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The Relationship Between Childhood Maltreatment and a Woman's Desire to Have Children

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May 2023

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IRB Approval # 11115

Abstract

This study evaluated the relationship between childhood maltreatment and feelings about parenting among adult females. It was hypothesized that women with a history of maltreatment during their developmental years would have less desire to have children than females of similar age who were not maltreated. The Childhood Maltreatment History and Desire to Have Children Questionnaires were completed by 51 females aged 20 years and older. Results indicated a statistically significant lower desire to parent among females with histories of Low and Severe childhood maltreatment than for females without such history. Further comparisons revealed the same pattern of findings when women were sub-grouped by age and present relationship status. It was concluded that a history of any severity or form of abuse might be associated with a lower desire to have children in adult females. This pattern was not related to the woman's age nor the presence or absence of a current relationship.

Dedication

I would like to dedicate this thesis to Marilyn Reed and Marsha Summers for their support throughout my undergraduate career.

The Relationship Between Childhood Maltreatment and A Woman's Desire to Have Children

One of the first and most important relationships for developing children is the one that is had with parents or caregivers. The more positive the caregiver-child interactions are in childhood, the stronger the bond between the child and caregiver becomes. Conversely, negative interactions can have the opposite effect on the caregiver-child relationship, as extreme forms such as maltreatment have been found to be associated with troubled relationships with parents. The Wisconsin Longitudinal Study (WLS) has suggested that, in adulthood, victims of childhood maltreatment show lower closeness in their relationships with their mother and father; for those that specifically suffered neglect, decreased emotional connection with both parents was reported (Kong & Martire, 2019). Research examining how maltreatment, specifically from a mother, may affect the parent-child relationship found that histories of maternal neglect, verbal, and physical abuse were associated with difficulties with emotional attachment and lower levels of engaging in social support with the mother (Kong, 2018).

In addition to having strong caregiver-child relationships, children also need role models to follow and will do so with the adults most often around them. One of the life tasks for many adults, especially women, is to become parents themselves eventually; modeling from their parents may influence this choice or its process. Many factors can be associated with becoming a parent, but perhaps one of the most foundational is the desire to have children. Research has shown that this is one of many factors of parenting that can be influenced by the parenting methods experienced during childhood. In women that did not suffer childhood maltreatment, research has shown that a desire to have children is associated with being in serious, committed, long-term relationships (Barber et al., 2019), as well as involvement in a conflictual relationship,

a history of extreme economic disadvantage, not attending postsecondary education, being depressed while in a serious relationship, and being born by a teen mother (Weitzman et al., 2017).

Abuse can come in many forms, from unkind comments, criticism, harassment, patterns of harsh discipline, uncontrolled rage, physical punishments, and sexual misconduct. The diminished quality of the parent-child relationship that stems from the commonality that maltreatment of a child results in a troubled relationship with parents can create a basis for how adult children may subsequently view their own parenthood. Troubled relationships with parents may result in the child having discomfort with becoming a parent once they enter adulthood. A cross-cultural study conducted by Harel and Finzi-Dottan (2018) on Jewish and Arab parents found that a history of childhood maltreatment was associated with lower scores on emotional regulation and positive parenting measures, in addition to viewing parenting as threatening. There was also data to support the notion that perceiving parenting as challenging was associated with lower emotion regulation abilities, and viewing parenting as threatening was associated with adverse and controlling parenting behaviors.

Adults with a history of childhood abuse may also develop a range of fears associated with having children. In a study that sought to understand and explain the process of becoming a parent, individuals between the ages of 18-55 who had a history of childhood maltreatment were studied. From the results, Roberts (2014) suggested that survivors of childhood maltreatment may believe that parenting should be avoided due to fears of perpetuating intergenerational abuse cycles. Furthermore, Cavanaugh et al. (2015) found evidence to support that abuse survivors may hold fears regarding their future children becoming victims of abuse, particularly in female childhood sexual assault survivors. The researchers found that this fear may deter a desire to

have female children in mothers with a history of childhood sexual abuse.

