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Effect of Childhood Trauma and Perceived Social Support on Life Effectiveness among Young Males

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Abstract: This research investigated how perceived social support and childhood trauma influence life effectiveness in young males aged 18 to 29. A cross-sectional correlational approach was employed, gathering data from 203 participants through the Childhood Trauma Questionnaire (CTQ), the Multidimensional Scale of Perceived Social Support (MSPSS), and the Life Effectiveness Questionnaire (LEQ). The results indicated a significant negative correlation between childhood trauma and life effectiveness ($r = -.774$, $p < .001$), as well as between trauma and perceived social support ($r = -.716$, $p < .001$). In contrast, social support showed a positive correlation with life effectiveness ($r = .710$, $p < .001$). Regression analysis demonstrated that both trauma and social support accounted for 64.9% of the variance in life effectiveness ($R^2 = .649$, $p < .001$), with trauma exerting a more substantial negative influence. In summary, the findings imply that social support plays a crucial role in fostering resilience and mitigating the detrimental effects of childhood trauma on functioning during young adulthood.

Keywords: *Childhood Trauma; Perceived Social Support; Life Effectiveness; Young Adults; Resilience; Mental Health.*

1.Introduction

Childhood trauma profoundly impacts psychological growth and overall wellbeing over the long term. The Adverse Childhood Experiences (ACEs) framework highlights the prevalence of abuse, neglect, and dysfunctional family environments, which are closely associated with issues such as depression, substance abuse, suicidal tendencies, and chronic health problems. There is a clear relationship between the number of adversities experienced and the likelihood of negative outcomes. This makes childhood trauma a significant global public health concern, as it is linked to mental health disorders, substance use, aggression, and long-term psychological vulnerabilities resulting from disruptions in brain development and stress regulation, often referred to as "toxic stress."

Although trauma affects individuals across genders, young males are often underrepresented in research. They are more likely to experience physical abuse and community violence, while societal expectations around masculinity discourage emotional expression. This can result in suppressed distress and outward behavioural problems. Early experiences of abuse or neglect may also lead to insecure attachment styles, which further contribute to difficulties in emotional regulation and interpersonal relationships.

In the Indian context, factors such as collectivistic values, rigid family structures, acceptance of corporal punishment, and economic challenges may increase vulnerability among boys. At the same time, stigma surrounding mental health reduces the likelihood of seeking help. During young adulthood—a critical stage for identity formation and transition into adult roles—childhood trauma can negatively influence self-concept, impulse control, and goal achievement, often leading to hidden distress.

Life effectiveness represents an individual's ability to function adaptively across different domains such as emotional control, time management, initiative, social competence, and achievement motivation. These dimensions are interconnected and essential for successful adjustment in adulthood. Childhood trauma can disrupt these abilities through impaired self-regulation, insecure attachments, and cognitive difficulties, resulting in challenges in managing emotions, maintaining relationships, and achieving goals.

However, trauma does not always lead to negative outcomes. Perceived social support, defined as the belief that support is available from family, friends, and significant others, acts as an important protective factor. It helps reduce stress, enhance coping, and promote resilience. Supportive relationships during young adulthood play a key role in fostering identity development and adaptive functioning, although past trauma may influence how individuals perceive and utilize this support.

Thus, childhood trauma can be understood as a cumulative risk factor, while life effectiveness reflects adaptive functioning, and perceived social support serves as a moderating protective factor. This study aims to examine how childhood trauma and perceived social support together influence life effectiveness among young males, particularly within the Indian context where research in this area remains limited.

2. Review of Literature

McLaughlin, Weissman, and Bitrán (2019) They investigated the impact of childhood trauma on emotional regulation through neurodevelopmental changes. Their study found that early adversity disrupts frontal-limbic brain circuitry, particularly between the prefrontal cortex and amygdala, leading to reduced cognitive control and increased emotional reactivity. This increases the risk of negative psychological outcomes across development.

Gruhn and Compas (2020) They conducted a meta-analysis on childhood maltreatment and emotion regulation. The findings showed that maltreatment is associated with poorer emotion regulation, reduced adaptive coping, and increased reliance on maladaptive strategies such as avoidance and suppression. This indicates that early trauma interferes with essential psychological adjustment processes.

