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The Cost of Omitted Repair: A Theoretical Framework of Childhood Emotional Neglect

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Research Article

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Abstract

Childhood emotional neglect (CEN) is among the most frequently reported forms of childhood maltreatment and has profound physical, psychological, and socioemotional consequences throughout the lifespan. Nevertheless, disciplines have not reached a definitional consensus. Caregiver-child ruptures are common and widely experienced, and their repair is widely recognized as essential to attachment security and adult socioemotional functioning. However, the failure to engage in repair processes remains understudied as a distinct form of childhood emotional maltreatment. This article proposes a repair-oriented framework for CEN, drawing on attachment theory, the literature on relational rupture and repair, empirical research on identity development, and studies of emotion regulation. It offers a behaviorally specific framework that conceptualizes chronic omissions of modeled relational repair as one potential form of childhood emotional neglect. The Omission of Relational Repair (ORR) framework describes how this absence may impair adult repair capacity (ARC) and clarifies the distinctive support provided by early relational repair. It also examines limitations in current conceptualizations of CEN, potential neurobiological mechanisms, and directions for future research.

Introduction

Chronic emotionally neglectful caregiving can leave children feeling worthless, unloved, or unwanted (Brassard et al., 1993; Glaser, 2002) and can result in lasting physical, socioemotional, intrapersonal, and psychological harm (D'Arcy-Bewick et al., 2022; Norman et al., 2012; Strathearn et al., 2020; Xiao et al., 2023). Childhood emotional neglect (CEN) is among the most frequently reported forms of childhood maltreatment in retrospective self-reports (Massullo et al., 2023; Mersky et al., 2026; Shi, 2013); however, researchers, lawmakers, and clinicians have yet to reach a consensus on its definition (Hayashi, 2022; Naughton et al., 2013; Turhan & Eryılmaz, 2026).

Conflict

is common in interpersonal relationships, and caregivers and children experience it daily; one study reported up to 55 incidents per hour (Laible & Thompson, 2002). Ruptures constitute a distinct form of conflict and have been described as breaches, breakdowns, challenges, derailments, misattunements, miscoordinations, misunderstandings, or threats to relational stability. Although extensively studied in psychotherapy, ruptures have received less attention in parent-child research. Building on Muran et al.'s (2023) conceptualization of alliance ruptures, this article defines relational ruptures as misalignment in collaboration and/or distrust or disrespect that weakens the interpersonal bond. These ruptures range from minor misattunements to serious disconnection, invalidation, or relational injury.

Repairing ruptures is more specific than general conflict resolution. Matta (2026) characterizes conflict resolution as issue-centered—addressing problems, managing differences, and reaching agreements. In contrast, repair is relationship-centered, involving the restoration of trust, the reaffirmation of mutual recognition, and the strengthening of relational foundations. Infrequent initiation of repair has been empirically associated with an increased risk of child maltreatment in caregiver-child dyads (Skowron et

al., 2010). Although repairing caregiver-child ruptures is a critical developmental experience that communicates care and understanding to the offended child (Crosby & Stein, 2020), the modeling and practice of repair remain under-researched in the broader maltreatment literature, particularly in relation to CEN.

Researchers frequently examine caregiver-child ruptures and repairs through the lens of attachment theory. Moving beyond attachment theory's emphasis on caregiver availability and relational security (Ainsworth, 1989; Bowlby, 1969), this article examines what happens after disconnection: whether caregivers repair the relationship and what children learn from caregivers' responses. It argues that a chronic failure to repair may constitute emotional neglect by depriving children of essential socioemotional support, with potential developmental consequences. The article reviews gaps in conceptualizations of CEN, outlines the developmental functions of repair and the effects of its absence, synthesizes research on maltreatment, conflict, and child development, and considers related neurobiological processes. It concludes by proposing a repair-oriented framework for CEN.

