Parental Rejection and Child Emotion Dysregulation: The Mediating Role of Shame

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A R T I C L E   I N F O

A B S T R A C T

Objective: This study aimed to examine the mediating role of shame in the relationship between parental rejection and child emotion dysregulation among adolescents in Colombia.

Methods: The research employed a descriptive correlational design using a sample of 482 adolescents aged 10 to 17, selected based on the Morgan and Krejcie sampling table. Participants were recruited from public and private schools in urban areas of Colombia. Standardized tools were used to measure perceived parental rejection, internalized shame, and emotion dysregulation. Data were analyzed using Pearson correlation to assess bivariate relationships and Structural Equation Modeling (SEM) in AMOS-21 to evaluate the direct, indirect, and total effects within the hypothesized mediation model. Assumptions for normality, linearity, and multicollinearity were checked and confirmed prior to analysis.

Findings: Pearson correlation analysis revealed significant positive associations between parental rejection and shame ($r = .61$, $p < .001$), parental rejection and emotion dysregulation ($r = .58$, $p < .001$), and shame and emotion dysregulation ($r = .65$, $p < .001$). SEM results indicated that the structural model had a good fit ($\chi^2(84) = 211.63$, $\chi^2/df = 2.52$, CFI = 0.96, TLI = 0.95, RMSEA = 0.055). Parental rejection significantly predicted shame ($\beta = 0.61$, $p < .001$), and shame significantly predicted emotion dysregulation ($\beta = 0.54$, $p < .001$). A significant direct effect was found from parental rejection to emotion dysregulation ($\beta = 0.33$, $p < .001$), alongside a significant indirect effect through shame ($\beta = 0.33$, $p < .001$), supporting full mediation.

Conclusion: The findings suggest that shame is a critical emotional mechanism linking perceived parental rejection to difficulties in emotion regulation among adolescents. Targeting shame in therapeutic and educational interventions may mitigate the negative emotional consequences of parental rejection and promote emotional resilience in youth.

Keywords: Parental rejection, shame, emotion dysregulation, adolescents.

1. Introduction

Children's ability to regulate their emotions is critical to their psychosocial functioning, academic achievement, and interpersonal relationships. Emotion dysregulation, characterized by difficulties in identifying, expressing, and modulating emotional experiences, has been linked to a range of internalizing and externalizing disorders in youth, including anxiety, depression, aggression, and somatic complaints (Martin et al., 2018; Powers et al., 2022). While the development of effective emotion regulation strategies is a normative process shaped by neurological maturation and social learning, family dynamics, particularly the quality of parent-child interactions, play a significant role in shaping children's emotional competencies (Alsancak-Akbulut et al., 2023; Havewala & Wang, 2021).

Among the many relational determinants of emotion regulation, parental rejection has emerged as a salient predictor of emotional maladjustment in children and adolescents. Parental rejection includes behaviors such as emotional neglect, harsh criticism, withdrawal of affection, and overt hostility. These behaviors have been associated with adverse emotional outcomes, such as heightened emotional reactivity, impulsivity, and poor emotional control (Fenning et al., 2018; Kosson et al., 2020). According to interpersonal acceptance-rejection theory, perceived parental rejection undermines the child's basic psychological needs for warmth and security, thereby impairing the child's capacity for affective regulation (Gardner & Zimmer-Gembeck, 2018; Голубева & Истратова, 2018). These outcomes are not only immediate but may also extend into adolescence and adulthood, leading to enduring patterns of emotional dysregulation and psychological vulnerability (Bang & Lee, 2024; Jensen et al., 2020).

In recent years, empirical evidence has increasingly supported the association between parental rejection and child emotion dysregulation. For instance, Kosson et al. (2020) validated a youth-report measure of parental emotional abuse, demonstrating its predictive validity for youth emotional problems (Kosson et al., 2020). Moreover, longitudinal studies have identified that the experience of emotional unavailability and rejection from caregivers is linked to later emotional instability, particularly in high-risk populations (Jensen et al., 2020; Jiang & Lin, 2024). These findings align with neurobiological data indicating that chronic relational stress impairs the maturation of brain networks associated with emotion regulation, such as the prefrontal cortex and limbic system (Wang et al., 2022).

