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Emotional Abuse Questionnaire: a validity and reliability study

Melike Yavaş Celik ^a and Erhan Elmaoğlu^b

^aFaculty of Health Sciences, Department of Midwifery, Gaziantep University, Gaziantep, Turkey; ^bYusuf Şerefoğlu Faculty of Health Sciences, Department of Nursing, Kilis 7 Aralık University, Kilis, Turkey

ABSTRACT

This study aims to evaluate the validity and reliability of the Emotional Abuse Questionnaire (EAQ) in Turkish. This psychometric study was conducted between 01/02/2021 and 31/04/2021, with 341 adolescents aged 12–19. Data were analyzed with SPSS and LISREL programs. Language validity of EAQ was determined to be appropriate after translation-back translation and expert opinion. The sample adequacy calculated for the EAQ was evaluated as very good Kaiser Mayer Olkin (KMO = 0.94, $X^2 = 4104,42$). In the Confirmatory Factor Analysis (CFA), of the EAQ revealed that 29 of the 30 items were suitable for Turkish society, they preserved their 6-factor structure, and the factor loads of the items ranged from 0.40 to 0.87. and the CFA fit index values were within acceptable limits/perfect fit limits. In this study, Cronbach's alpha reliability coefficient was found to be 0.94. The two half reliability levels of the scale were evaluated as 0.91. A strong and highly significant positive correlation was observed in the test-retest results ($r = 0.92$). Turkish adaptation of EAQ; It was concluded that it has sufficient internal reliability and validity to be able to evaluate emotional abuse and can be easily applied.

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Validity; reliability; emotional abuse

Introduction

Emotional abuse, which is one of the types of abuse, is defined as behaviors that are frequently encountered in normal life, applied to children by parents, relatives and adults in the environment, and that negatively affect the personality and psychosocial development of children (Şahiner et al., 2001). Emotional abuse is behavior that will negatively affect the psychosocial development of the child. Not taking care of the child, ignoring the child, using words that will hurt the child, saying words that will hurt the child and insulting the child are behaviors seen in emotional abuse (Krug et al., 2002). In the report prepared as a result of the research conducted by UNICEF in our country in 2010, it was found that girls between the ages of 7 and 17 are most exposed to emotional abuse by their friends, mothers, fathers and teachers. In addition, in this report, it was stated that children were treated with insulting

CONTACT Melike Yavaş Celik  melikedogu71@gmail.com  Faculty of Health Sciences, Department of Midwifery, Gaziantep University, Gaziantep, Turkey

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words, shouting, mocking, threatening, comparing them with other people, and insulting them (UNICEF, 2010). In the study in which 89 children who were exposed to abuse were examined by Ege University Child Protection Unit, 49.4% of children were exposed to sexual abuse, 24.7% to physical abuse, 11.2% to emotional abuse and 14.6% to neglect was determined (Koç et al., 2012). It is seen in this study that the rate of emotional abuse is not a rate to be taken lightly.

In addition, in a study conducted in 2019, it was stated that child abuse was associated with depressive disorders, post-traumatic stress disorder and anxiety (Gardner et al., 2019). In another study, abuse experienced during childhood; It has been stated that it has negative effects on the cognitive development of the child and causes situations such as fear of rejection, hopelessness, self-blame, low self-esteem, fear of abandonment and hopelessness (Messman-Moore & Ve Brown, 2004). For this reason, emotional abuse and neglect treatments should be very comprehensive and should be done by taking into account the family, friends and other environmental factors of the child who was exposed to abuse (Şahiner et al., 2001).