Fritz et al. (2018) This systematic review identified resilience factors in youth exposed to childhood adversity. The study found that strong social support, positive family relationships, high self-esteem, and effective coping skills help protect against mental health problems. It highlights that both environmental and personal factors contribute to resilience after trauma.

Lee et al. (2023) This study examined the relationship between childhood adversity, adult mental health, and perceived social support. The results showed that early trauma increases stress and depression in adulthood; however, high levels of perceived social support significantly reduce these negative effects, emphasizing its protective role.

Copeland et al. (2018) Using a prospective cohort design, this study explored long-term outcomes of childhood trauma. It found that higher exposure to trauma is linked with increased mental health issues, social problems, unemployment, and difficulties in adult transitions, highlighting the lasting impact of early adversity on overall functioning.

Ion et al. (2023) utilized experience-sampling methods to analyse how childhood maltreatment influences everyday emotion regulation practices. The study found that individuals with histories of abuse or neglect reported lower levels of positive affect alongside higher instances of negative emotions while employing fewer adaptive strategies like cognitive

reappraisal. These insights suggest a persistent struggle with daily emotional management linked to early trauma experiences.

3. Methodology

3.1 *Aim*

To explore how perceived social support and childhood trauma influence life effectiveness in young males.

3.2 *Objectives*

- Assess social support, life effectiveness, and childhood trauma in males (18– 29).
- Examine the relationship between childhood trauma and life effectiveness.
- Analyze the link between social support and life effectiveness.
- Determine if trauma and social support predict life effectiveness.

3.3 *Hypotheses*

H1: Childhood trauma is negatively related to life effectiveness.

H2: Social support is positively related to life effectiveness.

H3: Trauma and social support significantly predict life effectiveness.

3.4 *Variables*

Independent: Childhood Trauma, Perceived Social Support

Dependent: Life Effectiveness

3.5 *Research Design*

A cross-sectional design was used to study relationships at one point in time, highlighting how past trauma and current support relate to life effectiveness without interference.

3.6 *Sample*

Sampling: Convenience sampling

Inclusion: Males (18–29), English proficiency, consent given

Exclusion: Outside age range, severe psychiatric issues, incomplete responses

3.7 *Tools Used*

Demographic Sheet: Basic personal and background details

CTQ: Measures childhood trauma (28 items)

MSPSS: Assesses perceived social support (12 items)

LEQ: Measures life effectiveness skills

3.8 *Procedure*

Ethical approval was obtained. Participants were informed, gave consent, and completed questionnaires (CTQ, MSPSS, LEQ). Confidentiality was ensured, and incomplete responses were excluded.

3.9 *Data Analysis*

Descriptive Statistics: Mean, frequency

Correlation: Pearson correlation for relationships

Regression: To predict life effectiveness ($p < .05$ significance)

4. Statistical Analysis

4.1 *Result*

Descriptive Statistics

Descriptive statistics were utilized to summarize the distribution of scores across key research variables: life effectiveness (LEQ Sum Average), perceived social support (MSPSS Mean), and childhood trauma (Total of Subscales).

Table 1. *Descriptive Statistics of Study Variables (N = 203)*

Variable	Minimum	Maximum	Mean	SD
Childhood Trauma (Total of Subscales)	26	125	69.77	17.78
Perceived Social Support (MSPSS Mean)	2.00	4.00	2.96	1.00
Life Effectiveness (LEQ Sum Avg)	1.00	8.00	3.68	1.86

The data indicated that participants experienced some challenging moments during their upbringing, characterized by consistent pressure rather than extreme distress, yielding an average score of 69.77 with notable individual variation. Regarding perceived social support, respondents rated their feelings at an average of 2.96—neither particularly high nor low—with a nearly full-point spread in responses. When asked about overall life satisfaction, participants reported an average score of 3.68, indicative of functioning but not without its difficulties.

Distribution Characteristics

The skewness and kurtosis values suggested that the variables were approximately normally distributed:

- Childhood Trauma: Skewness = −0.847, Kurtosis = −0.070
- Social Support: Skewness = 0.075, Kurtosis = −2.010
- Life Effectiveness: Skewness = 0.906, Kurtosis = −0.530

These results fall within acceptable parameters for conducting parametric analyses.

