress. The testing of this mediating mechanism provides a more precise understanding of how family dynamics translate into adult psychological functioning.

Hypotheses, Contribution and Importance of the Research

The present study investigates the long-term psychological implications of perceived parental blame in childhood, and whether emotion regulation mediates these associations. Although previous studies have documented the adverse effects of parental criticism and negative family interactions, few studies have explicitly conceptualised and measured perceived parental blame as a distinct construct (Hooley & Parker, 2006; Renshaw, 2008). Existing approaches have frequently relied on broad measures of expressed emotion or perceived criticism. While these measures are informative, they do not fully capture the specific relational pattern of parental blame. The present study makes an original contribution to the assessment of childhood relational experiences by developing and validating the Perceived Parental Blame Scale (PPBS). The following hypotheses underpin the study:

H1: Perceived parental blame will be positively associated with adult depression, anxiety, and stress.

H2: Emotion regulation will mediate the relationship between perceived parental blame and adult psychological distress.

H3: Higher levels of emotion regulation will be associated with lower levels of psychological distress, even in the presence of perceived parental blame.

The present research makes a contribution to the literature on intergenerational family dynamics, emotion regulation, and mental health by introducing a psychometrically validated tool and empirically supported model. The objective of the present study is twofold: firstly, to advance theoretical understanding of how specific parental communication patterns influence long-term psychological outcomes, and secondly, to provide a foundation for future applied research in family psychology and counselling.

Method

Research Design

This study was conducted using a two-stage quantitative research design to investigate the psychological consequences of perceived parental blame and the mediating role of emotion regulation. In the first stage, the Perceived Parental Blame Scale (PPBS) was developed and subjected to a series of psychometric evaluations. The process included item generation based on theoretical literature and expert consultation, followed by exploratory factor analysis (EFA) to identify the underlying factor structure and confirmatory factor analysis (CFA) to assess construct validity. Reliability was evaluated using internal consistency coefficients. In the second stage, the validated scale was employed in a broader sample to examine the associations among perceived parental blame, emotion regulation, and psychological health outcomes. Structural equation modeling (SEM) was used to test hypothesized relationships and the mediating role of emotion regulation in the link between parental blame and adult psychological distress (i.e., depression, anxiety, and stress).

The study adopted a cross-sectional and descriptive design, allowing for the identification of associations between variables at a single point in time. However, consistent with methodological guidelines, it should be noted that such a design does not permit causal inference regarding the directionality of the observed relationships (Bryman, 2016; Maxwell & Cole, 2007).

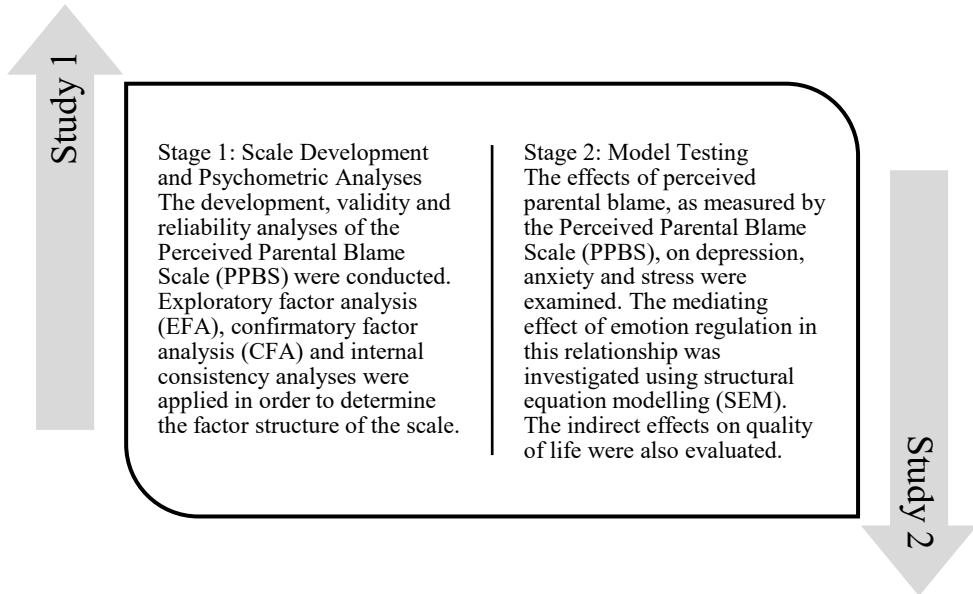


Figure 1. Research Design Stages

Figure 1 illustrates the two-stage design of the study. In Study 1, the PPBS was developed and validated using psychometric analyses. In Study 2, SEM was applied to test the mediating role of emotion regulation in the relationship between perceived parental blame and adult psychological outcomes.

