Vol. 2, Issue 5 May 2024 ISSN: 2584-0142

ISSN: 2584-0142

PSYCHOPEDIA JOURNALS

International Journal of Interdisciplinary Approaches in Psychology (IJIAP)

Unveiling the pernicious consequences of trauma in childhood: A study on the relationships between adverse childhood experiences and children's wellbeing and attachment styles in young adults

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ABSTRACT

This study delves into the intricate connections among childhood trauma, psychological well-being, and adult attachment styles in young adults, aiming to illuminate their interrelatedness and implications for mental health. By examining a group of young adults, data was gathered through self-report measures assessing childhood trauma, psychological well-being, and adult attachment styles. The results uncover a significant negative association between psychological well-being and adult attachment styles ($r = -.217$, $p < .05$), indicating that individuals with more insecure attachment styles tend to report lower levels of psychological well-being. Moreover,

Vol. 2, Issue 5 May 2024 ISSN: 2584-0142

although childhood trauma did not directly correlate significantly with adult attachment styles ($r = -.069$, $p > .05$), it displayed a weak negative correlation with psychological well-being ($r = -.092$, $p > .05$). These findings emphasize the necessity of taking attachment types into account when assessing the influence of childhood trauma on adolescents and young adults' psychological well-being. They also emphasize the significance of tailored treatment approaches that address both attachment issues and trauma experiences to enhance psychological well-being. This study adds to the growing body of research on the complicated relationship between experiences in childhood, attachment styles, and psychological outcomes, establishing the framework for additional research into effective intervention and preventive measures.

Keywords: *Insecure Attachment, adverse childhood experience, well-being*

INTRODUCTION

Childhood trauma, psychological well-being, and attachment patterns are all interrelated concepts that have consequences for a person's development and relationships. Understanding these behaviours can provide knowledge of the intricate relationship between childhood events, mental health, and interactions with others.

Childhood Trauma

Childhood trauma comprises an array of adverse events that take place throughout a person's growing up years. These circumstances encompass emotional, physical, or sexual harassment, neglect, encounters with violence, and various kinds of maltreatment. These kinds of events may undermine a child's emotions regarding safety, security, and reliance on others, causing long-term psychological repercussions. Childhood trauma has been related to a variety

Vol. 2, Issue 5 May 2024 ISSN: 2584-0142

of mental health disorders, including depression, anxiety, post-traumatic stress disorder (PTSD), substance abuse, and even physical health problems in later years.

Psychological well-being

Psychological well-being refers to an individual's overall mental and emotional well-being. It includes several aspects of well-functioning, including enjoyment, life satisfaction, positive relationships, perseverance in the face of adversity, and a sense of purpose and fulfilment. Psychological well-being includes not only the absence of mental illness but also the presence of positive psychological attributes and coping skills.

Attachment styles

Attachment styles are established patterns of engaging with people that emerge from early childhood and continue to influence interpersonal ties throughout a person's life. The quality of interactions with primary caregivers in infancy and childhood shapes these attachment patterns, which are secure, anxious-preoccupied, dismissive-avoidant, and fearful-avoidant. Trust, emotional connection, and a strong sense of self-worth are characteristics of secure attachment. Anxious-preoccupied attachment is defined by a dread of abandonment and a constant desire for reassurance. The dismissive-avoidant attachment avoids intimacy and emotional closeness, whereas the fearful-avoidant attachment combines anxiety with avoidance in relationships.

Early Experiences and Trauma

Early experiences have a significant impact on cognitive development, notably in language acquisition, problem-solving ability, and social cognition. The quality of linguistic exposure, mental stimulation, and preliminary possibilities in early childhood all have a major

Vol. 2, Issue 5 May 2024 ISSN: 2584-0142

impact on cognitive capacities and academic achievement later in life. Furthermore, early-life stress or adversity can impede cognitive development and result in impairments with attention, memory, and executive control, which can remain well into adulthood and influence different aspects of everyday functioning.

Early experiences influence an individual's relational patterns and interactions with others far into adulthood, as well as cognitive development. The quality of early care relationships establishes the groundwork for later interactions with classmates, intimate relationships, and other social ties. Children experiencing regular and supportive relationships tend to develop stable attachment types and favourable relational patterns such as trust, empathy, and productive interactions. Children who get inconsistent, negligent, or abusive care, on the other hand, might encounter problems with intimacy, confidence, and emotional control in their relationships, which can make it difficult to build and sustain good connections with people in adulthood.

