



Psychological Maltreatment as a Predictor of Anxiety Sensitivity Among Females

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Abstract: Psychological maltreatment can involve emotional abuse or emotional neglect. It is also one of the most frequent and least understood forms of childhood adversity. Emotional abuse is an active scenario and emotional neglect is passive, and while both do not leave physical injuries, emotional and psychological maltreatment does not mean the injuries do not exist. There are real psychological injuries, and while they may not be apparent or visible, the emotional injuries and psychological vulnerabilities certainly exist. Anxiety sensitivity, which is the fear of anxiety and related sensations, is an important cognitive risk factor for the development and persistence of anxiety disorders. This study hopes to explore the role of psychological abuse and emotional neglect/ trauma in the development of anxiety sensitivity in the female gender. The study is anchored on the cognitive vulnerability framework and the developmental psychopathology framework to explore the role of psychological ill treatment in the development of anxiety sensitivity among young adult females. A cross sectional approach will be used in this study, and it will be descriptive and quantitative in nature. This means that it will be centred around the use of standardized, self-containing, self-defining measures of psychological maltreatment and anxiety sensitivity with the aim of providing an accurate, precise, and statistically relevant representation in the data. Psychometric testing and analysis will be conducted using the Pearson correlation and the ANOVA to measure the strength of the predictor and the importance of the predictor. Psychological abuse and emotional neglect will also be tested against anxiety sensitivity to measure the elasticity and the elasticity of the correlation. It is assumed that as psychological abuse increases, so will anxiety sensitivity in females. The study also considers socialisation

and gender-based patterns which increase vulnerability to internalising symptoms. The study aims to refine and contribute to literature that attempts to explain cognitive mechanisms of early emotional injuries that lead to anxiety vulnerability. The study will help understand the relationship that will help develop other protective mechanisms and psychological abuse neglect interventions to reduce the emotional distress and long-term psychological effects that result from emotional abuse and neglect.

Keywords: *Psychological maltreatment, Anxiety, Mental health, Women, Adversity, Cognitive, Internalising, Trauma, Distress*

1. Introduction

Early experiences with other people are important in developing mental health throughout someone's life. Of many types of adversity in childhood, psychological maltreatment has been recognized as a problematic and independent type and/or form of childhood adversity. Psychological maltreatment includes emotional abuse, like humiliation, emotional neglect (*APA PsycNet*, n.d.). Psychological maltreatment may not cause physically injuries, but it focuses directly on a child's developing self-esteem and sense of emotional security. Psychological maltreatment take place in emotional caregiving interactions and may go unrecognized but psychologically traumatizes a child.

Emotional abuse during childhood has long-lasting impacts because during this period kids are learning the basics of how to manage and understand what they feel, and develop a sense of safety and confidence. Neglecting emotional needs, and repeatedly communicating rejection, unpredictability, and criticism, caregivers tell the child the world really is a dangerous place and they are weak and inadequate. Infurna et al. (2015) found that emotional neglect and abuse are the strongest predictors of anxiety, depression and similar internalization problems. While emotional abuse is often downplayed and compared to physical abuse, which may instil the fear of predatory threats and therefore seem more justifiable, it is, in fact, far more insidious and road emotional abuse victim neglect of their emotional and physical responses and becomes predatory themselves.

Emotional abuse has long-reaching effects on how a child experiences stress and danger. Childhood trauma leads to changes to the structure of the brain, and more specifically the amygdala and the prefrontal cortex, which are significantly responsible for emotion control and danger assessment (Teicher & Samson, 2016). This causes the children to be more emotionally reactive and to panic more. Over time, repeated exposure to emotionally harmful

environments may foster chronic hyperarousal and sensitivity to stress cues, creating vulnerability to anxiety-related conditions.

Cognitive models of anxiety include numerous facets of potential vulnerability, one of the most central, anxiety sensitivity (AS). According to Taylor (2014), anxiety sensitivity is the fear of negative anxiety sensations as a result of the perception that such sensations could be dangerous. Someone with high anxiety sensitivity would perceive the common physical symptoms of anxiety, such as a racing heart, light-headedness, or simply the feeling of anxiety as a signal of a physical, psychological or social disaster. This way of thinking creates a heightened fear response which is detrimental to the development of anxiety disorders and the continuance of already existing anxiety disorders (Short et al., 2022). It is also critical to note that anxiety sensitivity is different from plain anxiety, as it is a fear of the experience of anxiety rather than the potential stressors that could provoke anxiousness.