Participants

The study was conducted in two phases.

Scale development phase: 308 participants (198 females, 110 males).

Model testing phase: 576 participants (272 females, 304 males).

All participants were **Turkish adults**, and those in the model testing phase were specifically **married individuals**. The rationale for selecting married adults was based on the assumption that childhood relational experiences, such as perceived parental blame, may resurface or influence functioning within marital relationships, making this group particularly relevant for the study of intergenerational family dynamics.

Participants were recruited through an online survey platform (Google Forms) disseminated via social media and professional counseling networks. Inclusion criteria were being 18 years or older and currently married. Exclusion criteria included being divorced, widowed, or under the age of 18.

The demographic characteristics of the model testing sample are presented in Table 1. As shown, gender distribution was relatively balanced (47.2% female,

52.8% male). The largest subgroup had been married for 11–15 years (26.9%). Participants were predominantly well educated, with 40.3% holding a postgraduate degree and 36.1% holding a bachelor's degree. Most participants identified themselves as belonging to the middle socioeconomic level (81.9%). While this educational profile strengthens the reliability of self-reported data, it also suggests that the findings may not be fully generalizable to populations with lower educational attainment.

Table 1. Demographic Characteristics of the Participants

Variable	Category	Frequency (n)	Percentage (%)
Gender	Female	272	47.2
	Male	304	52.8
Marital Duration	0-5 years	86	14.9
	6-10 years	142	24.7
	11-15 years	155	26.9
	16-25 years	113	19.6
	26 years and above	80	13.9
Educational Level	Primary School	20	3.5
	Middle School	12	2.1
	High School	56	9.7
	Associate Degree	48	8.3
	Bachelor's Degree	208	36.1
	Postgraduate	232	40.3
Perceived Socioeconomic Status	Low	8	1.4
	Middle	472	81.9
	High	96	16.7

Data Collection Process

The data were collected using an online survey method. A convenience sampling strategy was adopted, and participants were informed about the purpose and scope of the research prior to participation. The data collection process was executed through the utilisation of Google Forms, while the survey link was disseminated via social media platforms (e.g., Facebook, Instagram) and professional counselling networks, with the objective of reaching a diverse adult population. Prior to commencing the questionnaire, all participants provided written informed consent. At the conclusion of the survey, participants confirmed that the information they provided could be used anonymously and analysed solely for scientific purposes. No personal identifying data were collected, and all procedures strictly adhered to ethical guidelines for research involving human subjects (American Psychological Association, 2017).

Measurement Tools

The instruments utilised in this study underwent a rigorous evaluation process to ascertain their psychometric reliability and validity. Reliability analyses, incorporating Cronbach's alpha coefficients, were conducted for all scales. The newly developed measure was subjected to exploratory factor analysis (EFA) and confirmatory factor analysis (CFA).

Perceived Parental Blaming Scale (PPBS)

The Perceived Parental Blame Scale (PPBS) was developed in this study to assess adults' retrospective perceptions of parental blame experienced during childhood. The generation of items was informed by a thorough review of the extant literature on parental criticism and blame constructs (see, for example, Hooley & Parker, 2006; Renshaw, 2008), in addition to expert assessments provided by family psychology specialists. The preliminary pool comprised 22 items, which were reduced to 15 items following expert review and pilot testing. The following sample items are provided for your consideration: It has been asserted that “My parents often reminded me of my past mistakes” and that “I was blamed for family problems even when they were not my fault”. The items were evaluated using a 5-point Likert scale, ranging from 1 (strongly disagree) to 5 (strongly agree), with higher scores denoting an increased perception of parental blame. The EFA supported a unidimensional structure with strong exploratory power (KMO = 0.94; Bartlett's test $\chi^2 = 9098.604$, $df = 105$, $p < .001$; total explained variance = 67.60%). The factor loadings ranged from 0.646 to 0.912, indicating the satisfactory performance of the items. CFA confirmed the construct validity of the PPBS, with good model fit indices (GFI = 0.94; CFI = 0.96; TLI = 0.95; RMSEA = 0.06; SRMR = 0.05). These indices were consistent with recommended thresholds (Hu & Bentler, 1999). The internal consistency of the final 15-item scale was found to be excellent ($\alpha = 0.965$).

