




# Structural Modeling of the Tendency Toward Aggression Based on Social Acceptance with the Mediation of Childhood Abuse Experience in Neglected and Orphaned Children

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## ABSTRACT

**Objective:** The main objective of this study is to model the structural relationships of the tendency toward aggression based on social acceptance with the mediation of childhood abuse experience.

**Methods and Materials:** The research method is correlational, based on structural equation modeling. The statistical population of this study includes 309 neglected and orphaned children. Considering the number of latent variables in this study, a sample of 250 individuals was selected. The sampling method is stratified sampling. The data collection tools include the Aggression Questionnaire by Nielson et al. (2000), the Social Acceptance Questionnaire by Crowne and Marlowe (1960), and the Child Abuse Questionnaire (Self-report Scale) by Nourbakhsh (2012). Structural equation modeling was used for data analysis, and SPSS and LISREL software were employed for data processing.

**Findings:** The results from the research data indicate a relationship between social acceptance and childhood abuse experience and the tendency toward aggression in neglected and orphaned children. There is also a relationship between childhood abuse experience and the tendency toward aggression in neglected and orphaned children. Furthermore, a relationship exists between social acceptance and the tendency toward aggression through the mediation of childhood abuse experience in neglected and orphaned children.

**Conclusion:** Enhancing social acceptance may reduce aggressive behaviors and improve mental health outcomes, emphasizing the need for supportive interventions and targeted programs to address the unique challenges faced by these children.

**Keywords:** Social Acceptance, Tendency Toward Aggression, Childhood Abuse Experience

## 1. Introduction

Today, a significant number of children born into dysfunctional families face limited opportunities for healthy development, and some are deprived of this initial environment altogether. These children, who live in orphanages, encounter various individuals, beliefs, and sometimes contradictory cultures during their stay in such institutions, which may influence them (Vahedi & Kabiri, 2022). Due to deprivation and frustration, these children often develop behavioral and emotional problems that require attention and care from mental health specialists. Among the common behavioral issues in these children is aggression. Zain (2015), in his research, noted that aggression is one of the major issues in adolescence, which can lay the groundwork for many future problems and risky behaviors (Khanzadeh, 2018). Aggression refers to actions intended to harm others, manifesting in direct forms (e.g., hitting, fighting) and indirect forms (e.g., spreading rumors, exclusion) (Damavandian et al., 2022). The American Psychological Association (2014) defines aggression as a natural emotion that, if uncontrolled, can have destructive effects on interpersonal relationships (Bahmani & Jahanbakhshi, 2020; Moreira, 2024). The World Health Organization describes aggression as "the intentional use of force or power, whether physical, intimidation, or threats, directed toward oneself or others, or against a group or community, which results in or has a high likelihood of resulting in injury, death, psychological harm, impaired development, or deprivation" (Mikaeili & Rahimzadegan, 2021). In another definition, aggression is typically seen as behavior intended to harm another person or destroy property. Aggression is a behavioral problem that, if intensified, leads to communication problems and personality disorders, which, in addition to causing issues for the aggressor, also harm victims, leading to depression, anxiety, feelings of loneliness, and low self-esteem (Keatley et al., 2017). Research has shown that aggressive behaviors in adolescence are positively correlated with increased criminal behaviors in adulthood (DeLisi et al., 2021). Additionally, this issue can lead to affiliation with deviant groups, which creates a fertile ground for substance abuse (Pourmohseni & Niksarsh, 2022). Aggression is also associated with decreased mental processing speed and impulsive decision-making (Jadidi & Dashti, 2022; Prachi, 2024).