Negative emotions regarding parenthood may be further enhanced due to problematic attachment issues caused by parental maltreatment in childhood. Utilizing John Bowlby's theory of attachment (1969), Rholes et al. (1997) examined how attachment may influence parenting. Their research on American college students found that attachment styles formed in childhood may be associated with many aspects of an adult's performance in parenthood. The researchers found that individuals with avoidant and ambivalent personalities were more likely to use negative parenting styles, become more aggravated with their children, and were less confident about their parenting abilities. Another interesting finding was that individuals with avoidant attachment were associated with having a lower desire for children; however, those with ambivalent attachment were not. From their data, the researchers concluded that a lower desire for children is associated with more negative perceptions of parenting abilities regardless of attachment style. The effects of childhood abuse combine to cause the victim to have difficulty with relationships which can extend to their children.

A history of childhood maltreatment may also lead to negative perceptions regarding parenting abilities. Research has found that survivors of childhood abuse tend to hold more negative perceptions about their parenting competency and ability, particularly among survivors of childhood sexual abuse. Lange et al. (2020) found that, in mothers with a documented history of child sexual abuse, there was a common belief that their childhood maltreatment experiences negatively affected their parenting. Previous research conducted on self-identified female survivors of childhood sexual abuse by Allbaugh et al. (2014) supported this notion, as the researchers found that feeling a "lack of energy for parenting due to recovery issues" following a history of child sexual abuse was the strongest predictor of adverse parenting outcomes such as

decreased competency and satisfaction with being a parent.

Victims of childhood maltreatment that have had children often report that their parenting styles have been negatively affected by their adverse experiences in childhood. Evidence supports the notion that experiencing different types of abuse may lead to different parenting outcomes. In a study examining mothers with children between the ages of four to six, Bailey et al. (2012) found that emotional abuse, neglect, and witnessing family violence were associated with hostility toward their children. The researchers also found that a mother's experience of physical or sexual abuse was associated with a self-perceived lack of parental competence and lower emotional availability. Additionally, victims of childhood maltreatment have been found to model the parenting styles experienced in their childhood, despite the generally harsh conditions. A study conducted by Gonzalez et al. (2022) on childless college students and found that the style of parenting that becomes adopted by the emerging adult was closely related to the parenting style used by their parents. Interestingly, the researchers also found that the potential for child abuse within the emerging adults was related to the opposite-gendered parent's potential for child abuse. Similarly, Morgan et al. (2022) found that both males and females that were raised by authoritarian parenting styles were more likely to engage in these same forms of parenting and may be more likely to be more physically and psychologically hostile towards their children.

Given that a typical human response to anything potentially unpleasant is avoidance, the desire to have children diminishes for children of abuse. It is hypothesized that adult women with a history of childhood maltreatment will have less desire for children of their own compared to women of similar age who were not abused as children.

Method

Participants

Fifty-one female research participants were recruited through Instagram and in response to an in-class presentation by the researcher. Both provided anonymous responses and were selected for convenience to obtain a large response set. Participants that provided electronic consent voluntarily completed several measures anonymously at an online survey site. In the Instagram post and the follow-up email after the in-class presentation, the viewers were asked to refer to or forward the research information to females aged 20 and older. Those forwards included the link, which allowed the new recipient to participate if they met the age and gender criteria. Females aged 20 and older were the target participant sample due to previous research on desires for children focusing strongly on females and the belief that at least 20 years of age was suitable to consider having children.

Seventy-eight responses were received at the online survey site; however, only 51 were fully completed and could be used for the data analysis. The 51 participants were all female and ranged in age from 20 to 74 years of age; however, the sample was heavily skewed to youngeraged single females who have not yet completed their college degree.