Emotional Regulation Scale

Emotion regulation was measured using the Turkish adaptation (Yiğit & Güzey, 2019) of the Emotion Regulation Questionnaire (Gross & John, 2003). The ERQ comprises 10 items that assess two emotion regulation strategies: cognitive reappraisal (six items; e.g., “When I want to feel less negative emotion, I change the way I think about the situation”) and expressive suppression (four items; e.g., “I keep my emotions to myself”). The items are evaluated using a 7-point Likert scale, ranging from 1 (strongly disagree) to 7 (strongly agree). In the present study, the Turkish version demonstrated excellent reliability (Cronbach's $\alpha = 0.91$). Scoring and composite construction. The ERQ indexes current/typical emotion-regulation strategies rather than retrospective use (Gross & John, 2003). For the present

analyses, we created an Emotion-Regulation Difficulties (ERD) composite so that higher scores reflect greater difficulty. Specifically, cognitive reappraisal items were reverse-scored, and the two ERQ subscale scores (reappraisal-reversed and suppression) were z-standardized and averaged to yield ERD (higher = more difficulty). The composite demonstrated excellent internal consistency in the current sample ($\alpha = .91$). This scoring decision aligns the direction of the ER variable with distress indicators and facilitates interpretation in the mediation model.

Stress, Depression and Anxiety Scales (DASS-21)

The psychological distress of the participants was assessed using the Turkish adaptation (Sarıçam, 2018) of the Depression Anxiety Stress Scale–21 (DASS-21; Lovibond & Lovibond, 1995). The scale comprises 21 items, which are distributed across three subscales: The presence of depression was indicated by statements such as “I felt that life was meaningless”. Anxiety was indicated by statements such as “I experienced trembling in my hands”. Stress was indicated by statements such as “I found it hard to wind down”. Responses are given on a 4-point Likert scale ranging from 0 (did not apply to me at all) to 3 (applied to me very much or most of the time). In this study, the internal consistency coefficients were found to be high. The alpha coefficients for stress, depression and anxiety were found to be 0.89, 0.91 and 0.87 respectively.

Data Analysis

The analysis was conducted in several sequential stages to ensure methodological rigor:

The following statistics are descriptive in nature. Descriptive analyses were performed to summarise the demographic characteristics of participants and to examine the means, standard deviations, skewness, and kurtosis values for all items. The assumption of normality was evaluated using skewness and kurtosis values, with thresholds suggested by Kline (2015).

Scale Development Analyses. In the initial phase, exploratory factor analysis (EFA) was utilised to investigate the underlying factor structure of the Perceived Parental Blame Scale (PPBS). The suitability of the data for factor analysis was evaluated using the Kaiser–Meyer–Olkin (KMO) statistic and Bartlett's test of sphericity. In the second phase, confirmatory factor analysis (CFA) was applied in order to validate the factor structure. The model's fit was evaluated through multiple fit indices, including the chi-squared divided by degrees of freedom (χ^2/df), the goodness of fit index (GFI), the comparative fit index (CFI), the Tucker-Lewis index (TLI), the root mean square error of approximation (RMSEA), and the standardized root mean square residual (SRMR) (Hu & Bentler, 1999). The internal consistency reliability of the scale was assessed using Cronbach's α and composite reliability values.

Structural Equation Modeling (SEM). The present study employed Structural Equation Modelling (SEM) to examine the hypothesised relationships between perceived parental blame, emotion regulation, and psychological distress (i.e. depression, anxiety, and stress). The mediation effect of emotion regulation was tested within the Structural Equation Modelling (SEM) framework. The evaluation of the model followed conventional criteria for fit indices, and standardized path coefficients were reported in order to assess the strength of the associations (Kline, 2015). Bootstrapping Procedures. In order to test the indirect effects and mediation hypotheses, non-parametric bootstrapping with 5,000 resamples was employed (Preacher & Hayes, 2008). Bias-corrected confidence intervals were calculated, and mediation was considered to be significant when the 95% confidence interval did not include zero. All statistical analyses were conducted utilising the IBM SPSS 26.0 and AMOS 24.0 software packages. The level of statistical significance was set at $p < .05$.

Results

This section reports the findings from the scale development process and the structural equation modeling (SEM) analyses. Results are organized as follows: (a) scale development and psychometrics (EFA/CFA), (b) descriptive statistics and correlations, and (c) SEM models testing the mediation of emotion regulation.

Scale Development Findings

In the scale development process, to test the suitability of the factor structure Exploratory Factor Analysis (EFA) and Confirmatory Factor Analysis (CFA) were conducted.

Exploratory Factor Analysis (EFA) Results

Table 2 presents the comprehensive results of the exploratory factor analysis.