However, the mechanisms through which parental rejection impacts emotion regulation remain insufficiently understood. A growing body of research suggests that shame may serve as a key mediating factor. Shame is a self-conscious emotion that arises from the perception of being fundamentally flawed, inadequate, or unworthy in the eyes of others, particularly significant attachment figures (Çelebi & Acar, 2024; R. M. Smith et al., 2023). Rejection by parents may instill a chronic sense of shame in children, as the internalized belief of being unlovable or unacceptable leads to maladaptive self-appraisals (Papamichail & Bates, 2020; Pereira et al., 2022). This emotional state, in turn, may disrupt the child's ability to manage distress, heightening the risk for dysregulated behavior (Bang & Lee, 2024).

Supporting this conceptual framework, several empirical studies have highlighted the link between parental rejection, shame, and emotional dysregulation. In a study by Gardner and Zimmer-Gembeck (2018), rejection sensitivity was found to mediate the relationship between parenting behaviors and adolescent internalizing symptoms, with shame playing a central affective role in this process (Gardner & Zimmer-Gembeck, 2018). Similarly, Powers et al. (2022) demonstrated that emotion dysregulation in children was significantly associated with maternal emotional withdrawal, and that this pathway was partially explained by children's internalized shame (Powers et al., 2022). These findings underscore the importance of investigating shame not merely as an outcome, but as a psychological mechanism that channels the impact of parenting experiences into patterns of emotional responding.

The role of shame as a mediator is particularly relevant during adolescence, a developmental stage marked by heightened self-awareness, identity formation, and vulnerability to social evaluation (Alsancak-Akbulut et al., 2023; Kaloyanova, 2020). Adolescents who experience rejection from caregivers may be more likely to experience shame when navigating interpersonal challenges, which may exacerbate emotional dysregulation and increase the risk of psychopathology (Chen et al., 2024; Hafiz et al., 2023). Moreover, shame has been shown to impair attentional and cognitive resources, making it more difficult for individuals to engage in adaptive emotional strategies such as reappraisal or problem-solving (Cui et al., 2021; Martin et al., 2018). This perspective is consistent with Seddon et al.'s (2020) emotion socialization transmission framework, which posits that parental dysfunction, such as emotional

unavailability or inconsistency, undermines the child's capacity to develop coherent and regulated emotional schemas (Seddon et al., 2020).

The transactional nature of these processes further complicates the developmental trajectory of emotion dysregulation. According to Lunkenheimer et al. (2021), the bidirectional influence between child dysregulation and parental behaviors suggests that not only does rejection foster emotional difficulties, but that these difficulties can, in turn, elicit more negative parenting responses, perpetuating a maladaptive cycle (Lunkenheimer et al., 2021). The presence of parental depressive symptoms and emotional instability amplifies this dynamic, leading to increased variability and unpredictability in parent-child exchanges (Hafiz et al., 2023; Pereira et al., 2022). Such variability makes it difficult for children to learn consistent cues for emotional regulation, further increasing the likelihood of shame-based emotional reactivity. Another important consideration is the influence of sociocultural context. Emotional development and parenting practices are not universally experienced but are shaped by cultural norms, values, and expectations. For example, Jiang and Lin (2024) observed that intergenerational transmission of maltreatment in Chinese families was associated with heightened emotion dysregulation in children, emphasizing the cultural specificity of emotional development (Jiang & Lin, 2024). Similarly, Bang and Lee (2024) found that negative parent-child relationships predicted self-injurious behavior in Korean college students, with shame functioning as a central mediating emotion (Bang & Lee, 2024). These cross-cultural findings suggest that the constructs of parental rejection, shame, and emotion dysregulation are globally relevant, although their expression may differ by context (Çelebi & Acar, 2024; Gardner & Zimmer-Gembeck, 2018). Despite these insights, few studies have simultaneously examined all three variables—parental rejection, shame, and emotion dysregulation—within a single statistical framework. Structural Equation Modeling (SEM) offers a robust analytic approach to test the mediational pathways and account for the complex interplay among these constructs. By using SEM, researchers can evaluate both direct and indirect effects while accounting for measurement error and model fit indices (Marquis et al., 2017; Vandewalle et al., 2017). Furthermore, existing studies often rely on either parental or adolescent reports alone, which may introduce bias or limit the ecological validity of the findings (Havewala & Wang, 2021; Papamichail & Bates, 2020). A multi-informant, methodologically rigorous investigation is

therefore needed to advance the field. Given these theoretical and empirical considerations, the present study aims to explore the mediating role of shame in the relationship between parental rejection and child emotion dysregulation in a sample of Colombian adolescents.

