Strategies of Boundary Setting in Women Healing from Familial Emotional Abuse

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Objective: This study aimed to explore the boundary-setting strategies employed by women healing from familial emotional abuse.

Methods and Materials: Using a qualitative research design, this study recruited 31 women from various regions of Turkey who self-identified as survivors of familial emotional abuse. Participants were selected through purposive sampling, and data were collected through in-depth, semi-structured interviews. Interviews focused on participants' experiences of emotional abuse and the specific strategies they employed to assert emotional and relational boundaries during their healing process. Data collection continued until theoretical saturation was reached. All interviews were transcribed verbatim and analyzed thematically using NVivo software, following an inductive coding approach. Ethical approval was obtained, and informed consent was provided by all participants.

Findings: Thematic analysis revealed three overarching categories of boundary-setting strategies: Reclaiming Autonomy, Restructuring Familial Relationships, and Emotional Self-Preservation. Each category included multiple subcategories such as asserting personal space, decision-making independence, limiting contact, managing conversations, detaching from guilt, and reframing abuse narratives. Participants described boundary setting as a deeply emotional, complex process involving both external actions and internal cognitive shifts. Strategies were often enacted amidst cultural norms discouraging familial confrontation and individual autonomy. Despite these challenges, participants reported a gradual strengthening of self-worth, emotional regulation, and relational clarity as a result of these practices.

Conclusion: The findings underscore the need for trauma-informed, culturally sensitive clinical practices that validate and support women's efforts to assert boundaries as a form of healing and empowerment.

Keywords: Emotional abuse, boundary setting, familial trauma, women's healing

1. Introduction

Emotional abuse within the family, often shrouded in invisibility and normalization, represents a pervasive and insidious form of trauma that continues to impact the lives of women across diverse cultures and geographies. Unlike physical violence, emotional abuse is characterized by subtle, chronic patterns of manipulation, invalidation, control, and degradation that target an individual's sense of identity and autonomy. It is frequently perpetuated through gaslighting, shaming, stonewalling, and conditional affection, all of which contribute to deep psychological scars and long-term relational dysfunctions (Srivastav, 2021). While public health discourse has made strides in addressing physical and sexual abuse, emotional abuse—particularly within familial contexts—remains under-acknowledged and insufficiently addressed in both policy and therapeutic practice (Maliakkal & George, 2023).

Women, in particular, are disproportionately vulnerable to emotional abuse within family systems due to intersecting gendered expectations, cultural conditioning, and structural inequities. Studies have shown that such abuse often begins in childhood and intensifies through intergenerational patterns of control, role rigidity, and emotional enmeshment (Kanamori et al., 2015; Karim et al., 2021). The family, while socially imagined as a source of support and care, can simultaneously function as a site of coercion and psychological harm when patriarchal values remain unchallenged (Desai, 2023). This is especially salient in socio-cultural contexts where obedience, self-sacrifice, and emotional labor are expected of women from an early age (Gaitri et al., 2015; Hazır, 2024).

Healing from familial emotional abuse is neither linear nor immediate. It requires a multifaceted process of identity reconstruction, boundary redefinition, and emotional self-regulation. For many women, establishing boundaries becomes both a psychological necessity and a political act of reclaiming personhood. However, boundary setting is complicated by familial expectations of loyalty and silence, especially when the abuse is covert or rationalized as cultural discipline or parental care (Al-Shdayfat, 2017; Tariq et al., 2023). In many cultural contexts, the very idea of setting boundaries against one's family may be construed as betrayal or emotional detachment, further amplifying the survivor's internalized guilt and fear of abandonment (Hazır, 2024).

The Turkish sociocultural context, like many others, is marked by strong familial ties, hierarchical structures, and collectivist values, which can hinder women's efforts to assert emotional boundaries. The boundaries between individual autonomy and familial duty are often blurred, leading many women to suppress their emotional needs to maintain harmony (Ellialti, 2015; Liu, 2021). Consequently, those who seek healing and emotional self-preservation must often do so within a climate of limited societal recognition and familial resistance. This dynamic forces women into a complex negotiation between preserving family bonds and protecting their psychological integrity (Gabriel et al., 2018; Gudeta & Engen, 2017).