Early hardship or trauma can have a considerable impact on propagating violent, faulty, and unhealthy tendencies throughout generations. People who have been through childhood trauma may replicate similar patterns of behaviour in their relationships or families, perpetuating the cycle of abuse, neglect, or dysfunction. To break such damaging cycles, therapies that address the underlying causes of trauma as well as promote healing and healthy interpersonal behaviors must be implemented.

Childhood trauma is not only widespread, but it also has a huge impact on how people conduct their lives, impacting them in an assortment of ways. It is necessary to go further into the specifics of each form of trauma to fully understand the magnitude of its consequences and the challenges involved.

Physical violence, for example, causes short- and long-term emotional trauma along with physical harm. Children who have been abused physically may experience increased fear,

Vol. 2, Issue 5 May 2024 ISSN: 2584-0142

hypervigilance, and difficulty trusting people as they get older. Internalizing the abusive behaviors imposed on them may cause them to feel worthless, humiliated, and blame themselves. The physical trauma suffered could result in long-term health consequences, such as an increased risk of acquiring specific illnesses later in life, greater chronic pain, and diminished mobility.

Emotional abuse, which is often subtle and difficult to detect, is more damaging to a child's well-being than physical abuse. Relentless rejection, criticism, and invalidation undermine a child's sense of identity and worth and harm their confidence and self-esteem. A youngster's inability to regulate how they feel as a consequence of emotional abuse might make it difficult for them to form positive relationships and deal with stress. Emotional abuse can leave emotional scars that continue into adulthood, and the invisible wounds are just as painful as the physical ones.

Sexual abuse, which is considered one of the more severe forms of trauma, utterly destroys a child's sense of security, confidence, and autonomy. Crossing boundaries and exploiting innocence can lead to deep feelings of remorse, humiliation, and self-blame. In addition to a variety of psychiatric symptoms such as PTSD, depression, and anxiety, victims of sexual abuse frequently deal with intimacy, sexuality, and body image issues. Sexual assault can impair a person's ability to form healthy attachments, maintain intimate connections, and enjoy ecstasy and closeness without experiencing guilt or fear.

Impact on Psychological Well-Being

Childhood damage can have a substantial impact on various aspects of one's psychological well-being, influencing positive direction, self-esteem, and overall mental well-being in significant ways.

Vol. 2, Issue 5 May 2024 ISSN: 2584-0142

Children who have experienced an accident may struggle to direct powerful emotions such as fear, wrath, and sympathy, leading to mental health disorders and mood swings. Consequently, they may use maladaptive adaptation strategies such as deception, concealment, or elimination to cope with overwhelming emotions. Over time, these patterns of enthusiastic deregulation can lead to mental health problems such as depression, anxiety, and PTSD, as well as difficulties in forming and maintaining relationships.

Childhood Trauma can significantly affect self-esteem, the subjective assessment of one's possess worth and esteem. Children who encounter injury may internalize negative convictions approximately themselves, seeing themselves as unworthy, unlovable, or inalienably imperfect. Persistent presentation to mishandle, disregard, or dismissal can dissolve self-esteem, driving to sentiments of disgrace, blame, and self-blame. Childhood injury may be a noteworthy chance calculate for a run of mental wellbeing issues, counting misery, uneasiness, PTSD, substance manhandle, and identity disarranges.

People who have experienced childhood injury may moreover battle with believe, closeness, and social back, assist worsening sentiments of confinement, depression, and enthusiastic trouble.

Attachment Theory

Attachment Theory, created by clinician John Bowlby and assisted by Mary Ainsworth, investigates the importance of early connections, especially those with caregivers, in forming individuals' connection styles and interpersonal elements.

Children with a secure connection feel secure, bolstered, and cherished by their caregivers. They are confident in exploring their environment and look for consolation from

Vol. 2, Issue 5 May 2024 ISSN: 2584-0142

their caregivers when bothered. As grown-ups, people with secure connections tend to have trusting, strong, and sincerely satisfying connections.

Children with an anxious-preoccupied connection are hyper-vigilant to signs of dismissal or deserting by their caregivers. They may cling to their caregivers and show uneasiness and vulnerability. In adulthood, people with anxious-preoccupied connection may encounter increased uneasiness and uncertainty in connections, looking for steady consolation and approval from their accomplices.

Children with a dismissive-avoidant connection learn to self-soothe and smother their connection needs due to caregivers who are reliably inaccessible or lethargic. They may show up to be autonomous and self-reliant but may battle with closeness and enthusiastic powerlessness in adulthood.

Children with a fearful-avoidant connection encounter clashing wants for closeness and fear of dismissal or selling out. They may have experienced conflicting or injurious caregiving, driving to a doubt of others and trouble shaping and keeping up connections in adulthood.