2. Methods

2.1. Study Design and Participants

This study employed a descriptive correlational design to investigate the relationship between parental rejection and child emotion dysregulation, with shame considered as a mediating variable. The target population consisted of school-aged children and adolescents residing in Colombia. A total of 482 participants were selected based on the sample size guidelines provided by the Morgan and Krejcie (1970) table, ensuring an adequate representation of the population for correlational and structural modeling analyses. Participants were recruited from public and private educational institutions in urban areas through stratified random sampling, ensuring variability in age, gender, and socioeconomic status. Informed consent was obtained from both participants and their legal guardians prior to participation, and the study was conducted in accordance with ethical research standards.

2.2. Measures

2.2.1. Emotion Regulation

The Difficulties in Emotion Regulation Scale (DERS), developed by Gratz and Roemer in 2004, is a widely used instrument to assess multiple aspects of emotion dysregulation in adolescents and adults. The original version includes 36 items and measures six subscales: Nonacceptance of Emotional Responses, Difficulties Engaging in Goal-Directed Behavior, Impulse Control Difficulties, Lack of Emotional Awareness, Limited Access to Emotion Regulation Strategies, and Lack of Emotional Clarity. Respondents rate each item on a 5-point Likert scale ranging from 1 (almost never) to 5 (almost always), with higher scores indicating greater difficulties in emotion regulation. The DERS has demonstrated strong internal consistency (Cronbach's alpha > .80 across subscales), good test-retest reliability, and robust convergent and discriminant validity in various populations, including clinical and non-clinical youth samples (Kayalar & Hiçdurmaz, 2024; Nooripour et al., 2023; J. E. Smith et al., 2023).

2.2.2. Shame

The Experience of Shame Scale (ESS), developed by Andrews, Qian, and Valentine in 2002, is a standardized self-report measure designed to assess the intensity and frequency of shame experiences across different domains. The ESS includes 25 items divided into three subscales: Characterological Shame (shame about personality traits), Behavioral Shame (shame about one's actions), and Bodily Shame (shame about body and appearance). Respondents rate how often they experienced shame-related feelings in the past year on a 4-point Likert scale ranging from 1 (not at all) to 4 (very much). Higher total scores reflect greater levels of experienced shame. The ESS has shown excellent internal consistency ($\alpha > .90$) and has been validated in multiple studies across different cultural contexts, supporting its reliability and construct validity for use with adolescents and young adults (Farnoosh et al., 2024; Lagerström et al., 2025; Riebel et al., 2024).

2.2.3. Parental Rejection

The Parental Acceptance-Rejection Questionnaire (PARQ), developed by Rohner, Saavedra, and Granum in 1980 as part of Interpersonal Acceptance-Rejection Theory (IPARTheory), is a well-established tool for assessing perceived parental rejection or acceptance. The child version of the PARQ contains 60 items that assess children's perceptions of their parents' behavior on four subscales: Warmth/Affection, Hostility/Aggression, Indifference/Neglect, and Undifferentiated Rejection. Items are rated on a 4-point Likert scale from 1 (almost never true) to 4 (almost always true), with higher scores on the rejection-related subscales indicating greater perceived parental rejection. The PARQ has consistently demonstrated good internal consistency (Cronbach's alpha values typically above .85), test-retest reliability, and cross-cultural validity in a wide range of populations, making it a reliable tool for

research on parent-child relationships (Braet et al., 2018; Rohner et al., 2019; Sajid & Shah, 2021; Yang et al., 2019).

2.3. Data Analysis

For data analysis, two main statistical approaches were employed. First, Pearson correlation coefficients were calculated using SPSS-27 to assess the bivariate relationships between the dependent variable (child emotion dysregulation) and the independent variables (parental rejection and shame). This analysis helped establish the direction and strength of linear associations among the core constructs. Subsequently, a Structural Equation Model (SEM) was developed and tested using AMOS-21 to evaluate the mediating role of shame in the relationship between parental rejection and child emotion dysregulation. Model fit indices, including the Comparative Fit Index (CFI), Tucker-Lewis Index (TLI), Root Mean Square Error of Approximation (RMSEA), and Chi-square/df ratio, were used to assess the adequacy of the model. Both direct and indirect path coefficients were analyzed to determine the significance of the mediating effect.