It has been seen that abuse is a social problem in our country and all over the world and cannot be stopped (UNICEF, 2010; World Health Organization, 2020). In addition, in a study conducted in our country, it was determined that only 35.3% of the nurses knew the definition of neglect and 25% of them knew the definition of abuse (Arıkan et al., 2000). In other studies conducted in our country, it was stated that nurses were insufficient in diagnosing the symptoms and risks of child abuse and neglect (Bağ & Bozkurt, 2021; Çalışkan & Yılmaz, 2019). When we look at the studies conducted by Tonmyr et al., (2011), Karakurt et al. (2009), Demirtaş et al. (2018), and Murphy and Hoover (1999) on this subject, we see that there are generally scales that examine dating relationships. In the review study of Tonmyr et al. (2011), in which scales developed by researchers working in different countries were examined, it was reported that various scales were also used to evaluate whether children of different ages were exposed to emotional abuse (Tonmyr et al., 2011; Demirtaş et al., 2018; Karakurt et al., 2009; Murphy & Hoover, 1999). However, the absence of such a scale in our country is a handicap for Turkish children.

The rights and protection of children, the most vulnerable of all populations, are international concerns that have motivated social activists to advocacy and intervention on their behalf throughout the past century. At the forefront of this battle are the professionals from various disciplines who are involved in the prevention, identification, assessment, and treatment of the abuse. The present and future well-being of the child who has experienced abuse or neglect may be dependent on whether or not an interdisciplinary, holistic treatment perspective is applied in a hospital setting (Harr et al., 2008; Tien et al., 2002). However, all health workers, especially nurses and social

workers who take care of children have an important role in the early diagnosis and prevention of abuse and neglect, and in educating parents and all individuals in the society. Because nurses and social workers are usually the first to meet and communicate with children and parents (Schols et al., 2013). Nurses, social workers and other healthcare professionals also need appropriate tools to identify and evaluate abuse and neglect. Also, care should be taken in the evaluation of this special situation. Therefore, it would be useful to use various scales.

In order for a scale developed in one society to be adapted to another society, some criteria must be met. Preserving the originality of the scale is one of them. Whether the scale preserves its originality can be determined by analyzing factor loads. Therefore, it is a very important criterion for us to preserve the six-factor structure (Verbal Abuse, Excessive Control, Intimidation, Insufficient Control, Emotional Rejection, and Excessive Expectation factors) found in the Original Emotional Abuse Questionnaire. According to this criterion, it can be said that all the items used in the scale function properly. Another criterion is that the average scores obtained from the evaluations of the test and posttest participants are similar. In addition, it is an indispensable criterion to ensure internal consistency between items. In this direction, the Cronbach alpha coefficient should be checked and the correlation between the items should be examined. When all these conditions are met, it can be said that the scale is a usable scale for Turkish society (Seçer, 2015).

Accordingly, The aim of this study is to adapt the “Emotional Abuse Questionnaire” developed in Malaysia to Turkish society. With this scale, emotional abuse in children can be determined and child health can be protected by taking the necessary precautions in this regard.

Hypotheses of Hypothese

H1: The six factors found in the original Emotional Abuse Questionnaire (Verbal Abuse, Excessive Control, Intimidation, Insufficient Control, Emotional Rejection, and Excessive Expectation factors) will be retained in the revised measure.

Method

Type of research

The research was carried out psychometric study in order to realize the validity and reliability of the Emotional Abuse Scale developed in Malaysia by ; Momtaz et al., 2020) in order to adapt it to the Turkish society.

Research population and sample

The universe of the research consisted of adolescents between the ages of 12 and 19 in a school located in the city center. The sample consisted of students between the ages of 12–19, who volunteered to participate in the study, and who could be reached by mobile phone. Since the Emotional Abuse Scale consists of 30 items, the sample size was determined as 300, since at least 5 to 10 times as many samples should be taken from the items (Seçer, 2015), and the study was completed with the participation of a total of 341 students. In addition, 90 people were interviewed apart from this sample within the test-retest.

Inclusion criteria for research

- Being between the ages of 12–19,
- Volunteering to participate in the research.
- To be able to use social media.
- To not have physical disability
- To have smart mobile phone

Exclusion criteria from research

- To have psychiatric diagnosis,
- Using substances,
- Participating in any psychological support group,
- Experiencing a loss at least 6 months ago.