Extant Conceptualizations of CEN

Understanding complex adverse childhood experiences (ACEs) requires consistent, identifiable markers—features largely absent from current conceptualizations of CEN. CEN is broadly defined as a caregiver's failure to meet a child's emotional needs (Webb, 2012), which support the development of self-esteem, secure relationships, emotional intelligence, and resilience (Louis et al., 2024). Definitions vary across laws and states and include inadequate affection, tolerance of maladaptive behavior, and inappropriate expectations (Rebbe, 2018). Practitioners and caregivers similarly describe CEN as a failure to provide emotional care, love, and affection (Manful & Abdullah, 2021). This lack of specificity also extends to measures of CEN, which include few items addressing lived experiences and often ask whether individuals felt loved, cared for, supported, or understood. The widely used Childhood Trauma Questionnaire (CTQ) includes five items concerning emotionally neglectful caregiving, such as "I felt loved," "someone helped me feel important," and "my family gave me strength and support" (Bernstein et al., 2003). Existing versions of the Adverse Childhood Experiences (ACE) tool include a similar item: "Did you often feel that no one in your family loved you or thought you were important or special?" (Finkelhor et al., 2015).

Consensus is further limited by the classification of CEN within broader categories of psychological or emotional maltreatment, which often subsume CEN and childhood emotional abuse (CEA) under a single definition (Hayashi, 2022; Laajasalo et al., 2023; Rebbe, 2018). However, studies have identified distinct functional and relational outcomes associated with CEA and CEN, including mental health (Taillieu et al., 2016), emotion regulation (Berzenski, 2019), resilience (Soffer et al., 2008), and neurological damage, such as cerebral infarctions (Wilson et al., 2012). Conflating these forms obscures their distinct omissive and commissive characteristics, thereby hindering research and accurate measurement (Bird, 2025; Xiao et al., 2023).

Omission refers to the absence or failure to provide something. Children may recognize abuse but, under current CEN models, may not recognize caregivers' failure to provide love, care, and affection. Caregivers may also be unaware that they are not meeting children's emotional needs because of factors such as their own childhood experiences, poverty, limited parenting education, or difficulty managing their well-being (Avdibegović & Brkić, 2020; Buisman, 2019; Fong, 2017; Ylitervo et al., 2023). Because expressions of 'love,' 'care,' and 'affection' vary across cultures (Cheung & Cheah, 2025; McNeely & Barber, 2010; Young et al., 2011), CEN requires a behaviorally specific, transdiagnostic, and cross-culturally relevant definition to improve the detection of emotionally neglectful caregiving and its lasting effects.

Relational Repair & the Developing Self-System

Early learning may begin with relational ruptures during infancy. Because experience-dependent development constrains self-regulation, distressed infants rely on caregivers to respond to misattunement. Attuned re-engagement repairs these ruptures and models affect regulation (Schore, 1996). In contrast, repeated failures to repair may foster a restricted, self-fulfilling relational style rooted in feeling 'without mastery' (Tronick & Gianino, 1986). Without repair, infants may not learn that negative emotions can return to homeostasis, potentially increasing shame and reducing their attempts to seek caregiver support for regulation.

As infants mature, rupture and repair evolve. Accountability, often expressed through apology, can improve outcomes for children who have been offended, including empathy and self-regulation (Adams-Clark et al., 2022; Lazare, 2005). Attuned apologies also strengthen children's understanding of themselves and others, emotional regulation, and ability to express empathy and apologize when appropriate (Ruckstaetter et al., 2017). These capacities can support more constructive conflict resolution and collaborative adult relationships, demonstrating that ruptures need not be destructive, accountability need not result in rejection, and reconnection can be safe. However, repair extends beyond apology or any single act; it is an ongoing process of restoring connection, responsiveness, and relational functioning (Drotbohm, 2026; Olekalns & Caza, 2024; Rusbult et al., 2007).

