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Losing a Family Member in Earthquake: The Mediating Role of Fear of Intimacy Between Family Cohesion and Mental Well-Being

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Abstract

Earthquakes are unpredictable disasters that have catastrophic consequences and caused many people to lose their family members. In this study, the relationships between family cohesion, fear of intimacy and mental well-being were examined in individuals who lost a family member after the 6 February 2023 Kahramanmaraş earthquakes. The study included 385 participants (Mean = 20.56; SD = 2.43) and structural equation modelling used. According to findings, family cohesion positively affected mental well-being and fear of intimacy negatively affected mental well-being. In addition, fear of intimacy partially mediated the relationship between family cohesion and mental well-being. These results emphasize the importance of family dynamics in post-disaster mental health. Strengthening family cohesion after traumatic events may increase both relationship skills and mental well-being. Based on a family systems approach, this study suggests that post-disaster interventions should focus on strengthening family cohesion to improve both relational and mental health outcomes for individuals.

Keywords

family cohesion, fear of intimacy, mental wellbeing, earthquake

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Introduction

Natural disasters are unpredictable events that are felt over a wide area and negatively affect individual, family and social life (Sugg et al., 2023). Earthquakes are one of the most common and effective disasters. Approximately 500 000 measurable earthquakes occur worldwide every year (AFAD, 2018). In 2022, 91% of natural disasters in Türkiye were earthquakes (AFAD, 2022). In 2023, there were 65,370 earthquakes in Türkiye (AFAD, 2023b). On average, Türkiye experiences a major earthquake every five years, causing serious losses (AFAD, 2019). Between 1990 and 2018, 280,000 earthquakes with a magnitude greater than 2.0 occurred (AFAD, 2018). On February 6, 2023, Kahramanmaraş-centered earthquakes had an impact on an area of 108,812 km^2 in Türkiye (AFAD, 2023a). 31,643 people lost their lives in the first week and 45,089 as of March 1 (AFAD, 2023c).

Earthquakes can lead to various mental health problems (Leppold et al., 2018). Sleep problems (Chen et al., 2021), PTSD (Karasu et al., 2024), insomnia (Geng et al., 2019) and somatic complaints (Zhang et al., 2020) are common problems. Individuals who have lost their relatives are more affected (Qiu & Qiu, 2024). Earthquakes have a great impact on families (Sirotich & Camisasca, 2024). The rate of PTSD is higher in families whose houses are damaged and who use passive coping (Löw et al., 2023). Perception of injustice makes the mourning process difficult (Choi & Cho, 2020). Mental problems increase in individuals who have lost family members (Zhao et al., 2022). These issues may lead to psychopathologies and decreased psychosocial functioning (Dutta et al., 2022; Shon & Lee, 2024). The perception of an insecure family environment increases anxiety (Erickson et al., 2022). Earthquakes threaten family cohesion. As family cohesion decreases, the rate of depression increases (Bian et al., 2024). Internalization-externalization of problems (van Eickels et al., 2022), sleep problems and emotional numbness (Birgisdóttir et al., 2023) and life satisfaction (Grigoropoulos, 2022) are associated with family cohesion. Children's neural development depends on the emotional bonds of families (Deng et al., 2022). The interaction between family members makes their forms of emotional regulation similar (Zhou et al., 2023).

Fear of intimacy refers to the fear or anxiety that individuals experience when confronted with the possibility of emotional closeness or fragility in a relationship. It appears as discomfort about self-disclosure, emotional dependence, or forming deep emotional bonds (Giovazolias & Paschalidi, 2022). This fear may be based on early negative relational experiences such as rejection, neglect or trauma (Deniz et al., 2023). In post-disaster contexts, such as earthquakes, where emotional safety and relational trust are severely disrupted, fear of intimacy may be significantly heightened (Karantzas et al., 2022). Individuals who have lost close family members may find it difficult to reconnect with others due to unresolved grief and fear of further loss, making this construct particularly relevant in posttraumatic psychological assessments. Research indicates that childhood experiences of parental rejection can contribute to FOI development (Khaleque et al., 2018). It is linked to decreased social connectedness, which can be improved through targeted interventions focusing on intimacy-