One of the critical components in the healing trajectory is the capacity to articulate and implement boundaries that were historically denied or violated. Boundary setting involves redefining relational patterns, limiting or severing contact, and establishing new norms of interaction that prioritize emotional safety (Kocherhina, 2018). It also involves an internal transformation—learning to value one's emotional truth, resist manipulation, and tolerate the discomfort of conflict or estrangement. Research in this area has pointed to the role of self-reflection, social support, and therapeutic engagement as crucial in enabling survivors to claim space for themselves in emotionally restrictive environments (Alsaggaf, 2019; Gan et al., 2023).

The literature also emphasizes the cultural dimensions of boundary work, particularly how emotional expressions and refusal strategies are shaped by collective norms and gender scripts. In certain contexts, for example, a woman's attempt to refuse familial obligations or reject harmful emotional exchanges is met not only with personal backlash but with collective disapproval from extended kin or community members (Recalde-Esnoz et al., 2024; Вакуліч, 2017). These dynamics place survivors in emotionally taxing double binds, where asserting boundaries can mean social isolation while remaining compliant perpetuates emotional harm.

The digital age, paradoxically, has both complicated and enabled boundary-setting practices. On one hand, digital surveillance by family members, especially through social media, has extended emotional control into virtual spaces. On the other hand, digital platforms have created spaces for women to access psychoeducation, solidarity networks, and therapeutic tools (Alsaggaf, 2019; Ciolfi & Lockley, 2018). These mediated environments have thus become instrumental in helping women construct alternative narratives and experiment with emotional distance in ways that were previously unavailable. Such virtual forms of boundary management offer not only physical space but also

psychological breathing room, particularly for women who remain geographically close to their abusers or cannot afford complete estrangement.

Despite these advancements, boundary-setting remains a deeply stigmatized and emotionally fraught process for many women healing from familial abuse. The cultural valorization of forgiveness, especially in religious or traditional frameworks, can function as a silencing mechanism that discourages confrontation and encourages premature reconciliation (Shepard & Stretton, 2019). Moreover, the internalized shame and self-blame that often result from chronic emotional abuse undermine women's belief in their right to establish and maintain boundaries, particularly when their narratives are dismissed or invalidated by others (Picone et al., 2023; Srivastav, 2021).

This study, therefore, seeks to explore the nuanced strategies of boundary setting among women who have experienced familial emotional abuse and are actively engaged in their healing journeys.

2. Methods and Materials

2.1. Study design and Participant

This study employed a qualitative research design to explore the strategies of boundary setting among women healing from familial emotional abuse. A purposive sampling strategy was used to recruit participants who identified as having experienced emotional abuse within their families of origin and who were actively engaged in a healing process. The final sample consisted of 31 women residing in various regions of Turkey. Participants ranged in age from 23 to 49 years and represented diverse educational and socio-economic backgrounds. Recruitment was conducted through online support communities, mental health forums, and referrals from counseling centers. Inclusion criteria required participants to self-identify as women, be over the age of 18, and have past or ongoing experiences of familial emotional abuse. The sample size was determined based on the principle of theoretical saturation, which was reached when no new themes emerged from the data.

2.2. Measures

2.2.1. Semi-Structured Interview

Data collection was carried out through semi-structured, in-depth interviews. An interview guide was developed based on existing literature and expert consultation to explore participants' experiences of familial emotional abuse, their healing journeys, and the boundary-setting strategies they employed. Interviews were conducted in Turkish, either in person or via secure video conferencing platforms, depending on participant preference and location. Each interview lasted between 60 and 90 minutes and was audio-recorded with participants' informed consent. The interviews were transcribed verbatim, and identifying details were removed to ensure confidentiality.

2.3. Data Analysis

Data analysis followed a thematic approach using NVivo software to manage and code the qualitative data. Transcripts were read repeatedly to ensure familiarity, and initial codes were generated line-by-line. Codes were then grouped into broader themes that reflected common boundary-setting strategies across participants' narratives. The coding process was iterative and reflexive, allowing for continuous refinement of categories as new data were analyzed. Trustworthiness was enhanced through peer debriefing, member checking with a subset of participants, and maintaining an audit trail of analytic decisions. Ethical approval for the study was obtained from the relevant institutional review board, and all participants provided informed consent prior to data collection.