Long Term Consequences

Childhood trauma can have long-term effects on people's mental health, increasing their risk of developing a variety of mental illnesses and interpersonal difficulties that can persist into adulthood.

Childhood damage increases the likelihood of developing mood disorders such as depression and bipolar disorder in adulthood. The repeated push and difficulties associated with injury can disrupt the brain's stretch reaction frameworks, resulting in alterations in mood-regulating neurotransmitters such as serotonin and dopamine.

Vol. 2, Issue 5 May 2024 ISSN: 2584-0142

Trauma-related triggers and updates can cause strong fear and anxiety. Childhood injury may be a critical risk factor for anxiety clutters such as generalized anxiety disorder (GAD), social anxiety disorder, freeze chaos, and dreads in adulthood.

It may also be an important risk factor for PTSD improvement in adulthood. Traumatic encounters such as physical mistreatment, sexual mistreatment, neglect, or witnessing savagery can result in persistent symptoms of re-experiencing, shirking, hyperarousal, and undesirable changes in disposition and cognition. People who have been injured as children may suffer from disturbing memories, horrible dreams, flashbacks, and enthusiastic desensitisation as a result of their traumatic experiences.

Resilience and Protective Factors

Despite the significant and enduring impact of childhood injury on mental well-being, specific factors can mitigate its negative effects and foster resilience in those affected. Recognizing these protective factors is crucial for identifying qualities and abilities that can assist individuals in overcoming adversity and achieving positive outcomes following injury.

Strong supportive relationships are fundamental in mitigating the detrimental effects of childhood injury. Close ties with caregivers, family members, friends, and other social supports offer emotional validation, comfort, and stability. These relationships nurture feelings of security, trust, and safety, while also providing encouragement, guidance, and practical assistance in navigating challenges and accessing resources for recovery.

Developing adaptive coping strategies is vital for managing the emotional, cognitive, and behavioural challenges associated with childhood injury. Skills such as seeking social support, problem-solving, emotional regulation, and mindfulness enable individuals to cope

Vol. 2, Issue 5 May 2024 ISSN: 2584-0142

effectively with distressing emotions and thoughts. Engagement in activities that promote relaxation, self-expression, and personal growth, such as art therapy, exercise, journaling, or mindfulness practices, empowers individuals and enhances their sense of control.

Access to resources such as mental health services, education, employment opportunities, and community support is essential for facilitating healing and recovery. Seeking professional help from counsellors, therapists, or support groups provides specialized interventions and evidence-based treatments for trauma-related symptoms and mental health issues.

Educational and vocational opportunities empower individuals to pursue meaningful goals and achieve financial independence, reducing reliance on harmful or dysfunctional environments. Community-based organizations, support groups, and peer networks offer valuable resources and social connections, fostering a sense of belonging and solidarity.

REVIEW OF LITERATURE

Yarar and Demirbaş (2023) investigated gender disparities in suicidal behaviour, considering factors like anger and childhood trauma. They studied 589 Turkish university students aged 18-34 (mean age = 21.43, SD = 1.82), with 84.3% being women. Their goal was to understand how gender influences the impact of childhood trauma and current anger on suicide risk. Regardless of gender, they hypothesized that anger would mitigate the relationship between childhood trauma and suicide risk. Their findings suggest the importance of addressing adverse childhood experiences (ACEs) early on to prevent their detrimental effects, emphasizing the need for comprehensive mental health strategies.

Vol. 2, Issue 5 May 2024 ISSN: 2584-0142

Ravishankar and Sathiyaseelan (2022) underscore that adulthood entails significant change and stress. They stress the importance of a nurturing environment during childhood, as it lays the groundwork for lifelong development and coping mechanisms. Misconceptions formed in early years can impact adult functioning. Understanding how childhood trauma shapes psychological health and personality development into adulthood is crucial. Their study proposes a three-tier model to elucidate the impact of childhood trauma on psychological distress and personality disorders in adolescence. They suggest future research focus on developing intervention and prevention models for young survivors of childhood trauma, with a particular emphasis on effective parenting techniques.