related behaviors (Toh et al., 2022). While high responsiveness typically predicts closeness in relationships, individuals with high fear of intimacy may not sustain this effect over time (Manbeck et al., 2020). It is also negatively associated with vulnerable self-disclosure but positively associated with closeness (Khalifian & Barry, 2020). Several factors like including social phobia and self-esteem are correlate with fear of intimacy (Obeid et al., 2020). Higher scores are also associated with self-differentiation and adult attachment (Scigala et al., 2021). Family dynamics has a crucial role in fear of intimacy. Marital attitudes significantly predict fear of intimacy and are associated with family functioning (Agarwal & Sahai, 2024). The relationship with fear of intimacy in adulthood is influenced by emotional unresponsiveness, negative self-esteem and dependency (Senese et al., 2020).

Mental well-being is a concept whose importance has increased with positive psychology. It does not only consist of the absence of mental problems. It is a multifaceted concept such as healthy relationships, resilience and social interest (van Agteren et al., 2021). Demographic variables such as income level, and violence are important factors for mental well-being (Every-Palmer et al., 2020). Factors such as stress (Slimmen et al., 2022), depression and anxiety (Monroe & Harkness, 2022) reduce mental well-being. Especially sudden events such as earthquakes have a serious impact (Prayag et al., 2021). It can cause psychological strain and reduce well-being (Satıcı et al., 2024). Mental well-being also depends on family experiences (Hayes et al., 2023). The functionality of families is an important factor for mental well-being (2023). As the quality of parent-child relationship in the family increases, well-being increases (Wang et al., 2021). As family communication decreases, children's behavioral problems increase and their mental well-being decreases (Jetiyanuwat et al., 2024). Family resilience is also critical for the daily lives of family members (Wang et al., 2024).

The Present Study

Earthquakes can cause serious damage with their destructive potential. They can have various negative consequences in terms of material, spiritual and emotional aspects. One of these negative consequences is the loss of a family member in an earthquake. Individuals who lose a family member are under mental risk factor. At the same time, they may have difficulty in establishing close relationships with the people around them. However, the emotional unity of families can buffer this situation. This study examines the relationships between family cohesion, fear of privacy and mental well-being in individuals who lost a family member in the 6 February 2023 Kahramanmaraş earthquakes in Türkiye. Previous studies have examined the impact of disasters on mental health. In this study, the dynamics associated with well-being in individuals who lost a family member in the earthquake were examined. It focuses on the interaction between family cohesion, fear of intimacy and mental wellbeing in post-disaster and post-loss environments. With this research, it is important to determine the protective factors in case of loss in the family system. In this way, it is aimed to understand how

family cohesion is related to mental well-being directly and through the mediating role of fear of intimacy It is aimed to contribute to the field by focusing on the interaction between family cohesion, fear of intimacy and mental wellbeing in post-disaster and post-loss environments.

Method

Participants and Procedure

In this study, data were collected through Google Form from volunteer participants using the criterion sampling method. Inclusion criteria comprised individuals aged 18 years or older who had experienced the bereavement of at least one first-degree relative (parent, sibling, or child) as a direct consequence of the 6 February 2023 earthquake and who voluntarily consented to participate in the study. Exclusion criteria encompassed individuals without such bereavement experiences or those with a documented diagnosis of a severe psychiatric disorder within the preceding six months. An informed consent form was sent to each participant and their consent was obtained. Data were collected face-to-face with technological devices. A total of 385 participants, 123 males (31.9%) and 262 females (68.1%), were included in the study. The mean age of the participants was 20.56 years (SD = 2.43; age range = 18–37 years), 300 (77.9%) were single and 85 (22.1%) were married or in a romantic relationship. In terms of educational level, 87.3% (n = 336) of the participants were university students, 12.7% (n = 49) were graduate students. According to the situation alongside the family at the time of the earthquake, 328 (85.2%) were with their family and 57 (14.8%) weren't with their family. All the information about participants are given in Table 1.