3. Findings and Results

The sample consisted of 482 participants from Colombia, ranging in age from 10 to 17 years (M = 13.42, SD = 2.01). Of the total participants, 248 were female (51.45%) and 234 were male (48.55%). In terms of school level, 196 participants (40.66%) were in elementary school, 158 (32.78%) in middle school, and 128 (26.56%) in high school. Regarding family structure, 319 participants (66.19%) reported living with both parents, 103 (21.37%) lived with a single parent, and 60 (12.45%) lived with extended family or guardians. Socioeconomic status was distributed as follows: 141 participants (29.25%) identified as low-income, 267 (55.39%) as middle-income, and 74 (15.35%) as high-income. These distributions suggest a diverse and representative sample across key demographic variables.

Table 1

Descriptive Statistics for Study Variables (N = 482)

Variable	Mean (M)	Standard Deviation (SD)
Parental Rejection	98.47	15.38
Shame	67.25	12.41
Emotion Dysregulation	104.83	16.97

The descriptive statistics presented in Table 1 indicate that the mean score for parental rejection was 98.47 (SD = 15.38), suggesting moderate levels of perceived rejection among participants. The mean shame score was 67.25 (SD =

12.41), reflecting a moderately high level of internalized shame. The average score for emotion dysregulation was 104.83 (SD = 16.97), which indicates considerable variability across participants.

Prior to conducting the main analyses, the assumptions for Pearson correlation and structural equation modeling were examined and met. Normality was assessed through skewness and kurtosis values, all of which fell within the acceptable range of -1 to +1 for univariate normality; for instance, the skewness for emotion dysregulation was 0.23 and kurtosis was -0.48. Linearity was confirmed through scatterplots, which revealed consistent linear relationships among the variables. Homoscedasticity was evaluated and verified through residual plots, showing a random distribution of errors. Multicollinearity was assessed using variance inflation factors (VIF), with all values below 2.10, indicating no multicollinearity concerns. Additionally, the Mahalanobis distance test did not identify any significant multivariate outliers beyond the critical chi-square value ($\chi^2(3) = 16.27$, $p < .001$), supporting the appropriateness of the data for SEM analysis.

Table 2

Pearson Correlations Between Study Variables (N = 482)

Variable	1	2	3
1. Parental Rejection	—		
2. Shame	.61** (p < .001)	—	
3. Emotion Dysregulation	.58** (p < .001)	.65** (p < .001)	—

As shown in Table 2, parental rejection was significantly positively correlated with shame (r = .61, p < .001) and emotion dysregulation (r = .58, p < .001). Shame was also significantly positively correlated with emotion dysregulation (r = .65, p < .001), supporting the hypothesized relationships among the variables and justifying the use of SEM for mediation analysis.

Table 3

Fit Indices for the Structural Equation Model

Fit Index	Value	Acceptable Threshold
Chi-Square (X^2)	211.63	—
Degrees of Freedom	84	—
X^2/df	2.52	< 3.00
GFI	0.94	≥ 0.90
AGFI	0.91	≥ 0.90
CFI	0.96	≥ 0.95
TLI	0.95	≥ 0.95
RMSEA	0.055	≤ 0.06

Table 3 presents the model fit indices for the SEM. The model demonstrated an acceptable fit to the data, with $X^2(84) = 211.63$, X^2/df = 2.52, GFI = 0.94, AGFI = 0.91, CFI = 0.96, TLI = 0.95, and RMSEA = 0.055. All indices fell within the acceptable or good range, indicating that the hypothesized model provided a good fit to the observed data.