Aggression among neglected and orphaned children, who lack the important and supportive role of a family, can be

influenced by various individual, familial, and social factors. Given the significant impact of this personality trait on the present and future individual and social lives of neglected and orphaned children, it is critical to study it carefully. Researchers such as Schwartz (2006) and Rostamian (2019) have stated that social acceptance is one of the factors influencing aggression tendencies. Social acceptance is the result of several social phenomena, including social influence, conformity, social judgment, and individual attitudes. It involves a belief in the inherent goodness of others and a positive view of human nature, all of which contribute to a sense of peace among individuals in society (Ghaffari et al., 2021). Social acceptance is defined as being accepted by family, peers, friends, and others (Ferreira et al., 2019). Social acceptance fosters interpersonal communication skills and high levels of social support, with peer acceptance facilitating the receipt of necessary social support from friends (Zhang, 2020). Karanja (2016) asserted that children who are accepted by their peers have higher academic achievement and self-esteem, while those who are rejected by their peers suffer from psychological problems and delayed cognitive and social development, as well as lower self-esteem (Antonopoulou et al., 2019).

Apart from social acceptance, studies have acknowledged that childhood abuse experience can also influence the tendency toward aggression. Child abuse is not a new issue and has not escaped the attention of researchers and lawmakers. In 1946, Ambrose Tardieu, a physician, reported 32 cases of child disability (Shirali, 2021). According to official statistics from the World Health Organization (2018), more than 40 million children worldwide are exposed to various forms of abuse (physical, sexual, emotional, and psychological) each year, with approximately three million children affected annually in the United States. In Iran, research found that over 30% to 35% of children have experienced abuse (Atifi et al., 2019). Childhood abuse represents a severe violation of safety and well-being that children experience in a relational context (Warmingham et al., 2020). This issue has both short-term and long-term consequences in individuals' lives, including physical disorders such as brain damage, psychological disorders like anxiety and depression, and behavioral issues such as aggression, delinquency, violence, and social relationship difficulties (Mahjoub, 2019).

Statistics show that in 2022 alone, 61 abandoned infants were placed in care centers, and more than 9,000 children across the country are under the supervision of such centers, highlighting the need for careful attention to their

educational and developmental needs. Despite efforts to place these children with families, it is essential to ensure their psychological and emotional well-being. Aggression and signs of depression and defiance in orphans living in orphanages present a significant challenge, requiring action to address the root causes. With extended stays, defiance and aggression levels increase among orphaned children in orphanages. Therefore, identifying the variables that influence aggression is a crucial step in implementing effective interventions to reduce aggression. Given the consequences and impacts of aggression and tendencies toward it among neglected and orphaned children, efforts must be made to reduce aggression levels. By fostering patience and tolerance, children can be taught to confront future challenges logically and employ practical solutions instead of reacting with aggression. In line with this, the Mazandaran Street Children Center, which is responsible for the care and guidance of these children to other orphanage centers, aims to evaluate the variables influencing aggression levels among children under its care. Based on previous research and the insights of experts in the field, the role of social acceptance and childhood abuse experience has been studied to answer the overarching question: Is there a relationship between social acceptance, with the mediation of childhood abuse experience, and the tendency toward aggression in neglected and orphaned children at the Mazandaran Street Children Center?

## 2. Methods and Materials

### 2.1. Study Design and Participants

This study, based on its objective, is a correlational research utilizing structural equation modeling (SEM). The statistical population of this study includes 309 orphaned and neglected children who, at the time of the study in 2022, were either housed in care centers supervised by the Mazandaran Street Children Center or had been returned to their families or aged out of the centers. These centers included Shahidan Shartash (29 children), Mahdi Moud (68 children), Imam Ali (50 children), Tolou Mehr Arezoha (51 children), Vahid (29 children), Tabarestan 110 (46 children), and Mahdi Home (36 children). Considering the number of latent variables in this study, 220 children were initially selected as the sample. However, to increase the similarity between the sample and the target population, improve test power, and enhance the generalizability of the results, the final sample size was set at 250. The sampling method used was stratified sampling.

The inclusion criteria were as follows: all participants were required to provide informed consent to complete the questionnaires, be no older than 18 years of age, have no severe behavioral issues that would interfere with the study, not be on medications that could affect the results, and not have Down syndrome or autism spectrum disorder.

The exclusion criteria included: lack of consent to answer the questionnaires, incomplete or random responses to the questionnaire items, unwillingness of parents or the child to continue participation, lack of cooperation from the child, absence from more than two sessions, or the onset of any illness during the study period.