Research posits anxiety sensitivity as a transdiagnostic risk factor that is present in a number of anxiety disorders, including but not limited to, panic disorder, social anxiety, and generalized anxiety (Short et al., 2022). Longitudinal studies demonstrated that an increased anxiety sensitivity is a predictor of anxiety symptoms, and this is still prominent when baseline distress is controlled for (Schmidt et al. 2010). Since anxiety sensitivity is based on interpretations of internal states that are maladaptive, it may serve as a cognitive mechanism by which emotional adversity in childhood increases the risk of anxiety in the future.

Psychological mistreatment may facilitate the development of anxiety sensitivity in a number of ways. First, continuous emotional invalidation can lead children to see their feelings as insurmountable, unacceptable, or even dangerous. Parental or caregiver rejection of an emotionally expressive child could lead that child to feel an internal sense of paralysis to manage, control, or even eliminate those problematic feelings. Imbalanced or emotionally unstable caregivers can lead to children feeling as though they must control and manage their emotional state to avoid drawing the attention of others and be subject to the ridicule and rejection. The result of this attention to control is that the child becomes hyperaware of their bodily sensations in an anxiety-provoking situation. Research indicates that childhood emotional mistreatment is associated with anxiety and heightened response to stress (Infurna et al., 2015), which suggests that a child's internal alarm system is shaped by these early relational traumas.

Due to the unique challenges that females face, the relationship in question becomes even more pertinent. The literature reports that females experience greater prevalence of anxiety disorders than men (McLean et al., 2011). Socialization and culture, in addition to

biological and hormonal reasons, may explain this. Females are socialized to be more emotionally responsive and interpersonally more sensitive, which may increase the internalization of relational damage. Psychological abuse and, in particular, the rejections and humiliations may have more potent (cognitively) destructive effects on females and may increase self-criticism and fear of being negatively evaluated. Such thinking may worsen anxiety sensitivity and involve more catastrophizing about the feelings in the body.

In addition, research shows that the effects of emotional abuse are particularly potent in relation to social anxiety (Li et al., 2025). The fear of observable anxiety symptoms (e.g., fear of shaking, or fear of blushing) suggests that there is some kind of cognitive connection involving emotional abuse and its connection with social evaluative anxiety. In other words, emotional abuse could increase an individual's anxiety, but it also affects their thinking, creating the patterns that keep anxiety disorders present.

The emotional abuse and neglect studies show an understanding of the psychological consequences, but the anxiety studies focus on the effects and neglect the cognitive effects, such as anxiety sensitivity. Anxiety sensitivity is a cognitive consequence of psychological abuse that is important to highlight because it demonstrates the potential for change. Interventions aimed at the feelings of worry and the maladaptive interpretations associated with them can decrease the likelihood of the symptoms evolving into anxiety disorders. Conceptualizing psychological maltreatment as an initial marker for anxiety sensitivity in women is the aim of this study to demonstrate how early emotional abuse creates particular cognitive patterns.

Overall, psychological maltreatment is a critical developmental stressor that can mould the systems of emotional regulation, the perception of threat, and the fundamental beliefs about one's internal experiences. Anxiety sensitivity, which is a fear of the sensations of anxiety, can be one of the critical cognitive pathways through which early emotional adversity is translated into an increased risk of anxiety. The study of this association in women is likely to contribute to the understanding of the theories of the increased susceptibilities and to the development of focused goals of the prevention and the intervention for the anxiety disorders.

2. Review of Literature

Spinazzola et al. (2014) examined the emotional impact of abuse and neglect in children and youths. The study utilized a wide clinical sample to assess the prevalence of psychological maltreatment and its impact compared to other abuse types. The study's results presented psychological maltreatment to be an independent predictor of internalizing symptoms like

anxiety, depression, and self-esteem. It was also noted that emotional abuse, independent of physical and sexual abuse, was the strongest predictor of symptom severity. These results reinforce the fact that not only is psychological maltreatment all other forms of abuse, but an independent predictor of anxiety-related distress.