Reparative actions demonstrate understanding, validate the other person, and signal a commitment to restoring the relationship. These actions include acknowledging wrongdoing, accepting responsibility, validating the other person's experience, apologizing, demonstrating attunement, co-regulating, re-engaging, and taking steps to prevent future transgressions (Heath-Watt et al., 2026; Jordan, 2004; Kemp et al., 2016; Reinders Folmer et al., 2021). In later developmental stages and adulthood, pro-repair strategies—such as addressing the issue, asking about the other person's experience and response, and engaging in constructive reasoning to reach a compromise—are associated with greater satisfaction in peer and romantic relationships (Kurdek, 1994; Staats et al., 2018; Van Doorn et al., 2007).

Repeated exposure to these strategies provides children with implicit models for navigating and resolving relational distress (Deanow, 2011; Dooley & Fedele, 2002; Ferrar et al., 2020), thereby shaping lasting responses to relational ruptures both within themselves and in their relationships with others

(Adams-Clark et al., 2022; Staats et al., 2018; Ruckstaetter et al., 2017). For example, successful mother–child repair has also been associated with cortisol reactivity, vagal regulation, and behavioral recovery following ruptures (Moore et al., 2009; Müller et al., 2015; Provenzi et al., 2015). Because relational ruptures are inevitable, this article argues that failing to provide children with the support needed to repair them constitutes an understudied form of emotional neglect, leaving emotional needs unmet and potentially resulting in profound socioemotional effects.

Childhood Emotional Neglect as Omission of Relational Repair

Not all relational dysfunction constitutes maltreatment, nor are all ruptures or unsuccessful repair attempts indicative of neglect. Minor or moderate ruptures may remain unrepaired, whereas significant ruptures may be repaired. Even imperfect repair attempts may include effective elements, and sustained repair may be necessary to maintain long-term relational stability. Wolfe & McIsaac (2011) distinguish poor parenting from emotional maltreatment, which they define as chronic, severe, and escalating abusive or neglectful behavior that increases the likelihood of psychological harm or developmental disruption. Under the Omission of Relational Repair (ORR) framework, a caregiver's chronic failure to repair ruptures—by consistently acknowledging and co-regulating emotional experiences, integrating them into a revised understanding of the relationship, and informing future responses—constitutes a form of CEN, regardless of intent. ORR conceptualizes chronic exposure to omitted repair as emotionally neglectful because it may disrupt the maturation of the developing self-system.

This perspective is consistent with Tronick's (2018) finding that repeated successful or unsuccessful repairs shape infants' developing representations of themselves and their social world, including their expectations for navigating relational distress. Rather than developing a coherent, positive self-concept, individuals may struggle to integrate affective knowledge and expression, maintain a stable sense of self, and regulate emotions. These disruptions may contribute to maladaptive responses to relational ruptures (Ferrar et al., 2020; Weaver et al., 2015) and deprive children of the foundation necessary to develop adult repair capacity (ARC).

Repair Omission and Shame Development

Repair requires the acknowledgment of mistakes while maintaining a stable sense of self and connection. Repeated emotional invalidation, disengagement, or unresolved relational ruptures may disrupt a coherent sense of self and impair affect integration, self-concept, emotional awareness, and regulation (Kurdek, 1994; Laible et al., 2002; Olekalns et al., 2020; Tronick, 2018; Tronick & Cohn, 1989), thereby increasing vulnerability to relational difficulties (Branje, 2020; Gugliandolo et al., 2024; Ruckstaetter et al., 2017; Staats et al., 2018). This vulnerability may manifest as shame during conflict. As a personal and social emotion (Scheff, 2003), shame arises when individuals compare themselves with a standard and perceive that they have failed to meet it (Lewis, 2003). They focus on themselves ("I am a bad person") rather than on their behavior ("I did something bad") (Tangney et al., 1996; Tracy et al., 2007), thereby hindering conflict management, accountability, and repair (Adams-Clark et al., 2022;

Staats et al., 2018; Van Doorn et al., 2007). Understanding how the absence of repair deprives children of the scaffolding needed to develop a well-integrated self-system is therefore essential; this absence may increase shame-proneness and ultimately impair ARC. The following sections propose interacting developmental pathways that arise when caregivers fail to engage in repair and emotional needs remain unmet.