### 2.2. Measures

#### 2.2.1. Aggression

The Aggression Questionnaire, developed by Nielson et al. (2000), contains 39 items across four subscales: frustration, physical aggression, peer relations, and relations with authority figures. Responses are measured on a four-point scale: 1- I don't care, 2- It bothers me, 3- It really upsets me, 4- I get angry. The questionnaire assesses the intensity of anger across four dimensions: frustration (11 items), physical aggression (9 items), peer relations (9 items), and relations with authority figures (10 items). The validity and reliability of this questionnaire have been confirmed in numerous studies (Damavandian et al., 2022).

#### 2.2.2. Child Abuse

The Child Abuse Questionnaire, developed by Nourbakhsh (2012), contains 25 items across five subscales: physical abuse, sexual abuse, neglect, malnutrition, and emotional abuse. This questionnaire has been widely used and its validity and reliability have been confirmed in numerous studies (Mahjoub, 2019; Shiral, 2021).

#### 2.2.3. Social Acceptance

Social Acceptance Questionnaire by Crowne and Marlowe (1960): The Social Acceptance Scale, developed by Crowne and Marlowe (1960), consists of 32 items. The questionnaire scores range from 0 to 33, with higher scores indicating greater social acceptance. The validity and reliability of this questionnaire have been confirmed by various researchers (Ghaffari et al., 2021).

### 2.3. Data analysis

For data analysis, both descriptive and inferential statistics were used. Descriptive statistics such as mean and standard deviation and inferential statistics such as univariate covariance analysis (ANCOVA) and multivariate covariance analysis (MANCOVA) were employed. Data analysis was performed using SPSS25 statistical software.

## 3. Findings and Results

In this study, children aged 11 to 15 years constituted the largest proportion of the sample, with 139 participants

(55.60%). The smallest group, with 44 participants (17.60%), were children aged 16 to 18 years. To assess the normality of the data, the Kolmogorov-Smirnov test was used. The null hypothesis states that the data distribution is normal and is tested at a 0.05 significance level. If the significance value is greater than 0.05, it can be concluded that there is no reason to reject the normality of the data. The results of this test indicated that, for most variables, the significance level was greater than  $\alpha = 0.05$ , confirming the normal distribution of the data.

**Table 1**

*Pearson Correlation Coefficients Between Study Variables*

Variables	1	2	3	4	5	6	7	8	9
Social Acceptance	1	-0.450	-0.355	-0.416	-0.402	-0.360	-0.361	-0.741	-0.391
Physical Abuse	-	1	0.387	0.376	0.450	0.418	0.335	0.469	-
Sexual Abuse	-	-	1	0.466	0.436	0.412	0.336	0.383	-
Neglect and Inattention	-	-	-	1	0.395	0.781	0.454	0.356	-
Malnutrition	-	-	-	-	1	0.482	0.350	0.446	-
Emotional Abuse	-	-	-	-	-	1	0.457	0.564	-
Childhood Abuse	-	-	-	-	-	-	1	0.772	-
Tendency Toward Aggression	-	-	-	-	-	-	-	1	-

P<0.01

The results of Pearson correlation coefficients revealed a significant negative relationship between social acceptance and the tendency toward aggression ( $r = -0.391$ ,  $p < 0.01$ ), and a significant positive relationship between childhood abuse experience and the tendency toward aggression ( $r = 0.772$ ,  $p < 0.01$ ).

To analyze the hypotheses, the theoretical model formulated for each hypothesis must be processed to determine the extent to which the collected data support the theoretical model. For this purpose, quantitative model fit

indices are used. If the general indices are acceptable, meaning that the theoretical model is confirmed, the relationships within the model can be examined. These relationships include regression coefficients (impact coefficients) related to each hypothesis and the factor loadings for each item. To test the significance of these coefficients, the partial P index is used, where values less than 0.05 indicate acceptable coefficients. The assumptions for path analysis were met; therefore, path analysis was used to examine the structural relationships between the study variables.