4.3 *Correlation Analysis*

Pearson product-moment correlation analysis was employed to explore relationships between perceived social support, life effectiveness, and childhood trauma.

Table 2. Correlation Matrix of Study Variables (N = 203)

Variables	1	2	3
Childhood Trauma		—	
Social Support	−0.716***	—	—
Life Effectiveness	-0 .774***	0 .710***	—

Note - ***p < .001***

The correlation results show a clear inverse relationship between childhood trauma and life effectiveness; as childhood trauma increases, life effectiveness tends to decrease significantly (r = -0 .774, p < .001). While not every instance conforms strictly to this trend, it holds true for the majority studied—indicating that greater early-life distress often complicates daily living challenges.

Additionally, there is a strong association observed where adverse early experiences correlate with diminished feelings of social support (r = -0 .716, p < .001). Many individuals who faced hardship in their formative years reported fewer available friendships later; although not all connections severed entirely over time, trust appeared to erode as years progressed.

Conversely, higher levels of perceived social support are positively correlated with increased life effectiveness (r = 0 .710, p < .001). This suggests that having robust relationships can enhance one's ability to navigate life's demands more effectively despite encountering tough times.

4.4 *Multiple Regression Analysis*

A multiple regression analysis was conducted to assess how perceived social support and childhood trauma predict life effectiveness.

4.4.1 Model Summary

Table 3. *Regression Model Summary*

R	R2	Adjusted R2	Std. Error
0.806	0.649	0.646	1.106

Results indicate that the model explains approximately 64.9 percent of variations in participants' ratings concerning life effectiveness; even after accounting for various predictors, the adjusted figure remains strong at 0 .646.

4.4.2 ANOVA (Model Significance)

Table 4. *ANOVA for Regression Model*

Source	SS	def.	MS	F	p
Regression	452.417	2	226.209	184.944	<.001
Residual	244.624	200	1.223		
Total	697.041	202	—		

According to ANOVA results (F (2 ,200) =184 .944, p<. 001), the regression model significantly predicts life effectiveness based on both perceived social support and childhood trauma.

4.4.3 Regression Coefficients

Table 5. *Regression Coefficients Predicting Life Effectiveness*

Predictor	B	SE	β	t	p
Constant	5.910	0.716	—	8.250	<0.001
Childhood Trauma	−0.057	0.006	−0.546	−9.107	<0.001
Social Support	0.592	0.112	0.318	5.308	<0.001

Findings reveal:

- Childhood trauma has a significant negative impact on predicting life effectiveness (β=−.546, p<. 001).
- Conversely, perceived social support positively influences predictions regarding life effectiveness (β=.318, p<. 001).

Thus, indicating enhanced life effectiveness is linked with stronger social support while higher exposure to trauma corresponds with decreased efficacy in navigating life's challenges.

4.5 *Multicollinearity Diagnostics*

Multicollinearity statistics showed acceptable levels:

- Tolerance = 0 .487
- VIF = 2 .051

These figures suggest minimal multicollinearity among predictors as they remain below recommended thresholds (Tolerance>. 10, VIF<10). Further diagnostics revealed a maximum condition index of 19.377, which is below the critical limit set at 30.

4.6 *Residual Analysis and Assumption Testing*

Graphical methods alongside residual statistics were applied for regression assumption evaluation.

4.6.1 Normality of Residuals

The histogram depicting standardized residuals aligns closely with a normal distribution featuring:

- Mean ≈ 0
- SD ≈ 1

Normal distribution was confirmed through the Normal P–P Plot where points fit closely along the diagonal line.

4.6.2 Homoscedasticity

Homoscedasticity was evidenced by scatterplots illustrating standardized predicted values against standardized residuals demonstrating random distribution devoid of identifiable trends.

4.6.3 Residual Statistics

With an average near zero and residual ranges between −3 .91 to +5.26, no significant outliers adversely affected model integrity.