3. Findings and Results

The study sample consisted of 31 women from various regions of Turkey who identified as having experienced emotional abuse within their families of origin and were currently engaged in a healing process. Participants ranged in age from 23 to 49 years, with the majority between 30 and 39 years old (n = 14). Most participants held at least a university degree (n = 19), while others had completed high school (n = 9) or middle school education (n = 3). In terms of employment status, 17 participants were employed full-time, 6 were part-time workers, and 8 were currently unemployed or homemakers. Thirteen participants were single, 10 were married, and 8 were divorced. The majority reported that the emotional abuse was primarily enacted by one or both parents (n = 24), while others cited siblings (n = 5) or extended family members such as aunts or grandparents (n = 2) as the main sources. All participants had engaged in some form of therapeutic or support intervention, with 22 reporting ongoing individual therapy and 9 indicating previous or intermittent counseling.

Table 1

Categories, Subcategories, and Concepts Identified in the Analysis

Category	Subcategory	Concepts (Open Codes)
Reclaiming Autonomy	Asserting Personal Space	Saying "no" to unwanted contact, limiting physical presence, avoiding unannounced visits
	Decision-Making Independence	Making life decisions without family input, financial independence, setting own goals
	Prioritizing Self-Care	Establishing daily routines, setting time boundaries, reclaiming rest time
	Rebuilding Self-Trust	Journaling decisions, reflecting on past choices, self-validation practices
	Redefining Identity	Embracing new roles, rejecting family labels, creating new self-narratives
	Reclaiming Body Autonomy	Refusing touch, choosing personal appearance, body-based mindfulness
Restructuring Familial Relationships	Limiting Contact	Reducing communication frequency, setting phone/text rules, keeping visits brief
	Managing Conversations	Avoiding triggering topics, steering conversations, using pre-planned exits
	Enforcing Consequences	Following through on broken boundaries, distancing after violations, verbal warnings
	Selective Disclosure	Choosing what to share, withholding personal updates, information control
	Negotiating New Norms	Proposing family agreements, setting holidays terms, redefining expectations
Emotional Self-Preservation	Detaching from Guilt	Identifying internalized guilt, reframing responsibility, refusing blame
	Emotional Regulation Practices	Grounding techniques, deep breathing, emotion labeling
	Seeking External Validation	Therapy engagement, online support groups, reading survivor narratives
	Avoiding Emotional Triggers	Skipping family events, curating media exposure, avoiding certain locations
	Reframing Abuse Narratives	Naming the abuse, rejecting minimization, identifying manipulation patterns

The analysis of interviews with 31 Turkish women who experienced familial emotional abuse and engaged in boundary-setting during their healing journey revealed three main themes: Reclaiming Autonomy, Restructuring Familial Relationships, and Emotional Self-Preservation. Each theme encompassed several subcategories reflecting distinct strategies and internal processes. Below, the subcategories are reported in separate paragraphs along with representative participant quotations.

In the process of asserting personal space, participants described actively limiting physical proximity with abusive family members. This included avoiding unannounced visits and withdrawing from family gatherings. One participant stated, "I stopped visiting them unless I really had to. I told them to call before they came over—no more just showing up at my door." Others emphasized that establishing physical boundaries helped reduce emotional reactivity and reestablish a sense of control over their environments.

Decision-making independence was another subcategory that emerged strongly, with participants reporting a shift toward autonomy in making life decisions without consulting their families. Many connected this with financial independence and pursuing personal goals. As one woman explained, "I used to ask my mother what to do about everything. Now, I make my own decisions. It was scary at first, but now it feels like freedom." This shift marked a critical phase in breaking patterns of emotional dependence.

The emphasis on prioritizing self-care was articulated through creating daily routines, setting time limits with others, and reintroducing rest and solitude as valuable. Participants noted that these actions signified self-respect and boundary reinforcement. One woman shared, "I never used to take time for myself. Now, I block out evenings just for me—no family, no phone calls."