Three comparison groups were created to complete the hypothesis testing. The No/Minor Maltreatment Group (n=15) consisted of females with either no history of childhood maltreatment or only one experience of one form of neglect throughout their childhood. The Low Maltreatment Group (n=13) consisted of the females that experienced two or more forms of neglect multiple times throughout childhood or experienced physical harm only once throughout their childhood. The Severe Maltreatment Group (n=23) consisted of females that experienced multiple incidences of neglect, experienced physical abuse more than once, or experienced

sexual abuse one or more times, or any combination of the above throughout their childhood.

Materials

The Instagram post that friends and relatives received explained the nature of the study and asked prospective participants to select the link to the survey site provided on the post and in the researcher's Instagram biography (see Appendix A). The speech to the class (see Appendix B) asked individuals who were female and 20 years or older to respond to an email sent to all class members (see Appendix C). The emails and Instagram posting also included a request to forward to others who met the study criteria. Participant recruitment in classrooms was performed due to the accessibility of participants. Posting on Instagram was chosen as a recruitment method due to the ability to reach a more diverse population than that at Dominican University of California.

The Letter to Participants that appeared on the first page of the online site clarified all necessary information for consenting, such as participants' absolute freedom not to participate or not to answer uncomfortable questions. Those who decided to participate were directed to complete the following questionnaires (see Appendix D).

A Demographics Questionnaire (see Appendix E) was used to assess the demographics, in addition to a variety specific information about the participants life history. This provided detailed descriptions of marital and education status and income information. Due to the sensitive information that would be collected in the following measures, the focus of this questionnaire was to ask for very little identifiable demographic information to protect participant anonymity and confidentiality. This included not asking the female participants about their history of parenting. While given as a series of multiple-choice questions, this section was intended to be in lieu of an interview and to provide more quantifiable data for list of

experiences. This survey also provides a screen-out question, so only females aged 20 and older could proceed to rest of the materials.

The Desire to Have Children Questionnaire measures the degree of desire one may have to have children in the future (see Appendix F). This questionnaire measures attitudes about having children through a seven-point Likert scale. This instrument was selected because of its brevity and acceptable test construction parameters. The Childhood Maltreatment History Questionnaire was used to assess the participant's history of childhood abuse (see Appendix G). This questionnaire was designed by the researcher, and it endeavored to survey various ways the participant may have experienced maltreatment in childhood. It was elected to create this questionnaire instead of using a published measure of childhood maltreatment to phrase the questions regarding the participants' maltreatment history in the least provoking method possible. The matrix design of this questionnaire was selected to create a minimally intrusive method of responding to the questions.

A Thank You Letter was provided to all participants at the end of the study (see Appendix H). It was understood that questionnaire materials asked the student to focus on their childhood maltreatment experiences and that these recollections might be challenging for some to focus on. Because of the nature of these questions, some participants may have experienced unexpected discomfort or frustration from these various types of self-examination. The Thank You letter provided referral resources for any participant who experienced difficulty due to participation.

Procedure

The recruited participants reviewed the materials at an online site. After reading the Letter of Introduction, they were directed to complete the various measures and demographic

information questionnaire. Data gathering at an online site was selected for the participant's convenience and to ensure total anonymity of responses. The set of questionnaire materials were estimated to take about 10 minutes to complete.

The requirement of this study was for each participant to identify themselves as a female aged 20 or older, which was stated clearly in the invitation materials to all participants. Those that did not meet these criteria were asked to exit the survey.

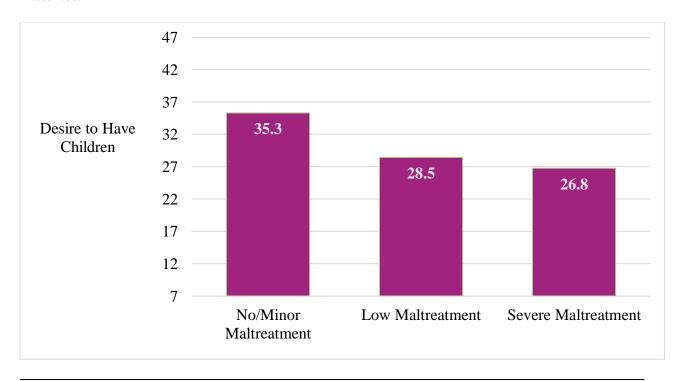
After completion, the participants were thanked for their time, provided with information on how to obtain the study results in May 2023, and provided with information as to how to get assistance if they experienced uncomfortable feelings during or after completing the study materials.