Using a community sample, Infurna et al. (2016) studied the impact of emotional abuse in childhood and the development of anxiety in adulthood. It was also found that emotional abuse specifically, was independent of other childhood adversities, the strongest predictor of symptom development. A study of this nature proposes emotional abuse to alter the development of an individual, both cognitively and emotionally, to an extent where the individual is predisposed to developing anxiety. It is important to examine the role of anxiety sensitivity as a possible cognitive mechanism that explains how early experiences of emotional injury may result in later development of an anxiety disorder.

Teicher and Samson (2016) reviewed the neurobiological studies of the enduring effects of childhood maltreatment. They found that emotional abuse and neglect have been linked to the structural and functional modifications in brain areas that perceive threats and regulate emotions (including the amygdala and the prefrontal cortex). Such brain changes may result in an increased perception of internal cues and the anxieties that are associated with them. These findings provide biological support for the changes associated with psychological maltreatment and cognitive vulnerabilities, particularly the development of increased anxiety sensitivity.

In her work, Taylor (2014) contributed a detailed theoretical and empirical account of anxiety sensitivity, specifically outlining it as the phenomenon involving a fear of anxiety sensations, prompted by the individual's belief that these sensations are damaging. The review detailed that anxiety sensitivity functions as a transdiagnostic risk factor for a number of anxiety disorders, and as such, individuals who present a high level of anxiety sensitivity display a likelihood of passing an extreme negative interpretation of a bodily sensation, thus amplifying the anxiety. This construction of anxiety sensitivity makes it a likely candidate as a mediator for the impacts of emotional neglect in childhood and anxiety disorders.

A longitudinal research study conducted by Schmidt et al. (2010) focused on whether sensitivity to anxiety impacts the development of anxiety disorders over a specified period. From the perspective of research, the authors demonstrated that increased anxiety sensitivity predicted the emergence of panic along with other anxiety symptoms, despite the presence of anxiety at the baseline. Thus, sensitivity to anxiety is more than a symptom; it is an indication of the development of an anxiety disorder. This is indicative of the value of sensitivity to anxiety as an outcome measure in the context of psychological maltreatment.

In the context of mood disorders and anxiety disorders, vulnerability cognitive transdiagnostic anxiety sensitivity was as a potential by Allan et al. (2014) in the study. In their research, the authors concluded that increased anxiety sensitivity correlated with increased emotional distress, worry, and behavioural avoidance. It was further concluded that cognitive vulnerabilities that include a distressing interpretation of the perceived bodily sensations are significant in maintaining anxiety pathology. This supports the argument that the perception of early emotional abuse, which is known to develop maladaptive cognitive schemas, may lead to an increased sensitivity to anxiety.

Liu et al. (2023) performed a meta-analysis studying the impact of emotional childhood maltreatment and the impact it has on the symptoms of social anxiety disorder. It was found that emotional abuse correlated more negatively with social anxiety than physical abuse and sexual abuse. Emotional maltreatment, as opposed to physical and sexual abuse, seems to be more closely related to the development of socially evaluative anxiety, and the fear of being negatively evaluated and the aforementioned socially evaluative anxiety symptoms.

McLean et al. (2011) on reviewing anxiety disorders, noted that depression and anxiety disorders are found more commonly in women as opposed to men. Even though the reasons for this have yet to be completely understood, it has been suggested that the answer lies in the combination of biological, cognitive, and social factors. It is possible that women are more likely to experience stress, which is caused by a combination of cognitive and emotional factors, making them more susceptible to anxiety especially in the wake of psychological abuse. This highlights the need to focus on women when studying cognitive vulnerabilities to anxiety disorders.

The 2009 study by Viana and Rabian looked at anxiety sensitivity and childhood anxiety symptoms in a non-clinical setting Viana and Rabian (2009) showed that anxiety sensitivity predicted both severity and functional impairment of anxiety. They explained that the fear of anxiety sensations elicits anxious response regardless of the absence of a real danger. This is evidence of anxiety sensitivity as a counterproductive response due to early emotionally painful events.

Myers et al (2024) looked at childhood maltreatment in relation to anxiety sensitivity and the associated distress. It was shown that the greater the emotional maltreatment a person reported, the greater the anxiety sensitivity, and the greater the associated impairment. The study showed that the harm psychologically explains the damage caused by emotional early distress. Hence, the study looks at psychological maltreatment as a predictor of anxiety sensitivity.