Rebuilding self-trust emerged as a healing response to years of gaslighting and invalidation. Women reported using practices like journaling, affirmations, and small decision-making exercises to reclaim their confidence in their own judgment. A participant noted, "I started writing down my decisions and the outcomes. It helped me see that I actually make good choices—I just needed to trust myself again."

Redefining identity was also significant, with many women describing the process of rejecting familial labels such as "the sensitive one" or "the problem child" and embracing new self-concepts. One participant reflected, "They always called me selfish when I asked for space. Now, I realize I'm not selfish—I'm just learning to protect myself." This shift often involved therapeutic work and social support.

The act of reclaiming body autonomy was a profound dimension of boundary-setting. Women reported refusing unwanted touch, choosing their own clothing, and engaging in body-based practices like yoga. A participant expressed, "I never realized how much control they had over my body.

Saying no to a hug I didn't want—it felt like I was taking my body back."

In the category of Restructuring Familial Relationships, limiting contact was a key strategy. Many women reduced communication frequency, avoided answering calls, or minimized in-person visits. As one woman described, "I still talk to them sometimes, but it's on my terms now—short and infrequent."

Managing conversations involved developing scripts, setting conversational boundaries, and walking away from triggering topics. Participants reported that preparing for difficult interactions in advance helped them maintain composure. One participant noted, "Before, I'd get sucked into arguments. Now, I steer the conversation or just say, 'I'm not comfortable talking about this.'"

Women also discussed enforcing consequences for boundary violations, such as reducing contact or verbally expressing disappointment. These actions were often difficult but empowering. One participant shared, "When they broke my boundaries, I didn't yell—I just stopped answering their messages. That silence said everything."

Through selective disclosure, participants gained agency over how much personal information they shared with family. This helped reduce vulnerability to further emotional harm. One woman said, "I stopped telling them about my job or who I'm dating. They don't need to know—it's my life."

Negotiating new norms reflected participants' efforts to reframe the terms of their family involvement. This included proposing new ways of spending holidays, refusing last-minute demands, or articulating new expectations. As one participant stated, "I told them I wouldn't come for dinner unless they respected my time. They didn't like it, but now they ask first."

The third main category, Emotional Self-Preservation, began with the theme of detaching from guilt. Many women reported identifying internalized guilt and reframing their sense of responsibility for family dynamics. One woman shared, "I used to feel like everything was my fault. Now I realize their behavior isn't mine to carry."

Participants also adopted various emotional regulation practices to manage distress triggered by family contact. Techniques such as grounding, deep breathing, and mindfulness were widely used. A participant noted, "When I feel anxious after a call with them, I take a walk or do breathing exercises. It helps me reset."

Seeking external validation was another prominent theme. Participants often turned to therapists, online communities, or survivor stories to counteract years of

invalidation. One woman explained, "Hearing other women say they went through the same thing—it made me feel seen for the first time."

Some participants described avoiding emotional triggers, including family events, certain TV shows, or specific locations. This form of avoidance was not denial, but rather a protective strategy. As one participant said, "I skipped the wedding. I knew being there would destroy the progress I made."

Lastly, reframing abuse narratives was essential for psychological closure. Women reported naming their experiences as abuse, rejecting minimization, and identifying manipulation tactics. One woman powerfully stated, "They used to say, 'We did it out of love.' Now I know control isn't love. It was emotional abuse, plain and simple."

4.   Discussion and Conclusion

The findings of this study illuminate the multifaceted strategies that women in Turkey employ to set boundaries as part of their healing process from familial emotional abuse. Thematic analysis revealed three overarching categories—Reclaiming Autonomy, Restructuring Familial Relationships, and Emotional Self-Preservation—each encompassing distinct yet interconnected subcategories. These strategies ranged from external behavioral shifts, such as limiting contact or managing conversations, to internal cognitive-emotional transformations, such as detaching from guilt and reframing abuse narratives. Collectively, these findings underscore the complex interplay between identity reconstruction, relational renegotiation, and emotional resilience in the aftermath of sustained emotional harm.