Results

It was hypothesized that females with a history of childhood maltreatment would have a lessened desire for children than females without a history of maltreatment. To evaluate this hypothesis, an ANOVA was conducted to compare the various histories of childhood maltreatment to a desire to have children. Desire to have children scores were given by participants' responses to the Desire to Have Children Questionnaire, with scores ranging from seven to 47. Single Factor ANOVA revealed that the Low Maltreatment Group (n = 13) and Severe Maltreatment Group (n = 23) had mean rates of desire to have children that were statistically significantly lower than that of the No/Minor Maltreatment Group (n = 15), F(2,48) = 3.82, p = .028, $Eta^2 = 0.14$, MSe = 90.47. Post-hoc test using Tukey's HSD found that the desire to have children was significantly lower for females with histories of Low and Severe childhood maltreatment than for females with No/Minor history of childhood maltreatment. These results are displayed in Figure 1.

Figure 1

Desire to Have Children in Females over 20 with No/Minor, Low, And Severe Maltreatment Histories.



Age and relationship status comparisons were made using t-test analyses. In order to compare age to desire for children and maltreatment history, the participants were first grouped according to age. The Younger Group consisted of females ages 20-34 (n = 38), and the Older Group consisted of females ages 35-74 (n = 13). These groups were then sub-grouped by maltreatment history. Within each age group, the No/Minor Maltreatment subgroup was compared to a subgroup that consisted of a combination of the Low and Severe Maltreatment participants. A t-test of the two levels of abuse among just the Younger participants revealed that the Low and Severe Maltreatment subgroup had a mean rate of Desire to Have Children that was significantly lower than that of the No/Minor Maltreatment Group. The same pattern with almost

identical mean scores was seen when the abuse subgroups were compared for in the Older Group. As these patterns were so similar, this analysis suggests that age was not a factor in how a history of childhood maltreatment influences a woman's desire for children (see Table 1).

Table 1Analysis of Desire to Have Children in Females over 20 with Maltreatment Histories by Age.

Age Group	Maltreatment History	<u>Mean</u>	St. Dev.	<u>t-Stat</u>	<u>Alpha</u> <u>Level</u>
Younger	Low or Severe	27.8	9.1	2.2	p = 0.02
(20-34 years)	No/Minor	34.4	7.3		
Older	Low or Severe	24.6	14.1	1.7	p = 0.05
(35-74 years)	No/Minor	36.6	7.1		

To compare relationship status to desires for children and maltreatment history, the participants were grouped according to their current relationship status. The Single Group consisted of females not currently in a relationship (n = 25), and the Relationship Group consisted of females that identified as currently being in a relationship, married, or separated/divorced (n = 26). These groups were again sub-grouped by maltreatment history; for both relationship status groups, No/Minor Maltreatment was compared to a combination of the Low and Severe Maltreatment Groups. The results for single females were almost identical as the Age comparison noted above, while the results for females in a relationship followed a similar trend. For these two t-test comparisons, the Low and Severe Maltreatment Groups had a mean score of desire for children that was statistically significantly lower than that of the

No/Minor Maltreatment Group in the Single group. This relationship was not significant for the Relationship group; however, it did follow the trend set by the Single group and the Age comparisons. This analysis suggests that relationship status was also not a factor in how a history of maltreatment influences a woman's desire for children (See Table 2).

Table 2Analysis of Desire to Have Children in Females over 20 with Maltreatment Histories by Relationship Status.

<u>Level</u>
p = 0.007
p = 0.08

Discussion

Although associations between childhood maltreatment and aspects of future parenting have been studied for decades, research on how these experiences may affect desires to become a parent is still limited. This study examined the relationship between an adult female's history of childhood maltreatment and their desire to have children in adulthood. It was hypothesized that those with a history of maltreatment would have a lower desire for children than those without such history. The findings of this study supported this hypothesis. The data suggest that a history of childhood maltreatment is associated with having a lower desire to have children in adulthood among females aged 20 and older.