Table 2. Exploratory Factor Analysis Results

Type of Analysis	Value
Kaiser-Meyer-Olkin (KMO) Test	0.940
Bartlett's Test (Chi-Square)	9098.604
Bartlett's Test (df)	105
Bartlett's Test (Sig.)	0.000
Total Explained Variance (%)	67.60%
Cronbach's Alpha (Reliability Coefficient)	0.965
Number of Items in the Scale	15

Table 2 presents the results of the exploratory factor analysis (EFA) conducted to evaluate the construct validity of the Perceived Parental Blame Scale. An exploratory factor analysis (EFA) supported a unidimensional solution for the Perceived Parental Blame Scale (PPBS). Sampling adequacy was excellent (KMO = .94), and Bartlett's test of sphericity was significant ($\chi^2 = 9098.604$, $df = 105$, $p < .001$), indicating suitability for factor analysis (Kaiser, 1974; Hair et al., 2019). The single-factor solution explained 67.60% of the total variance, exceeding the conventional 60% benchmark (Field, 2013). Internal consistency was excellent (Cronbach's $\alpha = .965$; Nunnally & Bernstein, 1994). Item loadings are reported in Table 3.

Factor Loadings and Reliability Findings

Table 3 shows the loading values and Cronbach's alpha internal consistency coefficients of the items in the scale.

Table 3. Component Matrix and Reliability Statistics

Item	Item wording	Component
es10	My parents would blame me rather than offer solutions when I had a problem.	0.912
es15	When I experienced any failure, my parents placed all the responsibility entirely on me instead of supporting me.	0.876
es7	My parents would criticize me as a generally unsuccessful person based on a single mistake.	0.863
es12	I felt that, during my childhood, they typically held me responsible for problems that occurred.	0.857
es9	In difficult times, my parents preferred to criticize me rather than support me.	0.855
es14	My parents' accusations seriously damaged my self-confidence and self-esteem.	0.850
es11	My parents' constant blaming deeply affected my self-confidence.	0.835
es3	When a problem occurred, my parents would usually attribute all the fault to me.	0.830
es2	My parents continually placed the responsibility for the difficulties I experienced on me.	0.823
es6	My parents would point out my mistakes in front of others and embarrass me.	0.807
es4	Expressions such as "You always do it wrong" were frequently used by my parents.	0.796
es13	Because of my parents' accusatory attitudes, there were times when I felt worthless.	0.787
es5	My parents often labeled me as inadequate and unsuccessful.	0.784
es1	When I made a mistake, my parents would directly criticize me instead of trying to understand me.	0.779
es8	When I did something wrong, my parents would constantly describe me as a bad person.	0.646
Cronbach's α (total scale)		0.965
Number of items		15

Table 3 reports the standardized loadings for the 15 PPBS items. Loadings ranged from .646 to .912, with the majority $\geq .70$, supporting adequate indicator reliability and a single-factor structure consistent with the EFA summary (Table 2) and the CFA fit (Table 4). Overall internal consistency was excellent ($\alpha = .965$). Item content clusters (e.g., blame for problems, global criticism, lack of support) indicate a coherent representation of the perceived parental blame construct without redundancy across stems.