Data collection and data collection tools

Data collection

A web-based survey was created by researchers to minimize face-to-face interaction due to the Covid-19 pandemic. The created web-based survey was shared in the mail and social media applications. Identity information of individuals were not recorded in the survey. In the research, data were collected online between 01/02/2021 and 31/04/2021. The Emotional Abuse Scale, which covers adolescents aged 12–19, and a questionnaire containing information about their individual characteristics were used to collect the data.

Data collection tools

Question form. : Question form created by the researchers; It consists of demographic questions about adolescent people such as age, marital status, number of children, family structure.

Emotional Abuse Questionnaire. : Emotional Abuse Questionnaire was developed by Momtaz et al. (2020) in Malaysia. The scale is intended for adolescents

aged 12–19. The scale has 30 items and 6 factor. The scale was created in a 5-point likert type and six factors such as Verbal abuse (1,2,3,7,11,12,13,17,21), Over control (4,5,14,15,23,25,30), terrorizing (10,20,24,29), Insufficient control (6,8,16,18,26), Emotional rejection (13,22,28), Overexpectation (9,19,27). All factors have been preserved too in the Turkish version. In addition, all items were preserved except for item 3, which is only in the 1st factor. The cronbach alpha value of the scale developed by Momtaz et al. (2020) was found to be 0.93 (Momtaz et al., 2020). In this study, the Cronbach alpha value was determined as 0.93.

Analysis strategies

Data were statistically analyzed using SPSS 15.0 for Windows (Statistical Package for Social Sciences) and Lisrel 8.7 program. The translation-back translation method was used for language adaptation of the scale, and the Kendall's *W* test was used to assess content validity of the scale and concordance of expert opinions. Construct validity of the EAQ was examined by CFA. EAQ and Barlett's tests were used to determine the sampling adequacy before conducting the factor analysis. Test-retest method, Cronbach's alpha coefficient, equivalent form reliability, and split-half method were used for reliability study of the scale. Pearson product-moment correlation coefficient (Pearson's correlation) was calculated to examine the relationship between item scores. Also, dependent samples *t*-test was used to examine the difference between total mean scores of EAQ items in the test-retest group (Jackson et al., 2009; Tonmry et al., 2011).

Ethics of research

Ethics committee approval was obtained from the non-interventional clinical research ethics committee of a university in order to conduct the study. The purpose of the research was written on the digitally prepared form and volunteerism was taken as basis. This study was conducted in accordance with the Principles of the Declaration of Helsinki.

Results

Validity of Emotional Abuse Questionnaire

Language adaptation and content validity

The translation-back translation method was used to test language validity of the EAQ. Opinions of 13 experts were received to evaluate content validity of the scale. Accordingly, they scored the scale items between 2 and 4 out of 4,

where the mean score was between 3.6 and 4. The Kendall's W test statistics showed a good level of agreement among the experts ($p > .05$).

Construct validity

Before factor analysis, KMO is recommended to use in determining the adequacy of sample size and the Bartlett's test in examining the suitability of sample for factor analysis. The KMO value varies between 0 and 1, where the value is expected to be above 0.60 (Seçer, 2015). In order to apply factor analysis to a data set, the sphericity test, which tests the integrity of the population and developed by Bartlett, is used. In factor analysis, unlike regression analysis, a high correlation relationship is sought between the variables. In this context, whether there is a significant relationship between the variables in the population is tested with the Bartlett test (Nakip, 2013). It was determined that the KMO coefficient, in which the sample size was evaluated, was 0.94, and the chi-square value ($X^2 = 4104,42$) and p value ($p = .01$) of the Bartlett test were significant at the $p < .05$ significance level.