Information regarding the participants' current parenting history was not collected to protect anonymity and confidentiality. In an attempt to still examine how a history of parenting may influence the way childhood maltreatment affects a desire to have children, the participants were divided by age to compare younger and older females. It was presumed that, at the time of their participation in this study, the younger females were less likely to have children, while the older females were more likely to have children. The results of this study were consistent across all ages of participants, which ranged between 20-74. The results were also consistent among single females, and the data for those in a relationship followed the same trend.

Similarities in the data gathered from the Low and Severe Maltreatment groups may indicate that a history of any severity or form of abuse is associated with having a lower desire to have children for females. Additionally, similarities in the data collected from the age and relationship status comparisons suggested that both age and relationship status were not factors in in how a history of maltreatment influenced a woman's desire for children. Furthermore, the data collected from the age comparisons may indicate that a history of parenting did not affect how a history of childhood maltreatment affected a woman's desire to have children.

Although it is not possible to draw any causal conclusions from the correlational data collected in this study, one can be readily inferred. It is a well-known behavior throughout the animal kingdom for adults of the species to protect offspring. For adult humans that were abused as children, emotional conflicts are created. It is logical to consider that possible reasons for the decrease in the desire to have children in females with histories of childhood maltreatment may emanate from a range of fears surrounding parenthood that result from experiencing maltreatment. To these individuals, childhood to is filled with memories of harm. Therefore, the natural emotions of being "a protective parent" are the same emotions that may cause these

individuals to not parent, for to do so would potentially cause their offspring the same harm. Previous research supports this speculative causal relationship; such fears do exist and have been shown to be specifically tied to negative perceptions about parenting abilities (Lange et al., 2020), concerns about continuing abuse cycles (Roberts, 2014), and aversions to the possibilities of the future children becoming victims of abuse (Cavanaugh et al., 2015).

In many societies, becoming a parent and having a family has been an encouraged ideal for centuries, particularly for women. Attraction to parenting is multifaceted, but some aspects have stayed relatively consistent over time. Examples include being family-oriented, wanting to be better parents than one's own, and the desire to teach, love, and share with a child. Despite these factors, many decide not to follow this route. Similar to becoming a parent, there may be many reasons not to become one. The possibility of having to give up life choices such as careers or education, instability in financial or relationship status, the responsibility for another life, and, more recently, the fact that the world is becoming increasingly more inhabitable due to changes in global climates may discourage the desire to become a parent. Previous research has found that desires for parenting in women not affected by childhood maltreatment are associated with factors such as economic and education history (Weitzman et al., 2017), being born to a teen mother (Weitzman et al., 2017), and relationship status (Barber et al., 2019). The present research further examined the role of relationship status and found that it did not significantly influence desire in the context of this study. These findings suggest that relationship status did not affect how a history of childhood maltreatment affected the desire to have children.

With the large amounts of research that have been conducted on childhood maltreatment to date, a much better understanding of how its long-term effects that may be manifested in adulthood has been achieved. The negative relationships that become formed as a consequence

of a parent maltreating their child may result in several adverse outcomes. These may include a lack of familial support, challenges with relationships, and trauma for the child. Experiencing maltreatment in childhood may lead to the development of maladaptive coping strategies, difficulties with attachment, and adverse mental health outcomes.

Maladaptive coping strategies may arise from a lack of guidance on healthy coping mechanisms, may be an effect of the severity of the trauma, or may result from feeling a need to find an immediate relief from the trauma. These strategies may include but are not limited to, substance abuse, self-harm, and risky or reckless behaviors. Usage of maladaptive coping techniques can hinder the ability of one to care for their physical and mental health and be functioning members of society. It can also worsen the trauma, as it is not being resolved through these methods.