One of the most salient findings was participants' emphasis on asserting personal space and decision-making independence as initial forms of boundary-setting. These acts signaled a reclamation of autonomy after years of control and invalidation. Participants described disengaging from toxic interactions, reducing physical presence in abusive environments, and making life decisions without familial input. These behaviors reflect what Srivastav identifies as key components of overcoming emotional abuse—reclaiming one's voice and redefining relational roles (Srivastav, 2021). Similar findings were observed by Kanamori et al., who noted that survivors of familial abuse often adopt spatial and emotional distancing as preliminary survival tactics before deeper psychological healing can

occur (Kanamori et al., 2015). The emphasis on autonomy also aligns with Liu's study of women navigating work–family conflict in China, where boundary setting was often a tool for protecting self-worth in the face of oppressive familial obligations (Liu, 2021).

Closely linked to autonomy was the theme of rebuilding self-trust and redefining identity. Women spoke of the need to challenge long-standing internalized narratives—often inherited from abusive family members—that framed them as unworthy, oversensitive, or disobedient. These identity shifts were facilitated by therapeutic practices such as journaling, mindfulness, and the intentional re-narration of life events. This finding resonates with Kocherhina's exploration of emotional self-regulation among survivors of psychological abuse, where boundary-setting served not only as a behavioral strategy but also as a means of affirming one's emerging self-concept (Kocherhina, 2018). The notion of reclaiming identity is further supported by Alsaggaf, who examined how Saudi women resist imposed identities through digital self-presentation and selective disclosure, often in defiance of cultural expectations of conformity and emotional subservience (Alsaggaf, 2019).

In the category of Restructuring Familial Relationships, participants described limiting contact, managing conversations, and enforcing consequences as necessary, though emotionally difficult, strategies. These actions were not rooted in vindictiveness but rather in self-protection and emotional survival. In some cases, participants adopted low-contact or no-contact approaches with abusive relatives, particularly when previous boundary violations had been ignored. These findings echo the work of Maliakkal, who emphasizes the long-term impact of chronic emotional abuse in South Asian households and the necessity of drawing hard relational boundaries to disrupt cycles of harm (Maliakkal & George, 2023). Likewise, in Tariq et al.'s mixed-methods study on domestic violence in Pakistan, women who implemented relational consequences—such as withholding emotional or physical presence—reported greater long-term psychological stability and lower rates of revictimization (Tariq et al., 2023).

Participants also frequently employed selective disclosure and negotiation of new familial norms as strategies for boundary maintenance. These included redefining holiday expectations, refusing to share intimate details of their lives, and articulating clear behavioral terms for continued relationships. Such strategic selectivity aligns with Recalde-Esnoz et al.'s findings in a different cultural domain, where young women engaged in sexual refusal and selective self-disclosure in nightlife contexts as boundary-setting mechanisms against social coercion (Recalde-Esnoz et al., 2024). Although the context differs, the underlying principle—of reclaiming agency through control over personal information—remains consistent. This also reflects Gabriel et al.'s view that language and expression can serve as powerful tools for resisting imposed relational scripts and constructing new interactional norms (Gabriel et al., 2018).

The third major theme, Emotional Self-Preservation, brought forward deeply personal strategies such as detaching from guilt, reframing abuse narratives, and emotional regulation practices. Many participants described long-standing guilt that had been weaponized against them by family members to prevent boundary assertion. Learning to recognize and reject this guilt was cited as a major turning point. Hazır's class-cultural analysis of maternal guilt offers valuable insight here, arguing that guilt is often socially produced and unevenly distributed across gender lines, with women conditioned to interpret self-protection as selfishness (Hazır, 2024). Participants' process of guilt detachment and emotional reframing mirrors the findings of Gaitri et al., who demonstrated how rural Indian women, through exposure to supportive environments, gradually shifted from internalized blame to empowered self-understanding (Gaitri et al., 2015).