**Table 2**

*Fit Indices for the Revised Model*

Index	Value	Criterion	Interpretation
Chi-Square ( $\chi^2$ )	77.13	-	-
Degrees of Freedom (df)	35	-	-
Significance Level	0.001	< 0.05	Model Fit
$\chi^2/df$	2.20	< 3	Good Fit
Goodness of Fit Index (GFI)	0.912	> 0.90	Good Fit
Adjusted GFI (AGFI)	0.861	> 0.85	Good Fit
Relative Fit Index (RFI)	0.934	> 0.90	Good Fit
Incremental Fit Index (IFI)	0.922	> 0.90	Good Fit
Comparative Fit Index (CFI)	0.920	> 0.90	Good Fit

Tucker-Lewis Index (TLI)	0.927	> 0.90	Good Fit
Normed Fit Index (NFI)	0.918	> 0.90	Good Fit
RMSEA	0.029	< 0.10	Good Fit
Parsimonious NFI (PNFI)	0.669	> 0.50	Good Fit
Parsimonious GFI (PGFI)	0.677	> 0.50	Good Fit

The results of Table 2 indicate that the  $\chi^2$  statistic is 77.13 with 35 degrees of freedom, resulting in a  $\chi^2/df$  ratio of 2.20, which is less than 3, indicating an excellent model fit. The Goodness of Fit Index (GFI) is 0.912, showing a good model fit. The Adjusted GFI (AGFI) is 0.861, which is greater than 0.85, confirming a good model fit. The Root Mean Square Error of Approximation (RMSEA) is 0.029, which is below 0.10, indicating that the research model is acceptable. The Bentler-Bonett Index (NFI) is 0.918, the Tucker-Lewis Index (TLI) is 0.927, the Comparative Fit Index (CFI) is

0.920, and the Relative Fit Index (RFI) is 0.934, all of which confirm a good model fit and validate the research model.

Based on the above findings and quantitative fit indices, it can be concluded that the theoretical model is acceptable. Therefore, we can now examine the relationships within the model and the regression coefficients between the latent variables. To test the hypothesis, the partial (p-value) index was used, where a value of less than 0.05 indicates a significant relationship.

**Table 3**

*Indirect Path Estimates in the Model Using Bootstrap*

Exogenous Variable	Mediator	Endogenous Variable	Estimate	Upper Bound	Lower Bound	Significance Level	Confidence Interval
Social Acceptance	Childhood Abuse	Tendency Toward Aggression	-0.536	0.247	0.130	0.006	95% CI

Based on the results, the indirect effect of social acceptance on the tendency toward aggression, mediated by childhood abuse experience, is estimated at -0.536. This path coefficient is significant at a 95% confidence level, as the results of the bootstrap test for the indirect effect show that the upper and lower bounds of this path coefficient do not include zero (CI: -0.536, 95%, 0.130~0.247). Therefore, the

mediating role of childhood abuse experience in the present hypothesis is confirmed.

Thus, the main hypothesis of the study, which proposes that there is a relationship between social acceptance and the tendency toward aggression mediated by childhood abuse experience in children at the Mazandaran Street Children Center, is confirmed.

**Table 4**

*Direct Effects and Significance Levels Between Variables*

Path	Standardized Coefficient	Standard Error	t-value	Significance Level
Social Acceptance ----> Tendency Toward Aggression	-0.391	0.235	4.37	0.0005
Childhood Abuse ----> Tendency Toward Aggression	0.772	0.324	8.75	0.0005

The results show that the direct effect of "social acceptance on the tendency toward aggression" is calculated as -0.391, indicating a favorable correlation. The t-value for this test is 4.37, which is greater than the critical t-value of 1.96 at the 5% error level, indicating that the observed correlation is significant. Therefore, it can be concluded that there is a relationship between social acceptance and the tendency toward aggression in neglected and orphaned children.

Additionally, the direct effect of "social acceptance on childhood abuse experience" is calculated as -0.741,

indicating a favorable correlation. The t-value for this test is 8.72, which is greater than the critical t-value of 1.96 at the 5% error level, indicating that the observed correlation is significant. Therefore, it can be concluded that there is a relationship between social acceptance and childhood abuse experience in neglected and orphaned children.