Measures

Family Sense of Coherence Scale-Short. This 12 items short form developed by Sagy (1998). Turkish version of the scale was adapted by Çeçen (2007). This scale consists of 12 items in 7-point Likert type and has 3 sub-dimensions (Understandability, Manageability, Meaningfulness). The scale measures individuals' perception of their families emotional coherence. The internal consistency coefficient of the scale was calculated as 0.80. For the present study Cronbach's α value has been calculated as .80

Fear of Intimacy Scale. This scale developed by Descutner and Thelen (1991). Turkish version of the scale was adapted by Elibol & Tok (2018). The scale is a 5-point Likert-type scale consisting of 35 items and 3 sub-dimensions (Imaginary Intimacy, Imaginary Openness, Past Fear of Intimacy). A high score on the scale indicates that close relationships are avoided. The internal consistency coefficient of the scale was calculated as 0.81. For the present study Cronbach's α value has been calculated as .91.

Table 1. Demographic Information of Participants.

Variable	Frequency	%
Gender		
Female	262	68.1
Male	123	31.9
Relationship situation		
Single	300	77.9
In a relationship/married	85	22.1
Education level		
College student	336	87.3
Graduate student	49	12.7
Physical distance		
Alongside with family	328	85.2
Separate from family	57	14.8
Who did you lost?		
Father	297	77.1
Mother	134	34.8
Sibling	121	31.4
Have you ever been exposed to a disaster?		
Yes	125	32.5
No	260	67.5
Are you checking the news about earthquake?		
Yes	343	89.0
No	42	11.0
Frequency of using technology to communicate with family		
1-3 hours	114	29.6
4-6 hours	153	39.7
7 – more	81	4.7

Warwick Edinburgh Mental Well Being Scale. WEMBS originally was developed by Tennant et al. (2007). Keldal (2015) has adapted the scale into Turkish. The scale consists of 14 items and one dimension. It is in 5-point Likert type. Higher scores mean higher psychological well-being. The internal consistency coefficient of the scale was calculated as 0.89. For the present study Cronbach's α value has been calculated as .91.

Data Analysis

The mediation effect of fear of intimacy on the relationship between family cohesion and mental well-being was assessed using structural equation modeling. AMOS Graphics 24 and IBM SPSS version 27 were used for all data analyses. Descriptive

statistics (mean, standard deviation, skewness and kurtosis), reliability coefficients and Pearson correlations were calculated for each variable. Afterwards, the structural model was tested by creating a measurement model and the significance of both models was evaluated by examining the fit indices. In addition, the item parceling method, which is used to reduce measurement error in single-factor measurements, was integrated into the Structural Equation Model (SEM). Thus, unidimensional constructs such as mental well-being were divided into two parcels. Other variables were added to the observed variables through their sub-dimensions. To assess the significance of the mediating variable, 5000 bootstrap samples were used. Using this method, 95% confidence intervals (CI) for indirect effects were generated.

Results

Preliminary Analysis

Descriptive statistics, reliabilities and Pearson correlation coefficients for the study variables are shown in Table 2. According to the correlation analysis in Table 2, family cohesion has a positive relationship with mental well-being and a negative relationship with fear of intimacy. Fear of intimacy also has a negative relationship with mental well-being.

Measurement Model

The measurement model consists of three latent variables: family cohesion, fear of intimacy, mental wellbeing and 8 observed variables: three for family cohesion, three for fear of intimacy and two for mental wellbeing. According to the results, the measurement model has a goodness of fit indices, χ^2 (17, N = 385) = 2.802 $p < .001$; CFI = .974; NFI = .960; TLI = .957; GFI = .972 SRMR = .046; RMSEA = .069. Moreover, factor loadings ranged between −.28 and .40, and in the light of these values, it can be said that the observed variables can represent meaningful the latent variables.

Structural Model

In the structural model, the model in which fear of intimacy mediates the relationship between family cohesion and mental well-being was tested by keeping age as a control variable. According to the model, there is a partial mediation model. When the goodness of fit indices of the model in which fear of intimacy is a partial mediator is examined, it is seen that all values are at an acceptable level; χ^2 (24, N = 385) = 2.263, $p < .001$; CFI = .974; GFI = .972; IFI = .975; NFI = .955; TLI = .961; SRMR = .044; RMSEA = .057. The results are presented in Figure 1.