Confirmatory Factor Analysis (CFA) investigates construct validity and is performed to determine whether the available data conforms to the original structure. Thus, the researcher tests whether the available data is compatible with the previously constructed factor structure. CFA is a validity determination method especially used in adaptation of assessment tools developed in other cultures and samplings. In other words, CFA is an analysis aimed at evaluating to what extent the factors formed using many variables with the support of an institutional basis match the actual data. REMSEA between 0.05 and 0.08, NFI 0.90 and above, NNFI 0.90 and above, IFI = .90 and above, RFI = .90 and above, CFI 0.95 and above, GFI 0.85 and above, the AGF 0.85 and above, and the RMR to be between 0.05 and 0.08 is expected to be (Ercan & Kan, 2004;Çakmur, 2012; Seçer, 2015). In this study, CFA was applied for construct validity. When the factor structure of the EAQ was examined, all items and factors were preserved except for the 3rd item (Table 1). When the CFA fit indices values were examined, it was determined that all values were within the acceptable and perfect fit limits. Two types of reliability criteria, internal consistency and time invariance, should be tested on a measurement too (Gözüm & Aksayan, 2003). In this study, internal consistency (Cronbach's alpha reliability coefficient, split-half method) and time-invariance (test re-test) method were used to determine the reliability of EAQ.

For construct validity of the scale, the sample size was first tested by KMO and Bartlett's Test, where the sample size was evaluated as very good according to the results ($KMO = 0.94$, $X^2 = 4104.42$, $p = .01$). The CFA revealed that the EAQ preserved its 29 item 6 factor structure, where the item factor loads varied between 0.40 and 0.87 Accordingly, all CFA fit indices were within acceptable/perfect fit limits (NFI = 0.94, NNFI = 0.96, IFI = 0.97, RFI = 0.92,

CFI = 0.97, GFI = 0.93, AGFI = 0.89, RMR = 0.07, REMSEA = 0.06, $\chi^2/SD = 2.41$).

Reliability of Emotional Abuse Questionnaire

Internal consistency findings

Cronbach's alpha coefficient is frequently used in Likert-type scales. The consistency between scale items is determined by calculating the Cronbach's alpha coefficient. The Cronbach's alpha coefficient should be 0.60 and above, where a value varies between 0.00–0.40 refers to unreliability, 0.40–0.60 to a low reliability, 0.60–0.80 to reliability, and 0.80–1.00 to a high reliability (Karagöz, 2017). In the analysis performed for the internal consistency of the 6-factor EAQ in this study, the Cronbach alpha reliability coefficient was found to be 0.93 and was considered quite high. When the item-total score correlations of 29 items of the EAQ were examined for reliability, it was determined that it was between 0.40 and 0.87. In the study of Momtaz et al. (2020), who developed the EAQ, the cronbach alpha value was found to be 0.93 (Momtaz et al., 2020). The split-half method is obtained by dividing the available data into two equal parts and examining the consistency between these two equal parts. This method has been developed to eliminate both the time invariance problem arising in the test retest method and the difficulty finding equivalent forms in the equivalent form reliability. This is calculated using the Spearman-Brown Prophecy formula to find the reliability coefficient for the entire scale. If the Spearman-Brown value is greater than 0.70, the internal consistency reliability is considered high (Seçer, 2015). In the analysis performed by the split-half method in the study, it was determined that the Spearman-Brown correlation value was $r = 0.92$ and the Guttman Split-Half value was $r = 0.91$, and the two-half reliability level of the scale was found to be at the recommended levels as 0.91). Also, it was determined that the mean score of the scale items was between 0.75 and 1.99. Cronbach's alpha values of the scale items were found to be between 0.931 and 0.935.

For the reliability of the study, the Cronbach Alpha reliability coefficient was found to be 0.93 in the analysis for the internal consistency of the single-factor EAQ. Spearman-Brown correlation value was $r = 0.916$, Guttman Split-Half value was $r = 0.914$ in the analysis made by halving method. The two-half reliability level of the scale was evaluated as 0.91. It was determined that the mean score of the scale items was between 0.75 and 1.99. Cronbach's alpha values of the scale items were found to be between 0.931 and 0.935 (Table 4).