Confirmatory Factor Analysis (CFA) Results

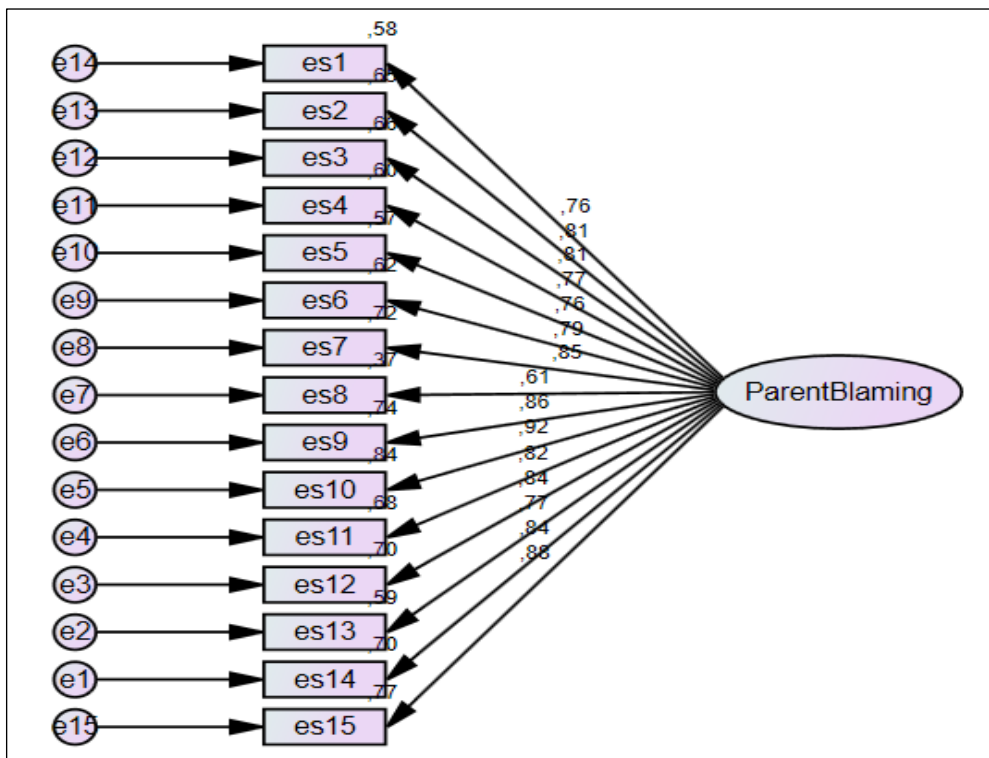


Figure 2. Confirmatory Factor Analysis Result of the Scale

Figure 2 displays the single-factor CFA model for the Perceived Parental Blame Scale (PPBS) with 15 indicators (es1–es15). Standardized factor loadings ranged from .58 to .98; the majority were $\geq .70$, indicating adequate indicator reliability. Two items (es1, es3) showed comparatively lower loadings ($\approx .58-.63$) but were retained for content coverage within the construct and because the overall model fit was satisfactory.

Table 4. Goodness of Fit Values for the Model

Index of Fit	Criteria	Model Result
χ^2/sd	< 3	2.17
GFI (Goodness of Fit Index)	> 0.90	0.94
CFI (Comparative Fit Index)	> 0.95	0.96
TLI (Tucker-Lewis Index)	> 0.95	0.95
RMSEA (Root Mean Square Error of Approximation)	< 0.08	0.06
SRMR (Standardised Root Mean Square Residual)	< 0.08	0.05

Table 4 summarizes model-fit indices, which indicated acceptable-to-good fit: $\chi^2/df = 2.17$, GFI = .94, CFI = .96, TLI = .95, RMSEA = .06, SRMR = .05. These values meet commonly recommended thresholds for unidimensional measurement models (e.g., Hu & Bentler, 1999; Kline, 2015). No post-hoc correlated error terms were added, preserving model parsimony. Taken together, the CFA results support the unidimensional structure and construct validity of the PPBS.

Structural Equation Modelling (SEM) Findings

Table 5. Combined Correlation and Descriptive Statistics

Variable						Mean	N	Std.		
	1	2	3	4	5			Deviation	Kurtosis	Skewness
Emotional Regulation	1.000	0.441*	0.585*	0.644*	0.599*	42.72	576	10.74	0.276	0.195
Parental Blaming	0.441*	1.000	0.385*	0.338*	0.376*	37.77	576	13.59	-0.615	0.441
Stress	0.585*	0.385*	1.000	0.760*	0.693*	13.50	576	3.64	0.158	0.463
Depression	0.644*	0.338*	0.760*	1.000	0.719*	12.46	576	4.31	0.472	0.937
Anxiety	0.599*	0.376*	0.693*	0.719*	1.000	10.79	576	3.10	0.276	0.870

* $p < .001$

Descriptive statistics and Pearson correlations indicated acceptable distributional properties (skewness/kurtosis within ± 1), thereby supporting the use of Structural Equation Modelling (SEM). Scores on emotion regulation (higher = greater difficulty) were positively associated with stress ($r = .585$), depression ($r = .644$), and anxiety ($r = .599$; all $ps < .001$), consistent with greater regulatory difficulty accompanying higher distress. The present study found a positive correlation between perceived parental blame and stress ($r = .385$), depression ($r = .338$), and anxiety ($r = .376$). All of the p -values were less than .001. The strongest intercorrelations among outcomes were observed between stress and depression ($r = .760$) and between depression and anxiety ($r = .719$; $ps < .001$), reflecting shared variance across distress indicators. In accordance with the wording guidance provided by Reviewer 1, the present study focuses on associations rather than effects; that is, individuals who reported higher levels of perceived parental blame tended to

report higher levels of psychological distress. These bivariate patterns constituted the empirical basis for the subsequent testing of the mediation model with emotion regulation in Structural Equation Models (SEM) analyses. For interpretability, the ER variable in SEM was analyzed as the Emotion-Regulation Difficulties (ERD) composite (higher = greater difficulty) described in Methods (§2.4.2).