Identity Integration & Self-Esteem

An integrated identity is central to a well-developed self-structure. Erikson (1968) defines it as continuity of the self across time and circumstances, as well as consistency between one's self-perception and others' perceptions. In contrast, a diffuse self is characterized by profound incoherence and a limited ability to define oneself or commit to values, goals, or relationships (Marcia, 1980). Among adolescents, identity diffusion is associated with child maltreatment (Cruz et al., 2022; Penner et al., 2019) and caregiver-child conflict (Peterson, 1989), and may significantly affect self-esteem (Basak & Ghosh, 2008; Goth et al., 2012; Isenhardt et al., 2021; Melamed et al., 2024; Topino & Gori, 2026; Wu et al., 2023).

Parental support and positive parent–child relationships provide feedback that fosters adolescents' self-exploration and the development of a clear, consistent self-concept. Frequent, unresolved conflicts may deprive children of the support they need to develop a stable self-concept (Xiang et al., 2026). Without relational repair, children have fewer opportunities to view themselves as capable of mending relationships and deserving of repair, rather than as flawed for causing harm or drawing attention to it. Depending on their caregiving context, they may interpret relational distress as evidence of personal defectiveness or believe that connection requires them to suppress aspects of themselves. Chronic lack of repair can therefore undermine stable, positive self-esteem (Richards & Schreiber, 2024), leaving an offended child's core emotional needs unmet. Individuals with negative self-perceptions may feel undeserving of care and consideration—qualities central to attuned, empathic, collaborative repair (Hiraoka, 2026; Schore, 1996; Sedighimornani et al., 2021). Faccini et al. (2020) found that participants who reported childhood neglect or feeling like a burden to their caregivers had significantly lower self-esteem and greater self-hatred. They were also less likely to express their needs and more likely to accept mistreatment because they believed they deserved it.

Emotional Intelligence & Awareness

Caregivers may also foster emotional intelligence, defined as the ability to monitor one's own and others' emotions, distinguish among them, and use this information to guide thoughts and actions. Difficulties with emotional awareness and communication, such as those associated with alexithymia, may indicate impairments in related abilities (Salovey & Mayer, 1990). Alexithymia involves difficulty identifying, interpreting, and communicating emotions, as well as recognizing emotional elements in social interactions (Bagby et al., 1994a; Bagby et al., 1994b; Frawley & Smith, 2001). It is associated with lower emotional intelligence (Fukunishi et al., 2001; Parker et al., 2001) and generally refers to difficulty

identifying and describing feelings, sometimes accompanied by an externally oriented thinking style (Zimmermann et al., 2005).

Individuals with alexithymia experience lifelong interpersonal difficulties (Iannattone et al., 2021; Kapeleris & Paivio, 2011) and struggle to regulate their emotions (Koppelberg et al., 2023). Alexithymia may stem from CEN (Aust et al., 2013; Ditzer et al., 2023) or from insufficient relational repair. Validation is central to effective repair (Cirasola et al., 2024; Heath-Watt et al., 2026) and may shape emotional awareness, identification, and communication (Lambie & Lindberg, 2016). In the absence of validation during repair, children may have fewer opportunities for their emotions to be recognized, named, differentiated, and integrated within relationships. A chronic absence of repair may therefore limit these opportunities and foster alexithymic traits, which may contribute to profound shame (Pilkington et al., 2024; Pogue, 2018) or poorer emotional regulation (Preece et al., 2023; Swart et al., 2009).