3. Method

3.1 Purpose of the study

The primary purpose of this study was to evaluate the degree to which psychological abuse predicts anxiety sensitivity in young females adults. The study was aimed to evaluate, the degree to which emotional abuse and dominance/control behaviours are correlated with increased fear of anxiety-related sensations. In examining this relationship, the study sought to illustrate psychological anguish as a possible cognitive vulnerability factor of anxiety sensitivity.

3.2 Hypothesis

Considering the empirical and theoretical literature, the following hypothesis was stated.

H₁: There is a significant positive relationship between psychological abuse and anxiety sensitivity in young adult females.

H₂: In young adult females, psychological abuse will significantly predict anxiety sensitivity.

3.3 Research Design

The study adopted a quantitative, cross-sectional correlational research design. Psychological abuse was the independent variable, while anxiety sensitivity was the dependent variable.

Out of the overall study sample consisting of a total of 156 young adult females aged 18 to 25 years, the participants were sourced from the Delhi NCR region through the use of convenience sampling methods. The research study limited outreach to participants that were only females as a means to target more pointedly the psychological maltreatment experiences that occur with females.

Participation in the study was completely voluntary. Inform consent was secured before any data was collected. Also, from the beginning to the conclusion of the study, participant anonymity and confidentiality were safeguarded.

3.4 Measures

Psychological Maltreatment of Women (PMWI): Tolman's PMWI was the first psychological abuse inventory for intimate partner relationships. Psychological abuse encompasses abuse that is non-physical such as emotional, verbal, and also involves elements of control and isolation. In the case of the PMWI, respondents are presented with a set of questions, and these questions are rated on a scale of 1 to 5 using the Likert scoring system. The varying interval range from 1 (a) Never, to 5 (e) Very Frequently. Using the 5 point scale,

2 (b) = Rarely; 3 (c) = Sometimes; 4 (d) = Frequently. Emotional/Verbal and Dominance/Isolation are examples of notable subscale PMWI. Psychological maltreatment of women shows reliability and validity in diverse sample psychological maltreatment. Psychological maltreatment is what drives the increase in a respondent's score.

Anxiety Sensitivity Index–3 (ASI-3): Taylor et al. (2007) formulated the ASI-3 to aid in the measurement of anxiety sensitivity. The ASI-3 considers fear of anxiety sensations across three dimensions:

- a) Physical Concerns: fear of the physical manifestations of anxiety (e.g. racing heart)
- b) Cognitive Concerns: fear of being unable to think and losing control
- c) Social Concerns: fear of having anxiety symptoms that others can see

The ASI-3 contains 18 items and uses a 5-point Likert scale to measure answers: 0 = Very little 1 = A little 2 = Some 3 = Much 4 = Very much. Users will respond to items and receive a score. A score of zero means that the person does not have anxiety sensitivity, and the higher the score, the more anxiety sensitivity that person has. The ASI-3 has been widely used in anxiety research, and has strong psychometric properties.

3.5 Methodology

An online survey (Google Form) was used to collect data. A short description of the research study along with the goal of the study, ethical guidelines, and voluntary consent was provided to the participants. Participants had the right to withdraw from the study at any time.

Participants consented and completed the PMWI and ASI-3 questionnaires. Responses were securely recorded. After completing the study, participants were thanked for their time.

3.6 Data Analysis

Data was analysed through Jamovi.

- The distribution of scores on psychological maltreatment and anxiety sensitivity was described by way of descriptive statistics (mean, standard deviation, minimum, and maximum, skewness and kurtosis).
- The relationship of psychological maltreatment and anxiety sensitivity was described in terms of strength and direction using Pearson Product-Moment Correlation.
- To find out if psychological maltreatment was a significant predictor of anxiety sensitivity, Simple Linear and Multiple Linear Regression Analysis was used. The level of statistical significance was set at $p < 0.05$.

4. Results

Table 1: *Descriptive Statistics*

	Psychological Maltreatment	Anxiety Sensitivity
N	160	160
Mean	28.1	30.3
Standard deviation	13.3	16.7
Minimum	14	0
Maximum	67	69
Skewness	0.937	0.207
Std. error skewness	0.192	0.192
Kurtosis	0.180	-0.645
Std. error kurtosis	0.381	0.381
Shapiro-Wilk W	0.894	0.982
Shapiro-Wilk p	<.001	0.034

Psychological Maltreatment and Anxiety Sensitivity statistics are shown in Table 1. The study had 160 females from 18 to 25 years old. Mean scores for Psychological Maltreatment was 28.1 (SD = 13.3) with scores between 14 and 67. The number of observed scores points out the amount of variability in the psychological maltreatment being reported. Standard deviation shows that the scores are spread out against the mean and that most of the participants reported low levels of maltreatment.