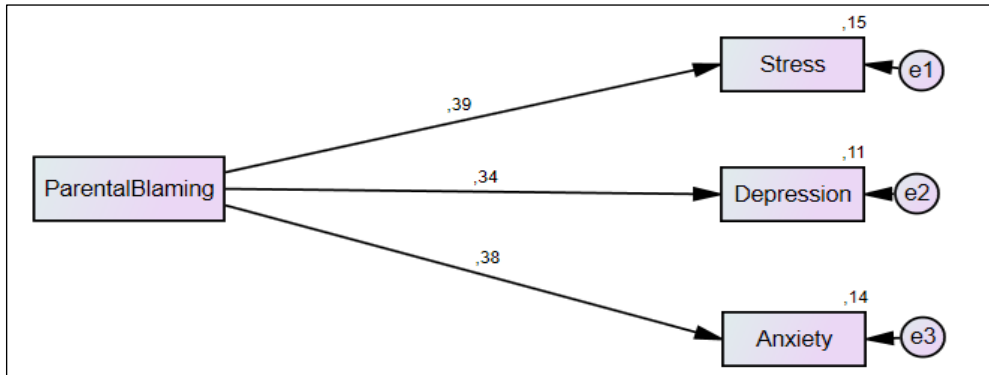


Figure 3. First Model Related to the Hypothesis

As demonstrated in Figure 3, the initial model (first figure) illustrates the direct effects between Parental Blaming and Stress, Depression and Anxiety. In the model, direct effects of. These findings show that parental blame is directly related to psychological distress. Parental Blaming has significant $\beta = .39$ on Stress, $\beta = .34$ on Depression and $\beta = .38$ on Anxiety

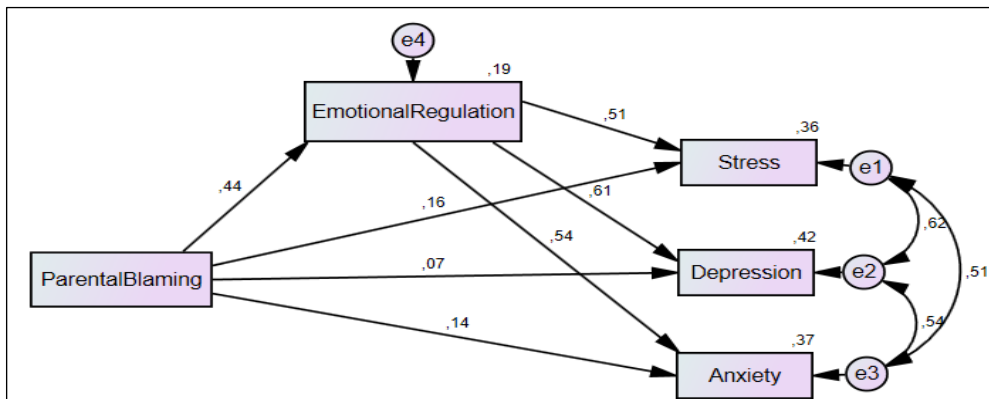


Figure 4. Structural Model for the Mediator Model

As demonstrated in Figure 4, the mediation model delineates emotion-regulation difficulties (higher scores indicating greater difficulty) as the mediator.

The present study found a positive correlation between perceived parental blame and emotion-regulation difficulties, with a significant beta value of .44 and a p-value of .002. Conversely, emotion-regulation difficulties demonstrated a positive association with stress ($\beta = .51, p = .005$), depression ($\beta = .54$), and anxiety ($\beta = .37$). Following the incorporation of the mediator, the direct pathways from perceived parental blame were diminished – to stress ($\beta = .16, p = .004$), to depression ($\beta = .07, n.s.$), and to anxiety ($\beta = .14, p = .006$) – consistent with partial mediation for stress and anxiety and indirect-only mediation for depression within a cross-sectional framework. The coefficients are standardized (β) and represent associations.

Table 6. Standardized Direct and Indirect Effects with Bias-Corrected 95% Bootstrap CIs (5,000 resamples)

Outcome	Path (Predictor → Mediator → Outcome)	Direct β	$p(\text{direct})$	Indirect β	95% CI (LL, UL)	Total β	Mediation pattern
ER difficulties	PPBS → ERD	.441	.002	—	—	.441	—
Stress	PPBS → (—) → Stress	.158	.004	.227	[.177, .273]	.385	Partial
Depression	PPBS → (—) → Depression	.068	.114	.270	[.214, .314]	.338	Indirect-only
Anxiety	PPBS → (—) → Anxiety	.139	.006	.237	[.177, .273]	.376	Partial
Stress	ERD → Stress	.515	.005	—	—	.515	—
Depression	ERD → Depression	.540	—	—	—	.540	—
Anxiety	ERD → Anxiety	.370	—	—	—	.370	—

Note. PPBS = Perceived Parental Blame Scale. ERD = Emotion-regulation difficulties (**higher scores = greater difficulty**). Indirect paths represent PPBS → ERD → outcome. Indirect effects are considered significant when the **bias-corrected 95% CI excludes 0**. All coefficients are standardized (β); two-tailed tests; 5,000 bootstrap resamples.