Issues with attachment may develop due to the foundational process of forming attachments and relationships with a parental figure being disrupted by the experience of maltreatment. The formation of insecure attachments during early childhood have been found to lead to difficulties with forming and maintaining relationships in adulthood. These difficulties can result in a lack of connections with others and may also lead to self-isolation, social anxieties, and negative views of oneself.

Evidence to support the connection between the experience of trauma in childhood and the development of adverse mental health outcomes has been widely documented and supported for decades. Prevalent mental health challenges that are associated with adverse childhood experiences include depression, anxiety, and substance abuse. Physical health outcomes are also linked to these experiences, such as obesity and higher susceptibility to developing autoimmune diseases (NCSL, 2022). Due to childhood maltreatment being an aspect of adverse childhood

experiences, these consequences may also result from a history of experiencing maltreatment during childhood. The resulting mental health outcomes may also perpetuate the use of maladaptive coping strategies. These factors may be manifested in adulthood to cause adverse mental and physical health effects, which may lead to diminished perceptions of one's overall quality of life. Further investigation is required to thoroughly examine how these effects may influence daily life in adulthood.

An unexpected issue during the data collection process in this study was the lack of responses from women without a history of maltreatment that were received, despite asking for participation from females with any history of maltreatment. The data collected indicated that the majority of the sample had a history of childhood maltreatment. This result was unexpected due to the presumption that the target population would not have had this majority; there were even initial concerns of not being able to collect enough data from females with a history of maltreatment.

The uneven sample led to a limitation, as the lack of participants without a history of childhood maltreatment resulted in a lack of a control group within this study. With a larger sample, this could have made it difficult to compare the results from females with a history of abuse to a general desire to have children that is not affected by abuse. This aspect, and the larger population size of participants with a history of maltreatment, may contribute to the significance of the data collected in this study. It is likely that the uneven sample of this study does not accurately represent the general population of females 20 years of age and older. Due to this, it may not be possible to generalize these results to the general population of adult females.

Suspected reasons for the dearth of participation of women without a history of childhood maltreatment consisted of these women having less interest in the study or possibly holding

apprehensions about the worth of their contribution to the study. It is possible that they would have less interest in the study because the results would not apply to them. The feeling of not gaining anything from their participation may have deterred them from answering the survey. Additionally, because this study examined the effects of a history of maltreatment, females without such history may have believed their responses would not have been necessary or helpful. These concerns led to another round of survey distribution, highlighting the need for participation from females without a history of maltreatment.

It is important to recognize that it is not possible to draw any conclusions concerning men from this study. Most of the established research on childhood maltreatment's effects on parenting has focused on females. This may be due to the significance placed on the relationship between the mother and child. The mother carries, births, and breastfeeds the child, making her essential to its survival for its entire development and years following its birth. Although fathers play a very different role in a child's life, they may still be involved in raising the child. The ways in which a history of childhood maltreatment may affect a male's ability to parent need to be examined further.

The results of this study should be disseminated to survivors of abuse to inform them about the possible implications that childhood maltreatment may have on becoming a parent. More in-depth exploration into the ways in which a history of abuse may affect a desire to become a parent topic is necessary. A primary direction for future research includes more detailed analyses of parenting history in order to assess how a history of maltreatment may affect the desire to have children in women who already have children and those who do not. Furthermore, expanding this research to examine how childhood maltreatment may affect a males' desire to have children, how these results may change based on which parental figure the

abuse was received from, and the role that relationship satisfaction may play are interesting directions for future investigation.

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Appendix A

SOCIAL MEDIA POST

To my **FEMALE** Family, Friends, and Friends of Friends,

As a Psychology major at Dominican University in San Rafael, I am doing a research project that evaluates the possible relationship between childhood abuse and a desire to parent. Volunteers, AGES 20 AND OLDER, are needed to complete a few very short anonymous questionnaires about any history of childhood maltreatment and their past or present feelings about the desire to have children. Participation should take about 10 minutes.

I COULD REALLY USE YOUR HELP – in two ways.