Anxiety Sensitivity recorded an average of 30.3 with a standard deviation of 16.7 and a range of up to 69. The standard deviation for Anxiety Sensitivity is larger than that of Psychological Maltreatment which shows that Psychological Maltreatment participants had severe to mild Anxiety Sensitivity. Psychological Maltreatment has a skewness of 0.937 which shows a positive skew. This means the majority of people answered with low or moderate levels of psychological maltreatment and a small number of people answered with extremely high levels. For Anxiety Sensitivity, with a skewness of 0.207, this is more symmetrical, with more scores evenly distributed across all levels.

The kurtosis values further specify the distribution of the data. Psychological Maltreatment had a kurtosis value of 0.180, indicating a distribution that is near normal in terms of peak. Anxiety Sensitivity had a kurtosis value of -0.645, indicating a deviation from the normal distribution that is wider and flatter, or a distribution that is a little more platykurtic.

The assessment of normality pertaining to the variables was done using the Shapiro-Wilk test. Results revealed Psychological Maltreatment to be the only variable that did not fit the normality assumption ($W = 0.894$ $p < .001$). On the other hand, Anxiety Sensitivity also presented a significant deviation from normality, although less severe than Psychological Maltreatment ($W = 0.982$ $p = .034$). Statistically insignificant deviations were found in both, but, given the sample size ($N = 160$) as well as the testing sensitivity of the Shapiro-Wilk test, a reasonable level of skewness and kurtosis (which were not shown to be excessive) were used to justify the appropriate usage of parametric tests (Pearson correlation, and linear regression) in secret analyses and prediction.

Overall, the description of the analyses shows that both Psychological Maltreatment, and Anxiety Sensitivity have enough variability to be used in further correlational and predictive analyses.

Table 2: *Correlation Matrix*

		Psychological Maltreatment	Anxiety Sensitivity
Psychological Maltreatment	Pearson's r	—	
	df	—	
	p-value	—	
	N	—	
Anxiety Sensitivity	Pearson's r	0.244**	—
	df	158	—
	p-value	0.002	—
	N	160	—

Note. * $p < .05$, ** $p < .01$, *** $p < .001$

Correlation Analysis

The effect of Psychological Maltreatment on Anxiety Sensitivity in females was correlated using Pearson's Product-Moment Correlation method. For sample $N = 160$, a moderate positive correlation was at $r = 0.244$ and $p = 0.002$ which sustained a < 0.01 probability level. While not strong, a positive correlation of Psychological Maltreatment and Anxiety Sensitivity was established. This means that females who are psychologically abused, are likely to have a high Anxiety Sensitivity.

The correlation's significance dissipates owing to the slight strength of 0.244. However, the relationship remains statistically relevant. In psychological practices, small correlations are

worthy of study. This becomes especially true in instances where there are multiple complex inter-modal emotional and relational components.

The study prediction that psychological maltreatment is related to increased anxiety sensitivity for young adult females is sustained.

Table 3: Linear Regression

Model Fit Measures		
Model	R	R ²
1	0.244	0.0594

Note. Models estimated using sample size of N=160

Model Coefficients - Anxiety Sensitivity							
						95% Confidence Interval	
Predictor	Estimate	SE	t	p	Stand. Estimate	Lower	Upper
Intercept	21.658	3.0140	7.19	<.001			
Psychological Maltreatment	0.306	0.0969	3.16	0.002	0.244	0.0914	0.396

Regression Analysis

A simple linear regression analysis was conducted in order to find out whether Psychological Maltreatment has an impact on Anxiety Sensitivity for females.

The regression analysis produced an R value of 0.244, which shows there is a positive relationship with the predictor and outcome. As for the R² value for the regression analysis, it was 0.0594 which shows Psychological Maltreatment accounts for about 5.9% of the variance in Anxiety Sensitivity.