Table 2. Descriptive Statistics and Correlation Findings.

	Descriptive statistics					Correlations									
Variable	Mean	SD	Skewness	Kurtosis	α	1	2	3	4	5	6	7	8	9	10
1. Age	20.56	2.44	2.34	10.60	-	–									
2. Family cohesion	56.82	11.69	−.08	−.34	.81	−.03	–								
3. Understandability	20.03	4.96	−.30	−.48	.71	−.01	.88**	–							
4. Manageability	23.81	5.33	−.28	−.24	.62	−.03	.81**	.54**	–						
5. Meaningfulness	12.98	4.01	−.24	−46	.60	−.04	.76**	.60**	.36**	–					
6. Fear of intimacy	84.58	21.00	.13	−.64	.91	−.08	−.23**	−.22**	−.17**	−.17**	–				
7. Imaginary intimacy	35.03	9.78	.37	−.37	.82	−.12**	−.21**	−.19**	−.18**	−.15**	.87**	–			
8. Imaginary openness	35.49	11.89	.30	−.37	.90	−.01	−.16**	−.18**	−.12**	−.09	.87**	.57**	–		
9. Past fear of intimacy	14.06	4.69	.39	−.30	.70	−.09	−.18**	−.15**	−.10**	−.21**	.48**	.35**	.16**	–	
10. Mental wellbeing	50.09	11.34	−.26	−.53	.91	.06	.41**	−.36**	.32**	.31**	−.37**	−.30**	−.31**	−.24**	–

Note. *$p < .05$, **$p < .01$.

Bootstrapping

Bootstrapping technique was applied to the partial mediation model, which was hypothetically tested in the study and preferred as the best model in the SEM results. The results of bootstrapping to provide additional evidence for the significance of direct and indirect paths in the model are presented in Table 3.

Fear of Intimacy Scale Item Analysis

In order to provide a better understanding of the participants' fear of intimacy levels, the items with the highest and lowest mean scores as well as the items with the highest

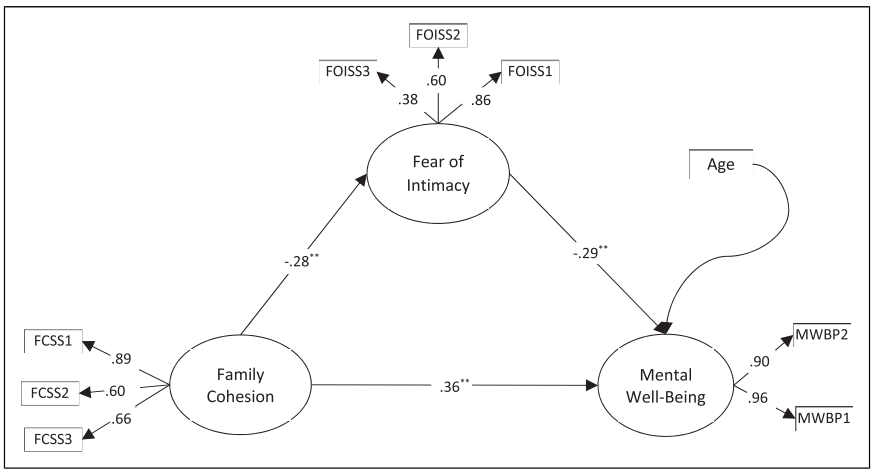


Figure 1. Structural equation modelling for the simple mediation model. Notes. *$p < .05$, **$p < .01$, FOISS: Fear of intimacy subscale, MWBP: Mental wellbeing parcel, FCSS: Family cohesion subscale, Age: Control variable.

Table 3. Indirect and Direct Effects for the Paths of the Final Model.