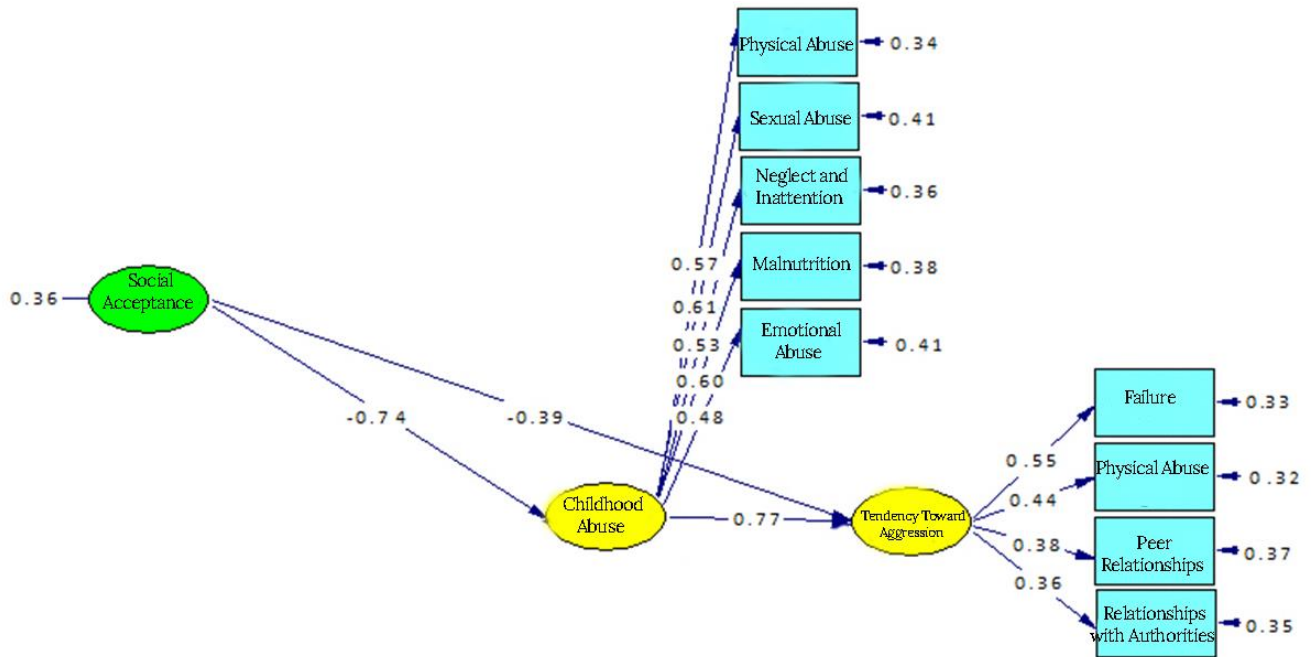
Finally, the direct effect of "childhood abuse experience on the tendency toward aggression" is calculated as 0.772, indicating a favorable correlation. The t-value for this test is 8.75, which is greater than the critical t-value of 1.96 at the 5% error level, indicating that the observed correlation is

significant. Therefore, it can be concluded that there is a relationship between childhood abuse experience and the

tendency toward aggression in neglected and orphaned children.