In the analysis performed by the split-half method in the study, it was determined that the Spearman-Brown correlation value was $r = 0.92$ and the Guttman Split-Half value was $r = 0.91$, and the two-half reliability level of the scale was found to be at the recommended levels as 0.91). Also, it was determined that the mean score of the scale items was between 0.75 and

1.99. Cronbach's alpha values of the scale items were found to be between 0.931 and 0.935.

Inter-item correlation (r)

Evaluation of correlation between items is one of the reliability analysis. This correlation is expected to be strong among items in the same subgroup (Widhiarso & Ravand, 2014). In our study, results were obtained in this direction. It was found that there was a correlation between the items with r values varying between 0.10 and 0.53 ($p = .000$; Table 2, Table 3). It was observed that there was a stronger correlation between the items in the subgroups of the scale (Table 2, Table 3).

Regarding invariance over time findings

Time invariance, another method used for reliability, is a time sampling model. In the test retest method, the measurement tool is administered to a certain group continuously or after a certain time (desired time interval is 15 to 30 days). Thus, the test-retest reliability of the scale is determined by testing the correlation between the two administrations. The recommendation is to study at least 30 people for test-re-test analysis (Seçer, 2015; Tavşancıl, 2002). In this study, test retest results on 90 people were examined and a strong and statistically significant positive correlation was found between the two applications ($r = 0.92$). For the invariance over time, the mean scores obtained from the first and second applications, which were applied with an interval of 15 days, were compared with the t -test in the dependent groups and no statistically significant difference was found between the two mean scores ($p > .00$). In addition, the Cronbach alpha coefficient was found to be 0.90 in the test-retest group. In the light of these results, it can be argued that the responses of the mothers to the EAQ did not change over time.

The analysis for time invariance of the scale revealed a statistically significant strong positive relationship between the EAQ scores when the scale was administered twice in 15 days intervals ($r = 0.92$). In addition, the mean scores obtained from the first and second administrations were compared using the dependent samples t -test, and no statistically significant difference was found between them ($p > .05$)

Discussions

Although emotional abuse is common, it has received less research attention than physical and sexual abuse and exposure to domestic violence (Teicher et al., 2006). This could be due to under-reporting and/or psychometric challenges related to ambiguous definitions and difficulty measuring actions that constitute emotional abuse. Perhaps misconceptions regarding seriousness have also led to less attention. The challenge of delineating emotional/

Table 2. The correlation matrix among all of the items.