		95 % CI	
Model pathways	Estimated	Lower	Upper
Indirect link			
Family cohesion → fear of intimacy → mental wellbeing	.095	.039	.181
Direct link			
Family cohesion → fear of intimacy	−.277	−.402	−.139
Fear of intimacy → mental wellbeing	−.294	−.416	−.158
Family cohesion → mental wellbeing	.360	.232	.473

discrimination indices according to item response theory (IRT) are presented in Table 4. This analysis facilitates the identification of the main items that most effectively discriminate individuals according to their fear of intimacy levels, especially in the context of post-disaster relational functioning. As shown in Table 4, the items with the highest mean scores were item 16 (M = 3.41, SD = 1.38), item 34 (M = 3.10, SD = 1.44), item 31 (M = 3.04, SD = 1.34), and item 32 (M = 3.03, SD = 1.39), reflecting high discomfort with emotional closeness and vulnerability. In contrast, the lowest scores were found for item 13 (M = 1.96, SD = 1.18), item 30 (M = 1.91, SD = 1.08), item 4 (M = 1.71, SD = 1.10) and item 28 (M = 1.70, SD = 1.05), indicating relatively weaker endorsement of intimacy-avoidant behaviors. The striking response items, named as item 27, item 22, item 18 and item 29, were determined according to the high discrimination indexes obtained from item response theory analyses. These items showed the highest sensitivity in separating participants with high and low levels of fear of

Table 4. Items With the Highest, Lowest Scores and Striking Responses on the Fear of Intimacy Scale.

Item statement	Mean (M)	SD
Highest scores		
Item 16 - I would feel comfortable keeping very personal information to myself	3.41	1.38
Item 34 - there are people who think that I am not an easy person to get to know	3.10	1.44
Item 31 - I have shied away from opportunities to be close to someone	3.04	1.34
Item 32 - I have held back my feelings in previous relationships	3.03	1.39
Lowest scores		
Item 13 - I would feel uneasy with him/her depending on me for emotional support	1.96	1.18
Item 30 - I would feel relaxed being together and talking about our personal goals	1.91	1.08
Item 4 - if he/she were upset I would sometimes be afraid of showing that I care	1.71	1.10
Item 28 - I would sometimes feel uncomfortable listening to his/her personal problems	1.70	1.05
Striking responses		
Item 27 - I would feel comfortable about having open and honest communication with him/her	2.05	1.12
Item 22 - I would be comfortable with having a close emotional tie between us	2.14	1.18
Item 18 – I would feel comfortable telling him/her things that I do not tell other people	2.26	1.22
Item 29 - I would feel at ease to completely be myself around him/her	2.12	1.14

intimacy. The inclusion of these items provides deeper insight into the specific aspects of intimacy that are most affected following traumatic family loss.

Discussion

In this study, the mediating role of fear of intimacy in the relationship between family cohesion and mental well-being in people who lost a family member in an earthquake was examined. According to the findings, there is a positive relationship between family cohesion and mental well-being and a negative relationship with fear of intimacy. The structural model shows that fear of intimacy has a partial mediating role in the relationship between family cohesion and mental well-being. The partial mediation model finding shows that these variables affect mental well-being individually and together. The effect of a variable emerges alone and by triggering other functions in the family. This also affects individual well-being.

Earthquakes can cause serious damage to the lives of individuals. As a result, individuals may experience various problems at the individual level (Heanoy & Brown, 2024). Earthquakes also pose a serious threat to family lives. According to the family systems approach, families are considered as "dynamic systems" and the condition of each member affects the overall functioning of the system (Calatrava et al., 2022). According to this approach, functional families provide emotional support in times of crisis and provide for the emotional and psychological needs of family members (Minuchin et al., 2021). Also the emotional state of any one family member has the potential to affect the entire family system. According to the findings of this study, there is a significant relationship between family cohesion and mental well-being. In addition, family cohesion significantly predicts mental well-being. This finding is consistent with the literature emphasizing the importance of family ties in post-crisis recovery (Masten, 2021).