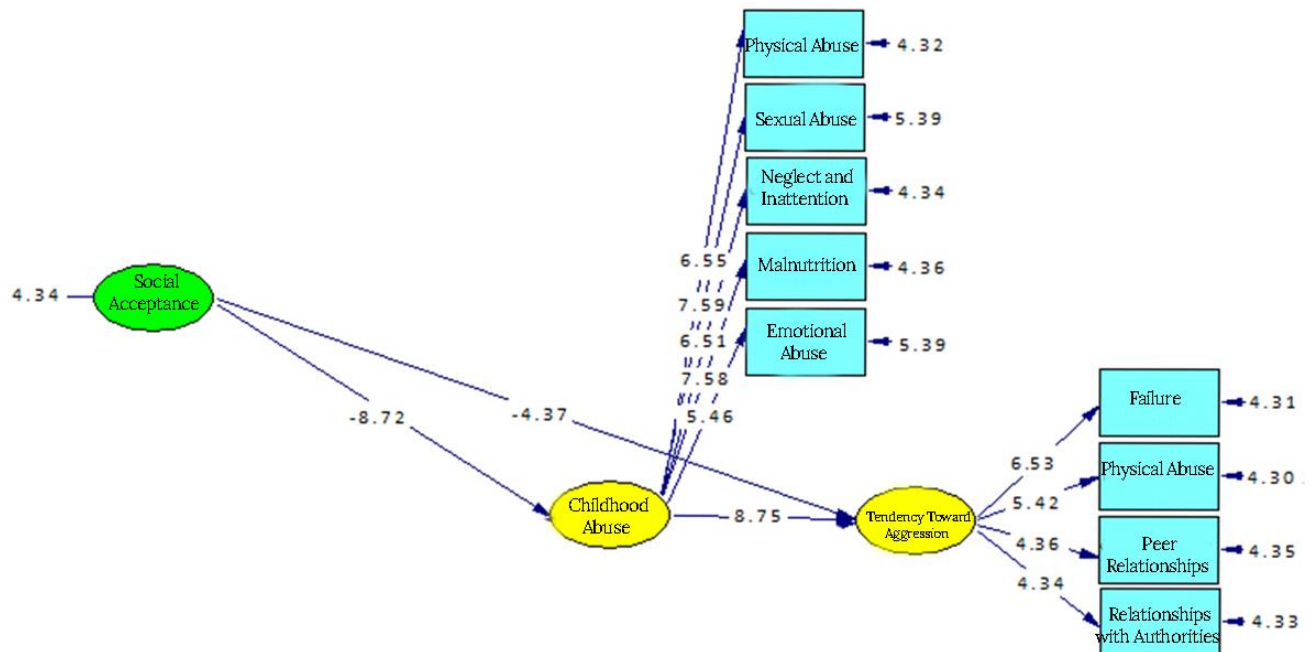
**Figure 1**

*Standardized Coefficients for the Revised Model*



**Figure 2**

*t-value for the Revised Model*



#### 4. Discussion and Conclusion

The results obtained from the research data indicate that social acceptance has a direct and statistically significant effect on the tendency toward aggression in children. This result shows that social acceptance can influence children's tendency toward aggression. In explaining this finding, it can be said that social acceptance leads to a sense of belonging to a social group and receiving support from society, parents, and friends. This helps individuals make more friends and empathize with others, which discourages them from engaging in aggressive and risky behaviors when facing challenges and tensions in life. The results also indicate that social acceptance has a direct and statistically significant effect on childhood abuse experience. In other words, individuals who experience higher social acceptance tend to recall and think about their childhood abuse less. Conversely, those with lower social acceptance may dwell more on their past abuse. Abused children often experience a wide range of emotions, including depression, anxiety, distrust of others, guilt, anger, fear, and shame. These children may blame themselves for the abuse because they do not fully understand why it happened. However, certain conditions can alleviate the negative impact of childhood abuse and help transform these memories into meaningful experiences. Antonopoulou (2019) stated that children who do not receive peer acceptance are more likely to experience psychological problems and delayed cognitive and social development, which can make their experience of childhood abuse more difficult (Antonopoulou et al., 2019). Furthermore, the findings show a relationship between childhood abuse experience and the tendency toward aggression in neglected and orphaned children. This result indicates that individuals who have experienced more childhood abuse are more likely to exhibit aggressive behaviors. Child abuse refers to intentional harmful actions by parents or other caregivers toward a child, with both short-term and long-term consequences. These consequences include physical disorders such as brain injuries, psychological disorders like anxiety and depression, and behavioral problems such as aggression, violence, and difficulties in social relationships. Bartholomew (2000) also noted that childhood abuse and its experiences can lead to aggression in children. Lucy (2011) further stated that child abuse causes severe trauma and damage, affecting mental health and leading to increased stress, anxiety, and aggression in children. From an

attachment theory perspective, adverse childhood experiences have many negative effects on an individual's cognitive, emotional, and behavioral systems. Traumatic childhood experiences shape a repertoire of aggressive behaviors (Atifi et al., 2019). According to behavioral theory, parental behaviors and environmental experiences influence personality development. Children who experience these adverse events in childhood may turn to aggression during adolescence and adulthood when facing frustration, as aggressive responses are the only behaviors in their repertoire. Psychoanalytic theory posits that traumatic experiences in childhood weaken the ego and lead to excessive reliance on defense mechanisms. Excessive identification with the abusive parent can impair mentalization and result in generalized aggressive responses in similar situations.