Table 4

Standardized and Unstandardized Path Coefficients in the Structural Model

| Path	B	SE	β	p
Parental Rejection → Shame	0.43	0.04	0.61	< .001
Shame → Emotion Dysregulation	0.58	0.05	0.54	< .001
Parental Rejection → Emotion Dysregulation (Direct)	0.31	0.06	0.33	< .001
Parental Rejection → Emotion Dysregulation (Indirect via Shame)	0.25	0.03	0.33	< .001
Parental Rejection → Emotion Dysregulation (Total)	0.56	—	0.66	< .001

As illustrated in Table 4, all path coefficients were statistically significant. Parental rejection significantly predicted shame (B = 0.43, β = 0.61, p < .001), and shame, in turn, significantly predicted emotion dysregulation (B = 0.58, β = 0.54, p < .001). There was also a significant direct effect of parental rejection on emotion dysregulation (B = 0.31, β = 0.33, p < .001). The indirect effect of parental rejection on emotion dysregulation through shame was also significant (B = 0.25, β = 0.33, p < .001), resulting in a total effect of 0.56 (β = 0.66, p < .001). These results support the hypothesized mediation model, confirming shame as a significant mediator in the relationship between parental rejection and child emotion dysregulation.

Figure 1

Model with Beta Coefficients
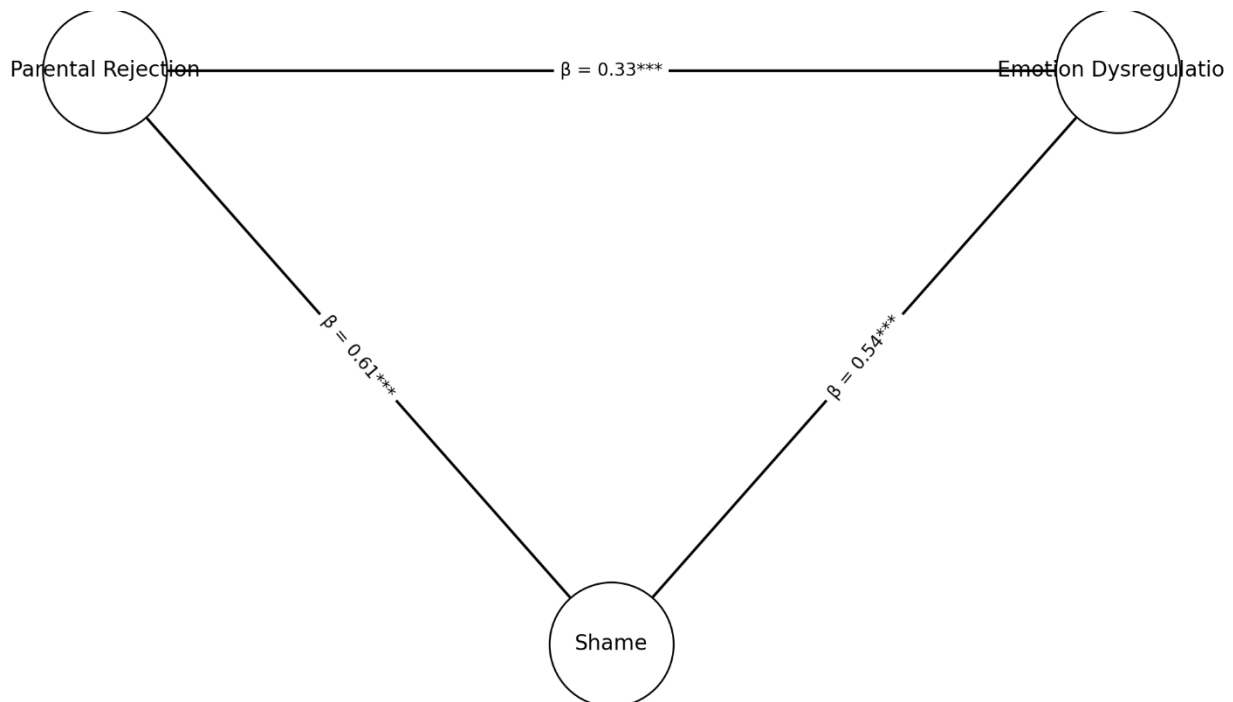
4. Discussion and Conclusion

The present study aimed to investigate the relationship between parental rejection and child emotion dysregulation, with shame examined as a potential mediating variable. Using Pearson correlation and Structural Equation Modeling (SEM), the results supported all three proposed hypotheses. Specifically, parental rejection was found to be significantly and positively associated with child emotion dysregulation. In addition, shame demonstrated significant positive correlations with both parental rejection and emotion dysregulation. Finally, SEM analysis revealed that shame significantly mediated the relationship between parental rejection and child emotion dysregulation, indicating that children who perceive their parents as rejecting are more likely to internalize shame, which in turn contributes to greater difficulties in regulating emotions.