- 1) Women with a history of NO abuse as a child, and women who have a history of ANY TYPE of childhood abuse are needed to complete the survey materials.
- 2) Whether you choose to participate or not, please SHARE THIS POST on your social media feed so that other women may also see this information. I'm hoping to reach a large number of responses from a demographic outside of my own friends and family so that my results are more generalizable to the overall population.

If you have questions, contact me through e-mail or any other preferred method.

If you would like to learn the results of the study once it has been completed in May of 2023, please contact me and I will provide a general summary of the findings.

Thank you for your time and your potential participation.

Sincerely,

Tayah Simpson

Email: tayah.simpson@students.dominican.edu

[SURVEY LINK]

Appendix B

SPEECH TO ONLINE AND IN-PERSON CLASSES

Hello Fellow Students,

My name is Tayah, and I am doing a study about being mistreated in childhood and parenting desires, specifically in females. I would really love it if you could consider helping me to gather data. I am looking specifically for females, ages 20 and older, who may or may not have had a history of any type of child abuse.

After class, everyone will be receiving an email with a link that you can use to view an online survey site where additional information about the study is provided. Sorry, you men out there; you are on the course email list. You can ignore the email, or if you want to be really helpful, forward it onto a woman you know.

All responses are anonymous, voluntary, and participants may withdrawal at any time during the survey. Please also note that participation will not affect your grade in this class.

DOES ANYONE HAVE ANY QUESTIONS?

Thank you very much for your time and help!

Appendix C

FOLLOW-UP EMAIL TO ONLINE AND IN-PERSON CLASSES

Dear Fellow Students,

As mentioned in your class, I am currently conducting a research project regarding mistreatment in childhood and parenting desires in females, ages 20 years and older, as part of my senior thesis requirements. I am requesting your voluntary participation in my study, which is anonymous and does not affect your grade in this course at all.

Please help me by being a participant if you meet the criteria above, and by forwarding this email and link to other women you know.

Thank you very much for your consideration!

Tayah Simpson

[insert survey link]

Appendix D

LETTER OF INTRODUCTION

Dear Participants,

My name is Tayah Simpson, and I am currently an undergraduate student at Dominican University of California. As part of my senior thesis, I am conducting a research project. My work is being supervised by Ian S. Madfes, Ph.D., Adjunct Professor at the University. I am asking for your voluntary participation in my study, which pertains to a woman's desire to have children and its relationship to possible history of childhood maltreatment.

Women with a history of NO abuse as a child, and women who have a history of ANY TYPE of childhood abuse are needed.

ALL PARTICIPANTS MUST BE AT LEAST 20 YEARS OLD.

Participation in this study is completely voluntary and you may choose to stop at any time if you wish. The study involves filling out questionnaires that will take no longer than 10 minutes to complete. Your survey responses will be completely anonymous. However, complete anonymity cannot be guaranteed, in the rare event that your identity may become known, your responses will be held in strict confidence.

If you choose to participate in this study, please continue to the NEXT page. You may stop at any time by clicking on the EXIT tab that appears on every webpage. Once you complete the questionnaire you may not retake it.

If you have any questions regarding the research, you may contact me at the email address below. If there any further questions you may contact my supervisor, Ian S. Madfes at Ian.Madfes@dominican.edu or the Dominican University of California Institutional Review Board for the Protection of Human Subjects (IRBPHS). You may reach the IRBPHS Office by calling (415) 482-3547, by fax at (415) 257-0165, or by writing to IRBPHS, Office of Associate Vice President for Academic Affairs, Dominican University of California, 50 Acacia Avenue, San Rafael, CA 94901.

If you would like to be informed of the results of this study once it has been completed, please contact me at the email address provided below.

Thank you in advance for your participation.