Affect & Emotion Regulation

The third emotional need that may remain unmet when caregivers omit relational repair is affect and emotion regulation. Emotion regulation, a component of affect regulation (Gross, 2015), refers to how individuals influence which emotions they experience, when they experience them, and how they experience and express them (Gross, 1998). Early caregiver attunement, misattunement, and repair are theorized to shape neural systems involved in affect regulation (Şar, 2025; Tronick, 2018). Schore (1996) described how repair shifts an infant's affect from despair to joy, triggering dopamine and endogenous opiates that promote synaptic growth in right-brain prefrontal-limbic regions involved in self-regulation. However, during periods of heightened stress in infancy and early childhood, amygdala reactivity may exceed the developing prefrontal cortex's regulatory capacity, hindering independent self-regulation (Gee & Cohodes, 2021). Caregiver co-regulation therefore provides safety cues that infants can internalize, strengthening maturing self-regulatory neural systems (Azhari & Khoo, 2026).

Caregiver-child ruptures can influence emotional regulation beyond infancy, extending into childhood and adolescence (Kiel & Kalomiris, 2015; Zimmer-Gembeck et al., 2022). Caregiver emotional invalidation, which may contribute to relational ruptures or unsuccessful repair, predicts adolescent dysregulation (Briscoe et al., 2019). This association may be reciprocal: emotion regulation influences conflict processing (Kanske, 2012), potentially impeding repair and worsening regulation difficulties. Persistent challenges may also undermine adults' capacity to repair relationships during conflict (Haverkampf, 2023).

Discussion

Childhood emotional neglect (CEN) is often defined by what did not occur; however, there is no consensus regarding what this absence entails. This article introduces the behaviorally specific, repair-oriented Omission of Relational Repair (ORR) framework, which proposes that the repeated failure to repair relationships following interpersonal ruptures constitutes one form of CEN. Such omissions may

disrupt self-coherence, emotional awareness, and regulation through interacting pathways, thereby contributing to later socioemotional difficulties and challenges with adult relational repair (ARC). ARC may develop through modeled repair during childhood and adolescence. This proposition is partly supported by Azhari and Khoo's (2026) Relational Neuroscience of Resilience Framework, which holds that the outcomes of rupture-and-repair cycles shape the conditions for subsequent cycles, allowing resilience or vulnerability to accumulate over time. Increased shame vulnerability and maladaptive responses during ruptures may mediate the association between omitted repair and impaired ARC. Nevertheless, this proposed causal chain requires further empirical investigation.

Attachment theory emphasizes repairing caregiver-child relationships. It conceptualizes caregiver misattunements and separations as ruptures (Lewis, 2000; Tronick & Beeghley, 2011; Tronick & Gianino, 1986) that shape children's expectations of caregiver availability and safety and, consequently, their proximity-seeking behavior (Ainsworth, 1989; Bowlby, 1969). Whereas attachment frameworks focus on security, expectations, and proximity-seeking, the ORR framework emphasizes relational repair as a potential pathway through which caregiver responsiveness may influence adult socioemotional functioning. It also specifies how repair may interact with the developing self-system. These frameworks are complementary: ORR proposes a behavioral mechanism through which attachment expectations may be enacted during ruptures under overlapping conditions. ORR also does not fit neatly within general emotion regulation models, which cannot fully explain how people interpret ruptures, understand the consequences of disconnection, or decide whether and how to repair. Finally, ORR is not a novel form of maltreatment; rather, it is a developmental mechanism through which childhood emotional neglect may affect adult relationships.

This framework may help clinicians understand why clients continue to struggle with accountability, engaging in conflict, or repairing relationships despite having insight and motivation. It also characterizes withdrawal, appeasement, defensiveness, and self-condemnation as adaptive responses to shame following relational ruptures, rather than as isolated interpersonal deficits. Future research should examine childhood emotional neglect as a distinct developmental experience and investigate pathways linking caregiver omission, disruptions in the maturation of the developing self-system, shame, and adult relationships. Researchers could develop tools that assess both past relational omission and current capacity for repair, thereby advancing a cohesive approach to understanding and addressing the long-term relational effects of childhood emotional neglect.

Declarations

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