It is true that the proportion of explained variance is small, but i will argue that Psychological Maltreatment is a significant predictor of Anxiety Sensitivity. In psychological studies, especially in the studies of the more intricate and complex emotional and interpersonal structures, a small percentage variance explained is still of great value. Psychological Maltreatment is a significant predictor of Anxiety Sensitivity among multiple factors that influence Anxiety Sensitivity.

Model Coefficients

Anxiety Sensitivity was significantly predicted by Psychological Maltreatment, $B = 0.306$, $SE = 0.0969$, $t = 3.16$, $p = 0.002$. The effect was small but meaningful, as indicated by the standardized beta coefficient, which was $\beta = 0.244$.

With an unstandardized coefficient of 0.0914 to 0.396, the 95% confidence interval, the psychological effect does not include zero.

Interpretation of Coefficients

Psychological Maltreatment significantly contributes to predicting Anxiety Sensitivity, as shown by the regression results. For instance, the greater the Psychological Maltreatment, the greater the Anxiety Sensitivity, with an increase of 0.306 units.

In the p-value of the study that was less than 0.01, the standard beta value of $\beta = 0.244$ which showed a small effect but statistically significant, along with the confidence interval that did not cross zero, predictively, the relationship is statistically significant and reliable.

All factors of Psychological Maltreatment predicts greater Anxiety Sensitivity, hence proving study hypothesis.

5. Discussion

The study examined psychological abuse and anxiety sensitivity of young adult females. Psychologic abuse and anxiety sensitivity showed a positive correlation ($r = 0.244$, $p = 0.002$). Psychological abuse was a predictor of anxiety sensitivity, accounting for 5.9%. Despite the small percentage, it shows the positive correlation of psychological abuse and anxiety sensitivity of females.

The correlation shows that women who face psychological abuse, such as emotional abuse, verbal abuse, or controlling behaviour, may develop an increased fear of experiencing anxiety. Psychological abuse involves criticism, emotional gaslighting, and invalidation. These may cause a victim to develop a maladaptive cognitive schema with heightened hyper-vigilance focusing on and interpreting bodily sensations as dangerous (catastrophic thinking).

Understanding the interconnection can begin with the cognitive vulnerability theories. The most direct impact of the mental abuse might be the loss of the victim's trust in the safety of themselves and in the safety of the world around them, as well as the loss of trust in the safety of their emotional world. The mental abuse most of the times works with randomness and continuing unpredictable stress, and this unpredictability can make the person feel threatened in these situations. Because of this, the person can interpret an increase in heart rate, or a feeling of nervousness as though those sensations are a danger, and this can lead to an

increase of the person's sensitivity to anxiety. It seems this is one of the explained ways in which a cognitive process can work positively in favor of developing an anxiety disorder.

The relationship is there, and it is statistically significant—however, it is weak. It weakens the claim that psychological abuse is the only factor that affects anxiety. It is impacted by so many factors. It is caused by numerous variables and psychological, and social factors by genetics, individuality, the way people parent, trauma, and the total social and cultural situation and environment. This is the reason psychological abuse increases anxiety sensitivity, but it does not justify its formation. Considering the low value of the coefficient of determination where the value is 5.9%, it does support the claim that a number of psychological, biological and physical factors are involved in the formation.

There is relatively small effect size. However, because of the nature of the research field, this size is still of importance. Small size does not mean lack of importance, particularly in research of an interpersonal relationship emotionally, in which research and understanding of constructs continue to develop. Even though positive relationships remain small, there is still an underpinning relationship that suggests emotional psychological maltreatment should remain as a focus of concern. The psychological impact, although emotional abuse may not be as overt as physical abuse, can be pervasive and remain for a significant period.

Although there is psychological concern for emotional abuse of both males and females, research suggests that women may be more adversely affected. There is a higher likely risk for women. There is the problem of culture, where there are expectations of women to exhibit emotions and be in a relationship (i.e. relational dependency), and there are socialized to be in relationships. There is the problem where the psychosocial abuse and these stated factors combine to make the emotional psychological abuse worse and more painful than it would be otherwise. In this way, the study adds to the body of knowledge of the mental health of women due to the psychosocial abuse of women, which is not always visible.