Brief interpretation. Bias-corrected bootstrapping indicated significant indirect associations from perceived parental blame to stress ($\beta_{\text{ind}} = .227, 95\% \text{ CI } [.177, .273]$), depression ($\beta_{\text{ind}} = .270, 95\% \text{ CI } [.214, .314]$), and anxiety ($\beta_{\text{ind}} = .237, 95\% \text{ CI } [.177, .273]$) via emotion-regulation difficulties. After including the mediator, direct paths from PPBS were attenuated (stress $\beta = .16, p = .004$; depression $\beta = .07, p = .114$; anxiety $\beta = .14, p = .006$), consistent with partial mediation for stress and anxiety and indirect-only mediation for depression within a cross-sectional framework.

Discussion

The present study developed the Perceived Parental Blame Scale (PPBS) and examined its associations with adult psychological health, focusing on the indirect (mediated) association via emotion regulation. The present study will

discuss both the scale development process and the structural equation modelling (SEM) findings in order to illuminate how retrospectively perceived parental blaming relates to current stress, depression, and anxiety. Throughout this study, we have been meticulous in our avoidance of causal language, in accordance with the cross-sectional design (Maxwell & Cole, 2007).

Evaluation of Scale Development Findings

The PPBS was designed to measure the extent to which individuals perceived persistent blaming from their parents during childhood. Results from exploratory factor analysis (EFA) and confirmatory factor analysis (CFA) revealed a single-factor structure with high internal consistency. The KMO value (.940) confirmed sample adequacy, while Bartlett's test ($\chi^2 = 9098.604$, $p < .001$) indicated significant inter-item correlations. The total variance explained (67.60%) strongly reflects the underlying construct (Field, 2013). Furthermore, the Cronbach's alpha coefficient (.965) demonstrates excellent internal reliability (Nunnally & Bernstein, 1994).

These findings confirm that the scale is both valid and reliable. As there is currently no standardized instrument measuring parental blame specifically, this study makes an important contribution to the literature by providing a tool to assess emotionally adverse family dynamics. The PPBS allows researchers and clinicians to evaluate individuals' retrospective perceptions of parental blaming and explore its long-term impact on psychological well-being.

Evaluation of Structural Equation Model Findings

Subsequent to scale development, the SEM (Structural Equation Model) was utilised to investigate the associations between perceived parental blame and adult psychological health, and to evaluate the mediating role of emotion regulation. In the present analyses, the emotion-regulation composite was scored such that higher scores indicate greater difficulties (i.e., emotion-regulation difficulties). The findings indicated that perceived parental blame exhibited direct and positive associations with anxiety ($\beta = .139$, $p = .006$) and stress ($\beta = .158$, $p = .004$), though not with depression ($\beta = .068$, $p = .114$). The incorporation of the mediator resulted in the emergence of indirect pathways, as evidenced by the significant positive associations observed for depression ($\beta_{\text{indirect}} = .270$), stress ($\beta_{\text{indirect}} = .227$), and anxiety ($\beta_{\text{indirect}} = .237$). Furthermore, the findings indicated a positive relationship between emotion-regulation difficulties and stress ($\beta = .515$, $p = .005$), depression ($\beta = .540$), and anxiety ($\beta = .370$), thereby corroborating the bivariate correlations.

Collectively, these results align with a partial mediation pattern for stress and anxiety and an indirect-only (full mediation) pattern for depression within a cross-sectional model. It is imperative to acknowledge that these are associations,

and that inferences regarding temporal precedence or causality necessitate longitudinal data (Maxwell & Cole, 2007).

Comparison with Literature

The PPBS makes a unique contribution by isolating perceived parental blame as a measurable construct, rather than relying solely on broader indicators of parental criticism or bonding. It has been demonstrated in a number of studies that there is a link between critical or accusatory family dynamics and negative psychological outcomes. For example, see Scharf & Goldner (2018), Luyten et al. (2020) and Brenning et al. (2020). For instance, Luyten et al. (2020) reported that persistent criticism in childhood was associated with lower self-efficacy and higher anxiety in adulthood, while Mikulincer and Shaver (2017) described pathways from adverse caregiving to interpersonal vulnerability. The present findings extend this body of literature by operationalising the concept of perceived parental blame and demonstrating that its associations with stress, depression and anxiety are statistically mediated by emotion-regulation difficulties.

Converging evidence also links parental dynamics with emotion (dys)regulation (e.g., Brumariu & Kerns, 2018; Soenens & Vansteenkiste, 2010; Galliher et al., 2017). The current findings on mediation align with these models, suggesting that early relational environments influence regulatory repertoires, which in turn contribute to adult distress. Furthermore, emerging research highlights the importance of positive family processes in supporting well-being. Arslan (2024) posited that positive parenting is associated with adolescents' well-being via prosocial behaviour and meaning in life. In a similar vein, Vallejo-Correa et al. (2025) emphasised the protective role of secure family relationships. Finally, Karagiannaki and Burchardt (2024) highlighted the effects of family structures on developmental outcomes. The present study offers a complementary contribution to the extant literature in this field, demonstrating how perceived blame may potentially compromise emotional development. In addition, it provides a reliable tool for the assessment of this phenomenon

The observed pattern, which has been demonstrated to be associated with heightened levels of perceived parental blame and subsequent emotion-regulation difficulties, is consistent with theoretical perspectives concerning the aetiology of psychological distress (e.g., Bowlby, 1988; Mikulincer & Shaver, 2016). However, the present study does not make any assertions regarding the directionality of the relationships observed.