Items	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
1	-	0.42	0.40	0.19	0.35	0.19	0.38	0.28	0.26	0.11	0.33	0.21	0.26	0.27	0.34
2	0.42	-	0.46	0.20	0.32	0.15	0.43	0.35	0.28	0.08	0.35	0.27	0.36	0.26	0.32
3	0.40	0.46	-	0.20	0.44	0.28	0.41	0.40	0.27	0.06	0.41	0.30	0.46	0.32	0.40
4	0.19	0.20	0.20	-	0.39	0.25	0.30	0.32	0.22	0.15	0.20	0.30	0.17	0.33	0.31
5	0.35	0.32	0.44	0.39	-	0.15	0.44	0.33	0.33	0.12	0.33	0.23	0.29	0.38	0.43
6	0.19	0.15	0.28	0.25	0.15	-	0.24	0.34	0.17	0.13	0.30	0.30	0.32	0.29	0.27
7	0.38	0.43	0.41	0.30	0.44	0.24	-	0.42	0.41	0.23	0.34	0.34	0.36	0.31	0.45
8	0.28	0.35	0.40	0.32	0.33	0.34	0.42	-	0.29	0.25	0.46	0.41	0.40	0.36	0.45
9	0.26	0.28	0.27	0.22	0.33	0.17	0.41	0.29	-	0.07	0.24	0.31	0.32	0.22	0.40
10	0.11	0.08	0.06	0.15	0.12	0.13	0.23	0.25	0.07	-	0.22	0.24	0.16	0.18	0.19
11	0.33	0.35	0.41	0.20	0.33	0.30	0.34	0.46	0.24	0.22	-	0.37	0.36	0.32	0.42
12	0.21	0.27	0.30	0.30	0.23	0.30	0.34	0.41	0.31	0.24	0.37	-	0.41	0.32	0.36
13	0.26	0.36	0.46	0.17	0.29	0.32	0.36	0.40	0.32	0.16	0.36	0.41	-	0.42	0.41
14	0.27	0.26	0.32	0.33	0.38	0.29	0.31	0.36	0.22	0.18	0.32	0.32	0.42	-	0.45
15	0.34	0.32	0.40	0.31	0.43	0.27	0.45	0.45	0.40	0.19	0.42	0.36	0.41	0.45	-
16	0.19	0.13	0.11	0.07	0.06	0.24	0.18	0.17	0.11	0.24	0.21	0.18	0.20	0.19	0.10
17	0.33	0.36	0.40	0.29	0.33	0.29	0.38	0.49	0.29	0.38	0.49	0.30	0.24	0.48	0.53
18	0.42	0.45	0.40	0.17	0.29	0.34	0.45	0.42	0.34	0.17	0.38	0.31	0.50	0.36	0.48
19	0.40	0.30	0.38	0.07	0.34	0.22	0.39	0.33	0.48	0.14	0.35	0.31	0.41	0.33	0.37
20	0.30	0.28	0.30	0.27	0.30	0.25	0.35	0.41	0.26	0.28	0.43	0.43	0.37	0.37	0.37
21	0.27	0.34	0.41	0.24	0.31	0.26	0.31	0.26	0.51	0.45	0.39	0.23	0.37	0.47	0.49
22	0.35	0.34	0.43	0.26	0.25	0.38	0.39	0.44	0.30	0.19	0.45	0.36	0.43	0.24	0.37
23	0.26	0.23	0.24	0.34	0.34	0.25	0.29	0.27	0.22	0.29	0.28	0.27	0.22	0.28	0.39
24	0.21	0.19	0.22	0.19	0.12	0.24	0.19	0.32	0.14	0.27	0.33	0.32	0.20	0.22	0.26
25	0.26	0.36	0.41	0.34	0.37	0.27	0.34	0.35	0.33	0.22	0.44	0.37	0.46	0.44	0.48
26	0.38	0.36	0.46	0.21	0.28	0.37	0.40	0.44	0.31	0.25	0.40	0.37	0.45	0.41	0.41
27	0.32	0.34	0.40	0.16	0.30	0.22	0.40	0.26	0.40	0.11	0.29	0.25	0.29	0.23	0.30
28	0.35	0.35	0.40	0.27	0.27	0.36	0.37	0.39	0.22	0.23	0.41	0.37	0.36	0.33	0.43
29	0.23	0.23	0.30	0.24	0.21	0.27	0.25	0.36	0.21	0.35	0.36	0.37	0.30	0.30	0.34
30	0.29	0.33	0.36	0.23	0.35	0.28	0.35	0.28	0.38	0.34	0.40	0.16	0.33	0.35	0.42

psychological maltreatment from co-occurring types of abuse and neglect may also influence reporting (Brassard et al., 1993; Gracia, 1995). In Turkish culture, Demirtaş et al. and Karakurt et al. There are scales for various age groups adapted by (Demirtaş et al., 2018; Karakurt et al., 2009). However, this tool is not an appropriate assessment tool for the adolescent group we want to reach. Therefore, having a vehicle suitable for this adolescent group will make it easier to address this problem in our society. Also, thanks to this scale, which we have adapted to Turkish culture, the emotional abuse of children can be evaluated and necessary interventions can be made for these children. Therefore, the importance of this scale is great. The aim of this study is to adapt the “Emotional Abuse Questionnaire” developed in Malaysia to Turkish society. With this research, it has been determined that EQA is a reliable and valid tool for Turkish culture. In the literature, It is expected to take values from NFI, NNFI, IFI and RFI are at least 0.90 and above, CFI is 0.95 and above, GFI and AGFI are 0.85 and above, RMR and REMSEA are between 0.50 and 0.80, and X^2/SD is small than three (Seçer, 2015). In this study, all CFA fit indices were within acceptable/perfect fit limits. When we look at the other analyzes made to adapt the scale to Turkish society, these values were found to

Table 3. The correlation matrix among all of the items.