From a clinical standpoint, the findings result in the formulation that attempts to decrease anxiety sensitivity and psychological mistreatment may be closely associated. Trauma-informed approach addressing the emotional abuse may be added to the cognitive therapy approach that is directed toward the dysfunctional theorizing about the anxiety sensations. Assisting clients in the reconstruction of self-beliefs and the healthy processing of emotions may lessen psychological mistreatment's effects on fears related to anxiety.

However, the study has limitations. First, the cross-sectional design is a limitation for causing conceptualization. Although predictive value was identified in the regression analysis, it is important to emphasize that causality was not established. Therefore, longitudinal studies

have to be undertaken to prove that psychological mistreatment happens first in the sequence of events that lead to the development of anxiety sensitivity. Lack of longitudinal studies is an important limitation in the present studies. Second, self-reporting has inherent problems, such as social impoverishment bias, a lack of accurate recall bias, and a host of other response bias. Participants may use their subjective perception to determine the extent of maltreatment and anxiety symptoms. The last limitation is that the sample consisted of young adult females, and as such the findings may not be true for other age groups, male participants, and other cultural settings, and this indeed is a major limitation.

Future studies may employ longitudinal approaches to analyse time-related factors of maltreatment and anxiety sensitivity. Including variables like self-esteem, emotion regulation, or perceived social support may clarify the mechanisms of this relationship. Furthermore, analysing factors that may be supportive or preventive may clarify the resilience processes that sustain the psychosocial effects of emotional abuse.

To conclude, the discussion underlines that even though psychological maltreatment indicates a small percentage of variance, it is still a statistically meaningful predictor of anxiety sensitivity for females. The results demonstrate the need for emotional abuse to be understood as an element contributing to cognitive vulnerability and anxiety-related fears.

6. Conclusion

This research focused on the extent to which psychological mistreatment is a predictor to anxiety sensitivity in young adult females. The results indicated a statistically significant relationship between psychological maltreatment and anxiety sensitivity. Although the predictive strength of the relationship was modest, the results still provided the basis for psychological maltreatment as a significant factor in the analysis of cognitive vulnerability to fear of anxiety.

Beyond the boundaries of statistical significance, the critical aspect of this research is its conceptual facet. Unlike physical abuse, psychological maltreatment may not leave a mark and may be seen as part of other interpersonal dynamics, resulting in the psychological effects being taken less seriously. The research adds weight to the argument that emotional abuse is a serious psychological issue and not a minor issue in relational dynamics. Emotional harm is persistent enough to affect cognitive framing which determines the mechanisms of control and response when dealing with emotionally charged situations. This research adds to the collection of evidence that psychological harm may shift cognitive framing when dealing with emotionally charged situations.

Anxiety sensitivity involves the tendency to fear anxiety, and the underlying reason is the belief that anxiety is dangerous. Finding predictors of this phenomenon is important because anxiety sensitivity is a transdiagnostic vulnerability factor of panic disorder, generalized anxiety, and other anxiety-related conditions. Environmental relational stressors, such as psychological maltreatment, may explain this vulnerability. This consideration adds to the understanding of anxiety sensitivity beyond biological predisposition and temperament to relational experience as a context of greater significance.

This study contributes to the understanding of women's psychological experiences in relational contexts. Young adulthood is a developmental phase of identity formation, emotional independence, and the establishment of close relationships. Psychological maltreatment may pose a risk to the development of emotional safety and healthy self-concept. The study results highlight the importance of identifying emotional abuse in young women, especially in relational contexts that may seem non-violent.

In relation to the educational institutions, mental health practitioners, and policymakers, these findings present potential avenues for future work. Mental abuse and the psychological ramifications of it are subjects the young women involved in the study should educate themselves on in order to better identify instances of relational abuse. Psychoeducational workshops on developing emotional boundaries, assertiveness, and the overall psychosocial health of the individual should be integrated into the curricula of colleges and universities within metropolitan areas, such as the Delhi NCR region, where the study was conducted. Preventative measures on mental health that aim to instil relational awareness may inadvertently increase mental illnesses associated with anxiety.

The findings encourage practitioners to utilise a more divergent approach to the relational dimension in their therapeutic frameworks. For example, mental health practitioners who assist clients with high anxiety should pay close attention to their relational history and, in particular, their emotional history and criticism. Intervention that focuses on relational aspects may reduce anxiety and irrational fears.