Families may emphasize emotional processes to recover from traumatic events such as the loss of a member. These emotional processes have an important role in increasing the resilience of families. According to Walsh (2020), emotional cohesion allows families to lead a more meaningful life and look at events from a more positive perspective. This kind of perspective supports the healing process after loss. Faced with the element of 'death', families may make various efforts to bring the deceased person back. They may feel the need to adjust the rules within the family, they may show more closeness to each other (Sallnow et al., 2022). This situation may change the interaction between family members and individuals may experience difficulties in their daily lives and family life. Particularly with the loss of a family member, individuals may show shock, denial and anger reactions in the Kübler-Ross grief model at an early stage. These reactions after the loss have the potential to affect the emotional processes within the family. Nevertheless, emotional integrity within the family has an important role in showing grief reactions in a healthy way and keeping the family system healthy. The emotional cohesion within the family contributes to individuals feeling emotionally supported, and these bonds can have positive effects on individuals' mental health,

especially in times of crisis. It can make family members feel safe and enable them to handle crisis situations well. According to Bogdan and et al.'s (2023) study, strong emotional bonds at such times increase individuals' mental well-being. Similarly, Birgisdóttir et al. (2023) stated that maintaining family cohesion after the loss of a family member helps families maintain emotional functioning and general well-being. From the perspective of family systems approach, emotional symptoms that emerge during the grief process can be transferred from one individual to another within the family. In particular, it has been stated that the transmission from parents to children is quite effective. Lenferink and O'Connor (2023) emphasised that the level of such symptoms within the family is related to the functionality of the overall family system. Furthermore, Sunarti et al.'s (2021) study showed that keeping the family system functional after traumatic events such as natural disasters like an earthquake or the loss of a family member is decisive in protecting the mental health of individuals. Therefore, the resilience and cohesion of the family system after trauma is of critical importance for the overall well-being of both individuals and the family.

Families can remain emotionally functional after a loss by maintaining their culture, pre- and post-earthquake production activities and routines (Ma et al., 2024). Especially in families with collectivist cultures like Türkiye, the impact of losses may be greater. In collectivist cultures, family relationships are stronger. In addition, the emotional closeness of family members is much higher. Therefore, when a family member is lost, each family member experiences a serious trauma. Family members who are used to living together in a close space may find it difficult to cope with such a sudden loss. Adjusting to the loss of a loved family member can be difficult and may make it difficult to perform the farewell ritual (Mateus et al., 2024) Families provide the necessary balance with their emotional cohesion to keep the memory of their lost relatives alive and get rid of guilt (Zavrou et al., 2023). Emotional cohesion of families may act as a buffer in reducing depressive thoughts and suicidal thoughts (Williamson et al., 2024), which increase in individuals after a disaster. As family cohesion increases, family members can follow a more balanced way of solving their problems (van Eickels et al., 2022) and decrease in family conflicts (Fosco & Lydon-Staley, 2020). In the post-earthquake period, many factors that threaten the family structure may emerge. Family cohesion can enable the family to handle the problems better and communicate better in this process, and thus help them to come out of this process in a healthier way (Birgisdóttir et al., 2019) . A structure to solve problems increases the functionality of the family. As families become functional, an emotionally safe environment can be created and well-being can increase (Elizarov et al., 2023). Within the framework of the McMaster Family Model (Miller et al., 2000), it can be concluded that 'emotional involvement', which is one of the elements of the model, is important for families to maintain their functionality after the earthquake. Emotional participation of family members to each other after destructive events such as earthquakes can ensure that roles remain clear, communication continues and problems are solved even after the loss.

According to the other findings of the study, fear of intimacy is negatively related to family cohesion and mental well-being. It also has a partial mediating role in the