These findings are consistent with theoretical models and empirical research suggesting that adverse parenting behaviors disrupt children's emotional development through complex internalizing pathways. The significant direct relationship between parental rejection and child emotion dysregulation aligns with previous research that has established emotional neglect, criticism, and withdrawal as significant contributors to the breakdown of children's emotional self-regulation (Fenning et al., 2018; Kosson et al., 2020). Children internalize these negative relational experiences, often interpreting them as evidence of their unworthiness, which undermines their capacity to identify, express, and manage their emotions in adaptive ways (Alsancak-Akbulut et al., 2023; Gardner & Zimmer-Gembeck, 2018).

This result is also consistent with research demonstrating that rejection disrupts secure attachment formation, which is

essential for the development of emotional competence. Studies have shown that children who lack emotional security due to parental rejection exhibit higher levels of impulsivity, affective lability, and difficulty in applying regulation strategies such as reappraisal and emotional suppression (Jiang & Lin, 2024; Lunkenheimer et al., 2021). These patterns of dysregulation can emerge early and persist across developmental stages, ultimately increasing vulnerability to a range of psychological disorders.

The identification of shame as a mediator provides further insight into how the effects of parental rejection become internalized and translated into emotion dysregulation. Shame, as a deeply self-referential emotion, functions as a psychological filter through which children interpret their relational world. When caregivers are rejecting or emotionally unavailable, children often conclude that they are inherently defective or unlovable, giving rise to persistent shame-based schemas (Bang & Lee, 2024; Çelebi & Acar, 2024). These schemas may manifest in patterns of rumination, avoidance, and hyper-reactivity to perceived criticism, which disrupt emotion regulation processes.

This finding echoes the results of previous studies that have linked shame to impaired emotional functioning. For instance, Powers et al. (2022) found that emotion dysregulation in children was strongly predicted by maternal emotional withdrawal and that shame partially explained this association (Powers et al., 2022). Similarly, Gardner and Zimmer-Gembeck (2018) emphasized the central role of shame in mediating the relationship between rejection sensitivity and both depression and anxiety in adolescents (Gardner & Zimmer-Gembeck, 2018). These findings support the argument that shame serves not only as a byproduct of negative parenting but also as a key mechanism linking rejection to emotional difficulties.

Furthermore, our findings confirm the relevance of emotion socialization models, such as the cascade framework proposed by Seddon et al. (2020), which posits that maladaptive parental responses to children's emotional expressions can lead to internalized shame and dysregulation over time (Seddon et al., 2020). Consistent with this framework, this study suggests that when rejection is chronic and unaddressed, shame becomes embedded in children's self-perception, fueling emotional instability. This is especially critical during adolescence, a period when identity formation and peer comparison intensify the impact of shame on self-regulation (Papamichail & Bates, 2020; R. M. Smith et al., 2023).

The strength of the indirect path from parental rejection to emotion dysregulation through shame also highlights the emotional burden carried by children in environments where caregivers fail to offer emotional validation or acceptance. Shame creates a vulnerability that undermines children's motivation and cognitive control, both of which are essential to regulating emotional responses (Cui et al., 2021; Martin et al., 2018). The current results demonstrate that the impact of parental rejection is not limited to observable behavioral outcomes but extends deeply into the emotional architecture of the child's personality.

Additionally, our findings may be interpreted through the lens of intergenerational risk transmission. Previous research has established that emotionally dysregulated parents are more likely to engage in rejecting behaviors, thereby perpetuating maladaptive emotional patterns in their children (Hafiz et al., 2023; Wang et al., 2022). Jensen et al. (2020) found that trauma and hardship experienced by parents could negatively influence their parenting behavior, often resulting in emotionally unresponsive or inconsistent caregiving (Jensen et al., 2020). These intergenerational dynamics may help explain how shame and emotion dysregulation become entrenched across family systems, making early intervention critically important.