Sincerely,

Tayah Simpson Psychology Student Dominican University of California San Rafael, CA

Email: tayah.simpson@students.dominican.edu

Appendix E

DEMOGRAPHICS

1. Sex assigned at birth:		-	[] Male – please EXIT as you do not meet criteria for participation.			
		[] Female				
2. Age:	[] Under ag	e 20 years – plo	ease EXIT as you do not meet criteria for participation			
	[] 20-24 [] 25-34 [] 35-44	[] 45-54 [] 55-64 [] 65-74	[] 75-84 [] 85 & older			
3. What is	your marital stat	us?				
[]S	Single – Not cur Single – In a rela Married/Domest Separated/Divor	ntionship ic Partner	ionship			
4. What is	your highest lev	el of completed	l education?			
[] I []	Some High Scho High School Dip Bachelor's Degr Graduate Degree	oloma or GED ee				
5. What is	your ANNUAL	INCOME?				
6. How doe	es your annual ir	ncome compare	e with your current level of monthly expenses?			
[]] [[] [[]	Income is often j Income is often j Income is often j	just a little less about equal to just a little mo	ess than regular expenses s than regular expenses regular expenses re than regular expenses tore than regular expenses			

Appendix F

DESIRE TO HAVE CHILDREN QUESTIONNAIRE

Rate the following items using the seven-point scale below.

12	345	67
I strongly disagree	Neutral	I strongly agree
1. I know I would b unable to have child	• 1	d if my spouse/partner and I were
2. I have a strong de	esire to have children.	
3. I would like to ha	ve only one child.	
4. I am not sure I wa	ant to have children.	
5. I could be quite h	appy without having children	n.
6. If my spouse/part	ner and I could not have chil	dren, I would definitely try to adopt.
7. I could never man	ry someone who was strongl	ly against having children.
8. Without children	I would feel unfilled.	
9. I want a big famil	y.	
10. To me, family lit	è is very important.	
11. Sometimes I thin	k that I want children, someti	imes I think that I do not.
12. I really have not not have a strong at	<u> </u>	I want to have children, and I do
13. My spouse/partn	er has a desire to have childr	en.

Appendix G

CHILDHOOD MALTREATMENT HISTORY QUESTIONNAIRE

Instructions: Some children experience unpleasant moments at the hands of their parents during their childhood. Below you will see a list of possible ways that someone may have caused you harm when you were younger.

Please look at the list, and indicate if any type of abuse occurred at any time during your childhood, and what at what age it began and ended. If the abuse continued past the time you reached age 18 years, leave the "End" column blank and explain further in the Optional Information space provided below.

TYPE OF ABUSE	NEVER	YES	If YES, AT WHAT AGE did this type of abuse Begin? End?	
NOT ENOUGH TO EAT/DIRTY UNPROTECTED	[]	[]		
FELT UNLOVED/UNIMPORTANT	[]	[]		
MADE YOU FRIGHTENED	[]	[]		
HARSH WORDS/VERBALLY HURTING	[]	[]		
HITTING/PHYSICALLY HURTING	[]	[]		
SEXUAL CONTACT	[]	[]		

Optional Information:

It could be helpful to the current study to better understand your history. If you feel comfortable doing so, please explain your experiences as a child in the space provided below:

Appendix H

THANK YOU LETTER

Dear Participants,

Thank you for your participation in my research project and for the time it took you to complete the survey. Your participation will help me to have better results and a better understanding of the relationship between a woman's history of childhood maltreatment, and their desires to have children.

If you would like to know the results of this study after I have completed the project in May 2023, please contact me at email address below.

If you have and questions about the research you may contact me at my email address, or you may contact my supervisor, Ian S. Madfes, Ph.D. at ian.madfes@dominican.edu.

If you are a Dominican student and experienced any excessive discomfort as a result of your participation, you are encouraged to contact the Student Health Center for assistance (Phone: 415-485-3208). Other individuals who experienced discomfort that may wish to seek out professional assistance may do so by contacting any of the references listed at: http://www.partnershiphp.org/Community/Documents/Marin/Marin_MentalHealth.pdf

Sincerely,

Tayah Simpson Psychology Department Dominican University of California San Rafael, CA

Email Contact: tayah.simpson@students.dominican.edu