relationship between family cohesion and mental well-being. Fear of intimacy can affect relationship processes with other people due to emotional distance or unresolved conflicts within the family. At this point, fear of intimacy is similar to emotional cutting behavior within the family. (Brown & Errington, 2024). This may lead to feelings of loneliness and negatively affect mental well-being (Saeed & Gargano, 2022). Fear of intimacy may lead to weakening of emotional bonds and solidarity among family members. This situation also reduces the functioning of the family, decreases the communication level of the family and causes mental health problems (Shon & Lee, 2024). Family cohesion may increase the self-confidence of individuals and encourage family members to establish close relationships (Zahra & Saleem, 2021). As families maintain their cohesion, other members' fear of separation from family members may decrease and pathological symptoms may decrease (Tang et al., 2020). Maintaining the family system together can be an important protective factor in the post-earthquake period. (Schäfer et al., 2024). Emotional support from the family system can be an important protective factor (Yakşi & Eroğlu, 2024). Because as families feel emotionally supported, their resilience may increase after the loss they experience and may make family members feel good (Hayes et al., 2023). At the same time, the safe environment created can improve interpersonal relationships (Cassidy & Ronis, 2023). As families increase their optimism, a protective factor for the family may emerge (Lee et al., 2024). Fear of intimacy can be caused by traumatic experiences as well as by interactions within the family. In disasters such as earthquakes, individuals may afraid of losing others. Therefore, they may avoid establishing close relationships. If individuals have lost a family member in this process, they may not be able to establish healthy relationships due to grief processes (Singer et al., 2022). Because of emotional emptiness, individuals may tend to distance themselves from other people. Namely, disasters such as earthquakes may cause attachment injury in individuals (Greenman and Johnson, 2022). For this reason, individuals may avoid relationships because they will not feel safe in relationships after the earthquake. Emotional avoidance may also make it difficult for individuals to respond to the emotional needs of other family members. In the same way, it makes it difficult to recognize their own emotional needs by the family system (Allan et al., 2021). Family cohesion can also provide an environment where grief and loss reactions can be expressed better by creating an emotionally safe environment for individuals. Even if there is a loss in the family system, emotional closeness from surviving family members can hold the overall family system together so that both the family and family members can move on with their lives. This may indicate itself as a grief reaction. This grief reaction may be generalized and may negatively affect general interpersonal interaction. As a result, well-being can be maintained after the earthquake.

Limitations and Implications

This study has several limitations. First, the cross-sectional model does not provide information on the causal relationships between these variables. It only provides

information about the relational process. In future research, experimental or longitudinal designs should be prioritized to examine these relationships in more depth. Additionally, the fact that the majority of participants were emerging adults and adults may weaken the generalizability of the results. Studies can be conducted with individuals in different age ranges. These differences should be considered as an important factor in adapting the findings to a wider population. Different demographic variables such as education level, income level and employment status can be considered. For people who have lost a family member after a traumatic experience such as an earthquake, interventions aimed at strengthening family ties can be critical for mental health. To strengthen family systems, family therapy can be used to support emotional bonds between family members. Family systems approach that specifically address fear of intimacy can enhance individuals' well-being. In post-earthquake families' crisis management skills can be developed to improve the cohesion of the system. For people who fear relationship building within the family, family therapy and individual counselling sessions targeting family cohesion can potentially improve mental health outcomes in disaster-affected families.

Conclusion

This study examines the role of family cohesion and fear of intimacy in shaping the mental well-being of individuals who lost a family member due to an earthquake. The findings show that family cohesion has a direct positive predictive power on mental well-being and an indirect predictive power through partial mediation of fear of intimacy. These results emphasize that family dynamics may not only provide emotional support but also act as a buffer against psychological distress in the post-disaster recovery and grief process. From a theoretical perspective, this study contributes to the family systems approach by demonstrating the link between individual circumstances and broader familial interactions. From a practical perspective, it emphasizes the importance of strengthening family ties in post-disaster settings to improve relational and psychological outcomes. Family therapy and counseling sessions targeting emotional bonds can play an important role in improving mental health and relational functioning in earthquake-affected populations. Despite these contributions, the cross-sectional nature of this study limits causal interpretations. Future research should utilize longitudinal and experimental designs to explore the temporal dynamics of these relationships. Furthermore, examining different age groups and cultural contexts would provide a more comprehensive understanding of how family systems respond to trauma. In conclusion, this study reinforces the notion that addressing mental well-being in post-disaster scenarios requires a holistic approach that considers both individual and relational factors. Strengthening family cohesion and addressing fear of intimacy through targeted interventions may facilitate resilience and recovery in disaster-affected communities.

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Ethical Statement

Ethical Approval

This research was ethically approved by Hasan Kalyoncu University Institute of Graduate Education Ethics Committee with document number E-97105791-050.01.01-39586.

Informed Consent

Informed consent was obtained from all the individual participants that were included in the study.

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Data Availability Statement

Data will be available on request.

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