The context of this study, situated in Colombia, also contributes valuable cross-cultural insight. While most existing research has focused on Western populations, the psychological impact of parental rejection and shame appears consistent across cultural boundaries. For example, Bang and Lee (2024) found similar patterns in South Korea, where negative parent-child relationships were significantly associated with self-injurious behaviors mediated by shame (Bang & Lee, 2024). In China, Jiang and Lin (2024) demonstrated that children exposed to intergenerational maltreatment were more prone to emotion dysregulation through the mechanism of internalized shame (Jiang & Lin, 2024). These findings reinforce the universal nature of the studied constructs while encouraging greater inclusion of diverse cultural contexts in developmental psychology research.

Importantly, our findings are supported by research emphasizing the need to assess not only parental behaviors but also children's internal emotional experiences. While much attention has been placed on overt forms of parental mistreatment, subtle emotional rejection and lack of attunement can be equally damaging. According to Bennett et al. (2023), the way parents reflect on and respond to their children's inner states significantly predicts emotional

outcomes, including the development of shame-proneness and dysregulation (Bennett et al., 2023). Likewise, Pereira et al. (2022) showed that certain maladaptive parental reactions to children's negative emotions were linked to elevated internalizing symptoms, highlighting the importance of emotional support in the home environment (Pereira et al., 2022).

Taken together, the findings of this study underscore the importance of addressing shame in clinical and educational interventions targeting emotion dysregulation. Traditional approaches to emotional and behavioral problems in children often overlook the underlying self-conscious emotions that mediate these difficulties. By identifying shame as a central mechanism, interventions can be tailored to help children build more adaptive self-appraisals, challenge internalized beliefs of unworthiness, and develop healthier emotional responses. Moreover, interventions that focus on enhancing parental emotional responsiveness and reducing rejection are likely to have long-term benefits for children's emotional development.

5. Suggestions and Limitations

Despite the important contributions of this study, several limitations should be noted. First, the cross-sectional design limits the ability to infer causality among the variables. Although the mediating model was theoretically grounded and statistically supported, longitudinal data would be necessary to establish temporal precedence and directionality. Second, the study relied exclusively on self-report measures, which may introduce social desirability bias or inaccuracies in retrospective reporting, especially for sensitive constructs like parental rejection and shame. Third, while the sample was culturally diverse within the Colombian context, it may not fully capture the variability found in other regions or among marginalized subpopulations, such as indigenous or displaced communities. Additionally, while the SEM model demonstrated acceptable fit indices, other unmeasured variables such as temperament, peer relationships, or trauma history could also contribute to emotion dysregulation and were not controlled for in this study.

Future research should employ longitudinal designs to explore how the dynamics of parental rejection, shame, and emotion dysregulation evolve over time. Such studies could clarify the developmental trajectory and identify critical periods for intervention. Additionally, future investigations could include multi-informant data (e.g., parent and teacher reports) and observational measures to reduce reliance on self-report and capture emotional processes more objectively. Cross-cultural comparisons would also be beneficial in examining how cultural values around shame and parenting shape emotional development. Finally, it would be important to explore protective factors, such as resilience, secure peer attachments, or school connectedness, which may buffer the negative effects of parental rejection and shame.

The findings of this study have practical implications for mental health professionals, educators, and caregivers. Interventions aimed at reducing child emotion dysregulation should include components focused on addressing internalized shame and promoting self-compassion. Parenting programs should prioritize emotional responsiveness, teaching caregivers how to validate their children's emotions and avoid rejecting behaviors. School-based mental health programs can incorporate psychoeducation about shame and emotional coping strategies to help students better understand and manage their feelings. Practitioners working with children from high-conflict or emotionally neglectful families should assess for experiences of parental rejection and shame to guide individualized treatment planning. Creating safe, supportive environments where children feel accepted and valued is essential for fostering emotional resilience and healthy development.

Authors' Contributions

All authors have contributed significantly to the research process and the development of the manuscript.

Declaration

In order to correct and improve the academic writing of our paper, we have used the language model ChatGPT.

Transparency Statement

Data are available for research purposes upon reasonable request to the corresponding author.

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Declaration of Interest

The authors report no conflict of interest.

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Ethical Considerations

The study protocol adhered to the principles outlined in the Helsinki Declaration, which provides guidelines for ethical research involving human participants.

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