Items	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30
16	-	0.24	0.24	0.22	0.26	0.14	0.24	0.17	0.26	0.21	0.30	0.21	0.24	0.30	0.18
17	0.24	-	0.47	0.29	0.42	0.47	0.44	0.32	0.32	0.37	0.43	0.37	0.40	0.31	0.36
18	0.24	0.47	-	0.47	0.41	0.51	0.46	0.32	0.18	0.41	0.53	0.36	0.48	0.28	0.44
19	0.22	0.29	0.47	-	0.32	0.48	0.32	0.24	0.17	0.34	0.47	0.42	0.33	0.28	0.41
20	0.26	0.42	0.41	0.32	-	0.42	0.36	0.39	0.43	0.49	0.42	0.29	0.34	0.40	0.47
21	0.14	0.47	0.51	0.48	0.42	-	0.57	0.36	0.25	0.44	0.45	0.40	0.39	0.33	0.38
22	0.24	0.44	0.46	0.32	0.36	0.57	-	0.31	0.27	0.36	0.54	0.33	0.51	0.37	0.31
23	0.17	0.32	0.32	0.24	0.39	0.36	0.31	-	0.28	0.45	0.34	0.18	0.28	0.36	0.36
24	0.26	0.33	0.18	0.17	0.43	0.25	0.27	0.28	-	0.31	0.30	0.20	0.29	0.43	0.30
25	0.21	0.37	0.41	0.34	0.49	0.44	0.36	0.45	0.31	-	0.43	0.37	0.35	0.45	0.53
26	0.30	0.43	0.53	0.47	0.42	0.45	0.54	0.34	0.30	0.43	-	0.37	0.52	0.40	0.38
27	0.21	0.37	0.36	0.42	0.29	0.40	0.33	0.18	0.20	0.37	0.37	-	0.32	0.23	0.43
28	0.24	0.40	0.48	0.33	0.34	0.39	0.51	0.28	0.29	0.35	0.52	0.32	-	0.33	0.42
29	0.30	0.31	0.28	0.40	0.33	0.37	0.36	0.43	0.45	0.40	0.23	0.33	0.33	-	0.37
30	0.18	0.36	0.44	0.41	0.47	0.38	0.31	0.36	0.30	0.53	0.38	0.43	0.42	0.37	-

be quite appropriate. For example, The first method used for a scale adaptation is language adaptation. In scale adaptation studies, the translation should be understandable to minimize the diversity between two cultures(Öner, 2009). The translation-back translation method is preferred widely in language adaptation (Aksayan & Gözüml, 2002; Öner, 2009). The translation-back translation method was used for language adaptation of all translations of the scale by comparing them with the original text, and the expressions that best reflected the scale items were selected and arranged. Afterward, the back translation was made independently by two health experts who understood both Turkish and English languages very well, and no significant difference was found between the meanings of the two translations. Appropriate results were also obtained in the analyzes made for content validity. 13 experts were interviewed for content validity, which is used to determine the extent to which the scale explains the subject as a whole and by evaluating each item in the scale (Ercan & Kan, 2004; Vehid & Eral, 2014). As a result, it was found that the opinions of the experts were similar to each other. In the analysis performed for the internal consistency of the 6-factor EAQ in this study, the Cronbach alpha reliability coefficient was found to be 0.93 and was considered quite high. When the item-total score correlations of 29 items of the EAQ were examined for reliability, it was determined that it was between 0.40 and 0.87. In the study of Momtaz et al. (2020), who developed the EAQ, the cronbach alpha value was found to be 0.93 (Momtaz et al., 2020). In addition, it was observed that the Spearman-Brown correlation value and the two-half reliability level were appropriate in the analysis made with the half-and-half method. Evaluation of correlation between items and invariance over time are among the analysis used for reliability. When we look at the results of these analyzes, it was determined that they met the criteria. In order to prevent children from experiencing abuse, well-developed scales that allow in-depth questioning with detailed questions are needed. EAQ developed by ; Momtaz

Table 4. Cronbach's alpha, mean, standard deviation and correlation of Emotional Abuse Questionnaire scale items.