Participants also described employing coping tools such as grounding, therapy, and avoidance of emotional triggers. These practices were instrumental in protecting their psychological well-being and sustaining newly established boundaries. Gan et al. highlighted the necessity of integrating planetary and mental health strategies, particularly in gendered contexts where emotional burdens are deeply tied to social structures and environmental precarity (Gan et al., 2023). From a psychological perspective, such emotional regulation techniques were also consistent with the patterns identified by Gudeta and Engen among Ethiopian women entrepreneurs, who developed customized work-life boundaries as both professional strategies and healing mechanisms (Gudeta & Engen, 2017).

Perhaps most crucially, the act of reframing abuse narratives—naming the abuse, rejecting minimization, and recognizing manipulation—served as a pivotal moment of empowerment for participants. This shift in perception echoes the argument made by Desai, who asserts that feminist consciousness often begins with redefining personal suffering as part of a broader political and gendered reality (Desai, 2023). Similarly, Shepard and Stretton's historical work on women's justice strategies in pre-modern

Britain reveals how reclaiming narrative agency allowed women to reposition themselves not as passive victims but as active negotiators of dignity and justice (Shepard & Stretton, 2019).

Digital platforms also played a dual role in participants' boundary-setting journeys. On one hand, they reported experiencing digital surveillance from family members, which extended emotional control into online spaces. On the other hand, participants found therapeutic and liberatory value in online communities, self-help content, and social media advocacy. These findings support Ciolfi and Lockley's work, which highlighted how digital mediation can either perpetuate or disrupt work-life boundaries depending on contextual control and user agency (Ciolfi & Lockley, 2018). In the current study, digital platforms enabled some participants to test new emotional identities and access validation, especially when in-person support was lacking.

These results, while culturally situated in the Turkish context, resonate with broader global patterns in women's emotional labor and resistance. Across diverse contexts—be it among Syrian refugee women in Jordan (Al-Shdayfat, 2017), women in rural Bangladesh (Karim et al., 2021), or Ukrainian survivors of violence (Вакуліч, 2017)—similar themes of guilt, silence, resistance, and self-redefinition emerge. These cross-cultural parallels underscore that while the manifestations of familial emotional abuse are context-dependent, the psychological mechanisms for healing and resistance share universal elements.

5.   Limitations and Suggestions

This study, while offering in-depth insights into boundary-setting practices among women healing from familial emotional abuse, is not without limitations. First, the sample was limited to 31 participants from Turkey, which may restrict the generalizability of findings to other cultural or geographic contexts. The perspectives included in this study may also reflect a degree of selection bias, as participants who are already engaged in therapy or healing work may have greater awareness and articulation of boundary-setting strategies compared to those who are still enmeshed in abusive environments. Additionally, because the data were collected through self-report interviews, there is a possibility of recall bias or social desirability influencing responses. Finally, the study did not explore the long-term outcomes of the reported boundary strategies, which limits conclusions about their sustainability or impact over time.

Future research could expand the scope of inquiry by including comparative samples from different cultural contexts, particularly in regions where emotional abuse remains a taboo subject. Longitudinal studies would be valuable in tracking the evolution of boundary-setting strategies over time and their psychological effects. Further, research could focus on the intersectionality of emotional abuse and other identities, such as LGBTQ+ status, disability, or socioeconomic background, to better understand the unique challenges and strengths in boundary negotiation. Mixed-method approaches, combining qualitative narratives with quantitative measures of psychological health, could also enrich our understanding of how boundary setting affects trauma recovery, resilience, and relationship satisfaction.

Therapists, counselors, and social workers supporting survivors of familial emotional abuse should recognize boundary setting as a central component of the healing process—not merely as a behavioral tool, but as a profound act of self-definition. Practitioners should create culturally sensitive spaces where women can explore the emotional ambivalence tied to boundary-setting without shame. Community education initiatives can play a pivotal role in destigmatizing emotional boundaries and redefining them as necessary for mental health. Support groups—both in-person and online—should be encouraged to help survivors feel less isolated in their decisions to limit or restructure familial ties. Finally, public policy efforts should aim to include emotional abuse as a recognized category within legal and social service frameworks, ensuring protection and validation for survivors who choose to set boundaries as a form of self-preservation.

Authors' Contributions

Authors contributed equally to this article.

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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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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