During the past decade, research on the link between childhood emotional maltreatment and adulthood romantic relationship well-being has been accumulating, but there still lacks a systematic, quantitative evaluation of existing research. This three-level, meta-analysis by Cao et al. (2022) aimed to fill this gap. Reports were included if they examined the link between early emotional maltreatment and adulthood romantic relationship well-being, presented statistics needed to calculate at least one bivariate effect size, written in English, and published/written before January 1, 2020. We retrieved 201 effect sizes from 23 reports. Early emotional maltreatment (aggregated across forms) was negatively (yet modestly) associated with later romantic relationship well-being (aggregated across dimensions; $r = -.143$, 95% confidence interval [−.173, −.114], $p < .001$). This association did not vary as a function of maltreatment form but differed across relationship well-being dimensions, such that the effect was stronger for the negative than for the positive relationship outcomes. We also found that (a) the actor effect was larger than the partner effect, (b) the effect was stronger in studies using Childhood Trauma Questionnaire (CTQ) than in studies not using CTQ, (c) whether using established measures of relationship well-being did not alter the effect, (d) the absolute magnitude of effect was negatively associated with methodological rigor of effect, and (e) the

Vol. 2, Issue 5 May 2024 ISSN: 2584-0142

effect did not vary as functions of publication type, whether the sample was a college student sample, or union status, and was not related to the mean of union duration. Last, the limitations of existing research, avenues for future inquiries, and implications for practice were noted.

McNeal's (2020) study delves into the enduring health repercussions of childhood trauma, from medical conditions like diabetes to mental health challenges such as depression and anxiety. Despite ongoing research, the long-term psychological consequences of abuse remain elusive, with varying interpretations of the impact of the victim's age at initial exposure. To bridge this gap, McNeal investigates the interplay between childhood maltreatment, onset age of maltreatment, and adult psychological well-being. Using data from 209 adults aged 21 and above sourced via Amazon Mechanical Turk, the study employs hierarchical linear regression analysis. Findings reveal childhood maltreatment as a robust predictor of adult psychological well-being, independent of onset age. However, socioeconomic status and social support moderate the relationship, with younger onset ages correlating with poorer psychological outcomes, especially concerning psychological abuse and neglect. These insights underscore the need for further exploration to inform theoretical frameworks and clinical interventions.

METHODOLOGY

Aim

The study aims to examine the relationship between childhood trauma, psychological well-being, and attachment types among young people.

Vol. 2, Issue 5 May 2024 ISSN: 2584-0142

Research Objectives

- To investigate the relationship between childhood trauma affects the psychological well-being of young people.
- The investigate the relationship between childhood trauma and attachment styles.

Hypothesis

- There will be a significant relationship between childhood trauma and psychological well-being.
- There will be significant relationship between childhood trauma and attachment styles.

Sample

A sample size of 115 participants within the age range of 18 to 30 was used for this study and convenience sampling was employed.

Tools

- ***Childhood Trauma Questionnaire*:** Bernstein's Child Trauma Questionnaire-Short Form is a compact self-report assessment instrument for thoroughly examining childhood trauma episodes. It covers concerns about many types of trauma such as physical abuse, emotional abuse, sexual abuse, etc. The participants rate the regularity of each incident using a Likert scale that ranges from "never" to "very often." When individual item scores are added together, an overall score reflects the severity of childhood trauma. Higher total scores imply that childhood trauma is more prevalent.

Vol. 2, Issue 5 May 2024 ISSN: 2584-0142

- ***Psychological Well-Being Questionnaire*:** Ryff's Psychological Well-Being Questionnaire is a popular self-report questionnaire for evaluating several facets of psychological well-being. It includes assertions from six fundamental areas such as autonomy, environmental mastery, personal growth, positive interpersonal relationships, life purpose, and self-acceptance. Respondents score their agreement on a Likert scale, which normally ranges from "strongly disagree" to "strongly agree." The subscale ratings within each category provide insight into specific aspects of well-being, whereas an aggregate score represents overall well-being. Higher scores indicate improved psychological well-being.
- ***Revised Adult Attachment Style*:** The Revised Adult Attachment Scale (RAAS) 1996- Close Relationships Version is a self-report questionnaire used to examine adult attachment styles in close relationships, with a special emphasis on romantic connections. With 18 items, 6 relating to each type of attachment, respondents evaluate their agreement on a Likert scale of 1 to 5. Higher results on each subscale suggest a stronger congruence with the relevant attachment type, yielding an understanding of attachment dynamics in romantic relationships.

Vol. 2, Issue 5 May 2024 ISSN: 2584-0142

RESULT

TABLE 1

Correlation between studied variables

Correlations						
		Trauma	SCORE	Close	Depend	Anxiety
Trauma	Pearson Correlation	1	.086	.043	.110	-.035
	Sig. (2-tailed)		.358	.651	.242	.712
	N	115	115	115	115	115
Well-Being	Pearson Correlation	.086	1	.154	.279**	.042
	Sig. (2-tailed)	.358		.101	.003	.653
	N	115	115	115	115	115
Close Attachment	Pearson Correlation	.043	.154	1	-.130	.627**
	Sig. (2-tailed)	.651	.101		.165	.000
	N	115	115	115	115	115
Depend Attachment	Pearson Correlation	.110	.279**	-.130	1	-.280**
	Sig. (2-tailed)	.242	.003	.165		.002
	N	115	115	115	115	115
Anxiety Attachment	Pearson Correlation	-.035	.042	.627**	-.280**	1
	Sig. (2-tailed)	.712	.653	.000	.002	
	N	115	115	115	115	115