	Mean	Std. Deviation	Corrected Item-Total Correlation	Squared Multiple Correlation	Cronbach's Alpha if Item Deleted
Item1	1.51	1.04	0.50	0.37	0.93
Item2	1.51	1.04	0.52	0.38	0.93
Item3	1.33	1.05	0.59	0.47	0.93
Item4	1.21	1.05	0.39	0.33	0.93
Item5	1.61	1.17	0.50	0.42	0.93
Item6	1.11	1.08	0.44	0.28	0.94
Item7	1.99	1.12	0.61	0.46	0.93
Item8	1.12	1.01	0.61	0.44	0.93
Item9	1.99	1.21	0.48	0.38	0.93
Item10	0.84	0.89	0.31	0.24	0.93
Item11	1.07	1.02	0.59	0.43	0.93
Item12	1.09	1.07	0.56	0.43	0.93
Item13	1.23	1.04	0.60	0.47	0.93
Item14	1.09	1.07	0.53	0.38	0.93
Item15	1.31	1.02	0.63	0.49	0.93
Item16	1.19	1.17	0.31	0.22	0.93
Item17	1.20	1.07	0.63	0.51	0.93
Item18	1.38	1.21	0.65	0.54	0.93
Item19	1.55	1.07	0.56	0.49	0.93
Item20	0.86	1.04	0.60	0.45	0.93
Item21	1.56	1.22	0.65	0.57	0.93
Item22	1.20	1.14	0.62	0.53	0.93
Item23	1.09	1.03	0.49	0.36	0.93
Item24	0.75	0.82	0.42	0.32	0.93
Item25	1.13	0.96	0.64	0.52	0.93
Item26	1.13	1.17	0.67	0.52	0.93
Item27	1.79	1.16	0.51	0.37	0.93
Item28	1.07	1.10	0.60	0.45	0.93
Item29	0.91	0.91	0.53	0.40	0.93
Item30	1.13	1.13	0.61	0.47	0.93

et al., 2020). It is a very good tool to identify emotional abuse. With this study, all items and sub-dimensions of EAQ were adapted to Turkish culture. As a result of the study, it was determined that this scale can also be used for Turkish culture. Thus, it has been ensured that this tool can be used in Turkish society.

Conclusion

Emotional abuse is a situation that negatively affects child development and prevents the child from gaining self-confidence. Not taking care of the child, ignoring the child, using words that will hurt the child, saying words that will hurt the child and insulting the child are behaviors seen in emotional abuse. Such behaviors negatively affect the child's personality and psychosocial development. Therefore, these children should be handled carefully. The most appropriate treatment and follow-up approach to abuse cases can be provided by a multidisciplinary team work. For this reason, it is important to establish "child protection units" in the hospital, which includes health

professionals from different specialties related to children, and ensures the most appropriate treatment. This unit should include pediatricians, pediatric nurses, child psychiatrists, forensic medicine specialists, pediatric surgeons, emergency services and social workers. In case of detection of child abuse and neglect, the first intervention is to protect the child or young person from repeated abuse. For this, first of all, it should be ensured that the family is dealt with socially, monitored, benefiting from social supports, if it is not successful, the child should be removed from the family quickly and included in an appropriate social support program. After the abuse is determined, treatment should be planned by making evaluations such as physical, forensic and mental examinations. It is also necessary to take initiatives to initiate the legal process and to protect the rights of the child. Meanwhile, other members of the family and their children should also be taken under surveillance. Building strong children is easier than mending broken adults. For this reason, it is necessary to prevent emotional abuse and all kinds of abuse in order to prevent children from living a fragile, unable to cope with life and traumatic life in their future lives.

Limitations of the research

In this study, data could not be collected face to face due to the COVID-19 pandemic. In addition, the limitations of the study are that the research is conducted in a city and it is conducted with students using social networks in a certain time period.

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ORCID

Melike Yavaş Celik  <http://orcid.org/0000-0002-1155-1022>

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