It is critical to understand the reasons the statistical model captured so little variance within the scope of psychological research standards. Numerous factors influence emotional and behavioural phenomena. A predictive relationship is modest yet significant. Psychological abuse is but one part of the larger web of communication. Future research may investigate the resilience, coping, attachment, and social support psychological abuse networks.

The gaps in the research are also culturally based. The sample lies within the National Capital Territory (NCR) of Delhi, providing the first evidence within an Indian setting, where

the conversation is new and the stigma of mental health is real, about the emotional abuse of children. Culturally derived beliefs about interpersonal relationships, social and relational constructs of gender, and the emotional abuse of children and anxiety are potential foci of future research.

Tracking individuals over time could help clarify the relationship of psychological maltreatment to anxiety sensitivity and to the psychological intricacies of the relationship. From a positive psychological perspective, anxiety sensitivity is psychological maltreatment and abuse as anxiety sensitivity may also explain an individual's psychological maltreatment. In positive psychological terms, anxiety sensitivity can be seen as a psychological maltreatment and abuse. Future research may consider alternative methods to offers, like behavioural analysis, interviews, and psychological assessments, to supplement the limitations of self-reported methods.

In psychological literature, the current study recognizes psychological maltreatment as an indicator of anxiety sensitivity in young adult females. It may also recognize emotional abuse as a pattern of cognitive vulnerability, encouraging the recognition of psychological abuse in non-physical forms of abuse and the psychological ramifications of it- positive psychological abuse. Increasing empathy, non-physical forms of abuse, and anxiety sensitivity, encourages the positive abuse of psychological and emotional forms. The positive psychological abuse of an individual, remains a vital area to be explored to develop models of positive and to promote unhealthy relationships. Research into anxious and unhealthy relationships, remains a vital area to be explored. Unhealthy interpersonal relationships, positive abuse of an individual, anxious and is a vital area to be explored. Research into positive interpersonal relationships and an area that is vital to be explored. Research into anxiety, unhealthy interpersonal relationships, and positive abuse of an individual, is a vital area that remains to be explored. Research into positive interpersonal relationships and an area that is vital to be explored, expanding the unhealthy relationships that an individual possesses.

References

APA PsycNet. (n.d.). <https://psycnet.apa.org/record/2014-45146-003>

Infurna, M. R., Reichl, C., Parzer, P., Schimmenti, A., Bifulco, A., & Kaess, M. (2015). Associations between depression and specific childhood experiences of abuse and neglect: A meta-analysis. *Journal of Affective Disorders*, 190, 47–55. <https://doi.org/10.1016/j.jad.2015.09.006>

- Li, L., Kerr-Gaffney, J., Seath, P., Chu, P., Carter, B., & Rucker, J. (2025). The association between childhood maltreatment and clinical features of depressive, anxiety, and stress-related disorders: A systematic review and meta-analysis. *Journal of Affective Disorders*, 394(Pt B), 120627. <https://doi.org/10.1016/j.jad.2025.120627>
- McLean, C. P., Asnaani, A., Litz, B. T., & Hofmann, S. G. (2011). Gender differences in anxiety disorders: Prevalence, course of illness, comorbidity and burden of illness. *Journal of Psychiatric Research*, 45(8), 1027–1035. <https://doi.org/10.1016/j.jpsychires.2011.03.006>
- Psychiatric Research*, 156, 45–54. <https://doi.org/10.1016/j.jpsychires.2022.09.027>
- Short, N. A., Van Rooij, S. J., Murty, V. P., Stevens, J. S., An, X., Ji, Y., McLean, S. A., House, S. L., Beaudoin, F. L., Zeng, D., Neylan, T. C., Clifford, G. D., Linnstaedt, S. D., Germine, L. T., Bollen, K. A., Rauch, S. L., Haran, J. P., Lewandowski, C., Musey, P. I., . . . Jovanovic, T. (2022). Anxiety sensitivity as a transdiagnostic risk factor for trajectories of adverse posttraumatic neuropsychiatric sequelae in the AURORA study. *Journal of*
- Taylor, S. (2014). *Anxiety sensitivity*. <https://doi.org/10.4324/9781410603326>
- Teicher, M. H., & Samson, J. A. (2016). Annual Research Review: Enduring neurobiological effects of childhood abuse and neglect. *Journal of Child Psychology and Psychiatry*, 57(3), 241–266. <https://doi.org/10.1111/jcpp.12507>