4.7 *Summary of Findings*

The statistical analyses yielded several key observations:

1. Participants reported moderate levels across measures related to life effectiveness, social support and childhood trauma.
2. Life effectiveness alongside perceived social support exhibited significant negative correlations relative to childhood trauma.
3. A substantial positive correlation exists between both life effectiveness and perceived social support.
4. Both factors—social support & childhood traumas—significantly predict variations in individuals' perceptions concerning their own effective functioning throughout daily tasks.
5. The regression model accounted for around 65 percent variance in assessed measures relating back into constructs surrounding subjective evaluations regarding one's quality living conditions.
6. All statistical assumptions necessary for performing regression analyses were well met.

Overall conclusions highlight critical roles played by perceptions surrounding supportive networks while addressing past traumatic events influencing developmental trajectories impacting young men's effective living skills development pathways over time.

5. Discussion

The effectiveness of life in young males is shaped by both past experiences and current support systems. Early hardships leave lasting effects, while supportive relationships help reduce their impact. The study found significant links between childhood trauma, perceived social support, and life effectiveness. Some individuals adapt better due to strong support, while others struggle due to unresolved trauma.

5.1 *Overview of Findings*

Three key findings emerged:

1. Greater childhood trauma is linked to lower life effectiveness.
2. Higher perceived social support improves life effectiveness.
3. Trauma and support together explain about 65% of variation in outcomes.

Life effectiveness depends on a balance between past difficulties and present support.

5.2 *Childhood Trauma and Life Effectiveness*

Early trauma makes managing stress, emotions, and responsibilities more difficult in adulthood. It affects emotional stability, relationships, and coping abilities.

Developmental Effects

- Poor attachment formation
- Weak emotional regulation
- Impaired executive functioning

Cognitive-Behavioural View

Negative beliefs like “I am incapable” or “others cannot be trusted” lead to avoidance and poor coping.

Neurobiological Impact

Chronic stress alters brain areas responsible for emotion regulation, memory, and decision-making, making adult functioning harder.

5.3 *Childhood Trauma and Social Support*

Higher trauma is linked to lower perceived support. Individuals may struggle with trust, intimacy, and emotional expression due to early attachment disruptions.

This leads to:

- Fear of rejection
- Difficulty forming relationships
- Reduced communication and trust

Isolation further worsens functioning and emotional distress.

5.4 ***Social Support and Life Effectiveness***

Perceived support improves coping, confidence, and goal achievement.

Support helps by:

- Reducing stress
- Increasing confidence
- Providing emotional reassurance

For young men, support is especially important due to social restrictions on emotional expression.

5.5 ***Predictive Role***

Childhood trauma and social support together explain around 65% of life effectiveness. Traa increases risk, while support acts as a protective factor.

5.6 ***Psychological Implications***

- Trauma has long-term effects
- Social support strengthens resilience
- Both personal and relational factors must be addressed

5.7 ***Clinical Implications***

Therapy should be trauma-informed and include:

- Trauma assessment
- Social support evaluation
- Approaches like CBT, EMDR, group and interpersonal therapy

5.8 ***Policy & Educational Implications***

Focus on prevention through

- Mentorship programs
- Peer support
- Mental health awareness
- Accessible counselling

Early intervention reduces long-term psychological and financial costs.

5.9 *Literature Integration*

Findings align with previous research showing trauma harms development, while support improves outcomes. Young males need more focused attention in research.

5.10 *Conclusion*

Childhood trauma negatively impacts life effectiveness, but strong social support can improve resilience. Success depends on the interaction between past experiences and present relationships.

6. Conclusion

This research shows that childhood trauma and perceived social support together influence life effectiveness in young men. Trauma negatively affects emotional regulation, relationships, decision-making, and daily functioning, often lasting into adulthood. In contrast, strong social support improves coping, confidence, and stress management. Overall, while trauma increases vulnerability, supportive relationships promote resilience. Trauma-informed interventions that strengthen social connections are essential for better adult outcomes.

6.1 *Limitations*

The cross-sectional design limits causal conclusions. Self-report measures may involve bias and inaccuracies. The sample included only young males, reducing generalizability. Recall bias and data from a single geographic area further limit applicability. More longitudinal and diverse research is needed.

6.2 *Future Implications*

Future research should use longitudinal designs and include variables like resilience, coping, and emotional intelligence. Diverse samples and qualitative methods can improve understanding. Interventions should strengthen social support, and policies should focus on early intervention and mental health access. Overall, addressing trauma alongside building support systems is key to improving long-term well-being.

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