The Relationship Between Emotion Regulation and Psychological Health

Emotion regulation has been identified as a pivotal component in the management of stress and the cultivation of psychological resilience (Gross, 2015;

Aldao et al., 2010; Berking & Whitley, 2014). In the present study, the presence of emotion-regulation difficulties was found to significantly mediate the associations between perceived parental blame and psychological symptoms. This finding aligns with prior research (Gratz & Roemer, 2004; Troy et al., 2018), which demonstrated that enhanced regulatory capacity, characterised by reduced difficulties, is associated with reduced levels of stress, anxiety, and depression. The comparatively strong standardized path to stress ($\beta = .515$) underscores the value of targeting regulation processes in contexts where retrospective blame is salient. These results align with developmental models that propose that the socialisation of emotions within the family context is a contributing factor to the development of later coping mechanisms (Morris et al., 2007; Luyten et al., 2020).

Place of the Scale in the Literature and Suggestions for Future Research

The PPBS addresses a measurement gap regarding early relational adversity. Whereas widely utilised tools such as the Inventory of Parent and Peer Attachment (IPPA; Arnsden & Greenberg, 1987) assess broader constructs (attachment, support), the PPBS focuses specifically on perceived parental blame. This specificity enables the execution of nuanced tests of how early blame relates to later mental health, thereby inviting both theoretical and applied investigations.

Future research should (a) examine cross-cultural validity, (b) test the measure in diverse demographic contexts (education levels, marital status, and non-clinical vs. clinical samples), and (c) evaluate interventions that target emotion regulation among those reporting high perceived parental blame. Pre-registered longitudinal designs and experimental manipulations would be particularly informative for tracing temporal sequences and for testing potential moderation (e.g., whether high regulatory capacity or supportive relationships buffer the PPBS–distress associations).

Theoretical and Practical Contributions

Theoretically, the PPBS contributes to the advancement of the study of parent–child relational dynamics by offering a well-defined construct and a validated instrument. The SEM findings provide further elucidation on the interrelation between perceived parental blame, emotion-regulation difficulties, and indicators of adult distress.

The practical implications of the findings indicate that the PPBS should be integrated into family therapy and adult psychotherapy intake procedures for the purpose of screening for retrospective blame dynamics that may correspond to current interpersonal schemas. Case formulations have the capacity to explicitly

establish a connection between internalised blame narratives and regulatory patterns (e.g., suppression/avoidance versus cognitive reappraisal), thereby providing a framework for the development of skills-based interventions. Psychoeducational and parent education programmes may emphasise non-blaming communication, validation, and problem-focused support to reduce the likelihood that blame-based exchanges are internalised as enduring self-views.

Limitations and Suggestions for Future Studies

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Conclusion

The present study emphasises the significance of perceived parental blame for adult psychological distress and identifies emotion-regulation difficulties as a pivotal mediating mechanism connecting these constructs. The PPBS offers a psychometrically robust instrument for the assessment of a hitherto under-examined facet of childhood relational adversity. The findings emphasise the importance of early prevention and skills-based interventions that enhance emotion regulation. The present study contributes to the field by isolating a measurable dimension of family dynamics that relates to adult well-being. This is achieved by means of an evidence-based approach to research and practice. The integration of the PPBS into clinical assessments, educational programmes, and family therapy has the potential to promote psychological resilience and emotional health across the lifespan.

Author's Notes

Data availability statement: The datasets generated during and/or analyzed during the current study are available from the corresponding author on reasonable request.

Compliance with Ethical Standards

Ethical Approval: Ethical approval was not required for this study because it involved minimal risk survey research with adult participants and did not include any sensitive personal data. The study was conducted in accordance with the ethical standards of the Declaration of Helsinki.

Informed Consent: All participants were informed about the study and provided written informed consent prior to participation. Before collecting data for this research, permission was obtained from all participants. Approval statements were also received from each person whose data was collected.

Conflict of Interest: The author declares no conflict of interest.

Consent to Publish: The author gives full consent for the publication of this manuscript.

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Author Contributions: Nesrullah Okan conceived the study, collected and analyzed the data, and wrote the manuscript.

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