**. Correlation is significant at the 0.01 level (2-tailed).

DISCUSSION

This study aimed to explore how childhood trauma, psychological well-being, and adult attachment styles relate in young adults aged 18-30. These formative years are a vital era in an individual's development, as early events influence their emotional landscapes and interpersonal relationships. The correlation coefficients derived from the data offer light on the intricate relationships within this demographic.

The study aimed to evaluate the relationship between childhood trauma and adult attachment types. While the correlations revealed weak positive tendencies between trauma

Vol. 2, Issue 5 May 2024 ISSN: 2584-0142

and attachment styles, notably in emotions of closeness and reliance, as well as a weak negative association with anxiety attachment type, none of these relationships were statistically significant. These findings imply that the impact of childhood trauma on attachment patterns in young adults is complicated and multifaceted, potentially influenced by a wide range of individual, familial, and environmental factors.

A significant finding was found regarding the relationship between psychological well-being and adult attachment types. The findings revealed an interesting and statistically significant positive relationship between well-being and dependent attachment patterns. This research emphasizes the importance of attachment patterns for psychological functioning, demonstrating that young adults with higher levels of well-being are more likely to rely on others for support and reassurance.

These findings have significant implications for understanding and supporting the mental health and well-being of young people who have bounced back from childhood trauma. The weak links between trauma and attachment patterns highlight the need for advanced, tailored methods to address attachment-related issues among trauma survivors. Furthermore, the significant relationship between well-being and dependent attachment style underlines the need to develop healthy attachment patterns as a way to promote psychological resilience and emotional well-being in young adults.

In conclusion, this study sheds light on the complicated interplay between childhood trauma, psychological well-being, and adult attachment types in young adulthood. By setting light on these interactions, the findings help to further our understanding of the factors that

Vol. 2, Issue 5 May 2024 ISSN: 2584-0142

influence mental health outcomes among trauma survivors, as well as the value of attachment-informed therapies in assisting them on their path to recovery and resilience.

Trauma and Attachment Styles

- Close Attachment: The correlation between trauma and feelings of closeness is weak and positive ($r = 0.043$, $p = 0.651$). This suggests a slight tendency for individuals who have experienced trauma to feel closer to others, but the relationship is not statistically significant.
- Dependence Attachment: The correlation between trauma and dependence attachment style is weak and positive ($r = 0.110$, $p = 0.242$). This indicates a slight tendency for trauma and feelings of dependence to increase together, but the relationship is not statistically significant.
- Anxiety Attachment: The correlation between trauma and anxiety attachment style is weak and negative ($r = -0.035$, $p = 0.712$). This suggests a slight tendency for trauma to decrease as anxiety attachment increases, but again, the relationship is not statistically significant.

Well-Being and Attachment Styles

- Close Attachment: The correlation between well-being and feelings of closeness is weak and positive ($r = 0.154$, $p = 0.101$). This indicates a slight tendency for higher levels of well-being to be associated with feeling closer to others, but the relationship is not statistically significant.
- Dependence Attachment: The correlation between well-being and dependence attachment style is moderately strong and positive ($r = 0.279$, $p = 0.003$). This suggests

Vol. 2, Issue 5 May 2024 ISSN: 2584-0142

a significant tendency for higher levels of well-being to be associated with higher levels of dependence on others.

- Anxiety Attachment: The correlation between well-being and anxiety attachment style is weak and positive ($r = 0.042$, $p = 0.653$), indicating a slight tendency for higher levels of well-being to be associated with higher levels of anxiety attachment, but the relationship is not statistically significant.

CONCLUSION

In conclusion, this study offers valuable insights into the relationships between childhood trauma, psychological well-being, and adult attachment styles among young adults aged 18-30. While the correlations revealed nuanced associations, with childhood trauma showing weak connections to adult attachment styles and psychological well-being, the significant positive correlation between well-being and dependence attachment style underscores the importance of attachment patterns in shaping mental health outcomes. These findings highlight the complexities of navigating interpersonal relationships and emotional well-being in the aftermath of childhood trauma and emphasize the need for further research and targeted interventions to support healthy attachment patterns and psychological resilience in young adulthood.

Vol. 2, Issue 5 May 2024 ISSN: 2584-0142

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Vol. 2, Issue 5 May 2024 ISSN: 2584-0142

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