Recent studies on the relationship between childhood abuse and the tendency toward aggression (Crum & Moreland, 2017; Feiring et al., 2009; Lang et al., 1988; Mukul & Ajita, 2021; Pourmohseni & Niksarsh, 2022; Riggs & Kaminski, 2019), all of which have shown that childhood abuse increases aggression. Therefore, the findings of this study align with those of previous research.

The findings also suggest that social acceptance mediates the relationship between childhood abuse experience and the tendency toward aggression in neglected and orphaned children. This result indicates that when children are accepted by their peers, they interact and communicate more with others. Increased interaction and communication can help individuals, in times of life's challenges and crises, to consult and collaborate with others instead of resorting to violence and aggression. Furthermore, when children feel accepted by their peers, they experience a greater sense of security and have better relationships with others, which reduces the negative impact of childhood abuse and minimizes the adverse consequences. When neglected or orphaned children have fewer experiences of abuse in childhood or the present, they demonstrate better mental health, experiencing less stress, anxiety, and violence. Therefore, it can be concluded that improving social acceptance among the studied children may reduce their perception of childhood abuse and, consequently, lead to less aggressive behavior. Social acceptance can thus directly reduce aggression and indirectly influence it by mitigating the effects of childhood abuse.

One of the aspects positively correlated with social acceptance is nonverbal communication skills. In this therapeutic period, efforts are made to teach children proper

ways to communicate with others, understand emotions, and interpret facial expressions through activities such as puppet shows, pantomime, sensory games, and Gloucester Bear cards. These enjoyable activities allow children to learn these skills more easily, enabling them to understand others' physical cues and emotions. The ultimate outcome is improved social relationships and overall functioning.

## 5. Limitations & Suggestions

One of the limitations of this study is the cross-sectional design, which prevents establishing causal relationships between variables such as social acceptance, childhood abuse, and aggression. Additionally, the data were collected from a specific group of neglected and orphaned children, limiting the generalizability of the findings to broader populations. The reliance on self-report questionnaires could also introduce bias, as participants may have underreported or overreported their experiences due to social desirability or recall issues. Lastly, cultural and contextual factors were not deeply examined, which may have influenced the observed relationships.

Future research should employ longitudinal designs to explore the long-term effects of social acceptance and childhood abuse on aggression, allowing for better understanding of causal relationships. Expanding the study to different populations, including children from various cultural backgrounds and family environments, would help improve the generalizability of the findings. Additionally, incorporating qualitative methods, such as interviews or focus groups, could provide deeper insights into the lived experiences of children facing abuse and aggression. Future studies could also explore the moderating role of resilience and coping strategies in the relationship between childhood abuse and aggression.

The findings of this study suggest the importance of enhancing social acceptance in educational and care settings for neglected and orphaned children as a means of reducing aggressive behaviors. Intervention programs should focus on improving peer relationships and providing social support networks for these children, which could mitigate the long-term effects of childhood abuse. Mental health practitioners, educators, and caregivers should be trained to recognize the early signs of social rejection and aggression in children, enabling timely interventions that foster emotional regulation and healthy social interactions. Policy makers could also develop targeted support programs to ensure the

psychological well-being of children in vulnerable situations.

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## Declaration of Interest

The authors of this article declared no conflict of interest.

## Ethical Considerations

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

## Transparency of Data

In accordance with the principles of transparency and open research, we declare that all data and materials used in this study are available upon request.

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## Authors' Contributions

All authors equally contributed in this article.

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