

A STUDY TO ASSESS TRAUMA, EMOTIONAL INTELLIGENCE AND RESILIENCE IN TEENAGERS

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ABSTRACT

This study investigated the relationships among childhood trauma, emotional intelligence, and resilience in young adults. Using a correlational design, we selected a sample of 150 young adults aged 13-19 from Karachi, Pakistan. Participants completed the Childhood Trauma Questionnaire, the Trait Emotional Intelligence Questionnaire, and the Resilience Scale. The findings showed a strong positive relationship between resilience and emotional intelligence. However, neither resilience nor emotional intelligence were shown to be significantly correlated with childhood adversity. Resilience was found to be significantly predicted by emotional intelligence, but not by childhood trauma. Resilience and emotional intelligence did not significantly differ by gender. Males reported higher levels of childhood trauma than females, indicating a substantial gender difference. The protective aspects of emotional intelligence that support personal resilience should be investigated in future studies.

Keywords: Assessment, Trauma, Emotional intelligence, Resilience, Teenagers

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INTRODUCTION

Childhood trauma is defined as adverse events, including physical, sexual, and emotional abuse, occurring before the age of 18. Neglect, abuse, parental loss, or a dysfunctional home environment during childhood can significantly impact an individual's adult well-being, disturbing their emotional and psychological health [1-4].

These early experiences can lead to emotional and psychosocial difficulties in adulthood. The psychological and emotional health of individuals can be adversely affected, potentially hampering

interpersonal interactions, emotional control, and the ability to form stable attachments. The lingering effects of traumatic events can manifest in adulthood as emotional instability, low resilience, anxiety, and despair, impacting emotional, academic, and social functioning [5-7].

Self-awareness, drive, empathy, and social skills are all components of emotional intelligence. People who possess a high level of emotional intelligence are more capable of handling challenges. Perseverance and childhood trauma are positively correlated, according to research.

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The capacity to identify one's own feelings as well as those of others is known as emotional intelligence. Strong emotional bonds, psychological well-being, and stress management are all positive attributes that foster resilience [8-10].

Resilience is the capacity to recover from trauma. It involves internal factors such as self-efficacy and coping techniques, as well as external variables like community and social support. Understanding resilience is crucial for supporting young people's mental health and preparing them to handle social and academic pressures. Consequently, many individuals who experience early trauma do not suffer negative long-term effects, with most able to overcome obstacles. Therefore, strengthening resilience should be the aim of interventions.

There is a connection between childhood trauma and decreased resilience. Adverse childhood experiences can lead adults to develop unhealthy coping strategies, which exacerbate mental health problems and detrimentally affect adaptive functioning. Conversely, a recent study indicates that resilient individuals often have stable attachments and supportive connections. Childhood trauma and resilience are negatively correlated, with individuals exposed to trauma exhibiting lower levels of resilience and strained social ties. Early trauma exposure also heightens the risk of anxiety, sadness, and stress, further indicating a lack of resilience [11-14].

While individuals with strong mental fortitude can demonstrate resilience even after early trauma, interventions that foster emotional awareness and regulation can also enhance resilience.

Research has established a positive correlation between psychological well-being and emotional intelligence (EI). Furthermore, the relationship between resilience and emotional intelligence has been explored in university students. Emotional intelligence is recognized as a protective characteristic, warranting further

investigation into its role in early life experiences.

In Pakistani culture, many instances of childhood trauma remain unreported. UNICEF highlights the multifaceted nature of childhood trauma, and social taboos combined with a lack of information often prevent individuals from seeking psychological treatment. Within Pakistani households, psychological assistance is frequently discouraged, and boys are often taught to suppress their feelings. The scarcity of facilities exacerbates the problem, leading to unaddressed trauma. Developing resilience in such an environment demands a high degree of mental toughness. Therefore, implementing programs and interventions to enhance emotional intelligence and resilience among Pakistani young adults is crucial, particularly within communities, schools, and the healthcare system [15-19].

The clinical implications of this study are significant. It elucidates the relationship between resilience, emotional intelligence, and early trauma, also highlighting the resilience exhibited by individuals with high emotional intelligence. The findings can guide educators, policymakers, and mental health professionals in developing effective solutions, offering a more comprehensive perspective within the fields of trauma studies and psychology.

RESEARCH METHODOLOGY

This study investigates the relationships among resilience, emotional intelligence, and childhood trauma in young adults. A correlational study approach was employed to determine the connections between the variables. Purposeful sampling was used to collect data. 150 young adults were selected as a sample from various institutions and social media platforms. Data was gathered using questionnaires within a correlational study design. Young adults aged 13-19 who had experienced childhood trauma completed these questionnaires. Participants were recruited through two methods: visiting universities, where permission had been granted and participants informed of

the study's goal, and an online Google application shared on social media sites. All participants and institutions were fully informed of the study's purpose, and the instruments used had received prior approval. Before data collection, participants provided informed consent, ensuring their voluntary involvement and privacy. The collected data was subsequently analyzed using SPSS 27, and the results were presented in accordance with ethical guidelines [20-24].

RESULT

A total of 150 young adults, aged 13-19 years, were selected for the study. The sample included 60 males and 90 females. The average age of participants was 17.65 years. Of the 150 young adults, 96.8% reported experiencing childhood trauma, and 97.6% had not previously or were not currently undergoing psychological therapy.

A bivariate correlation was conducted to examine the relationships between the study variables. Results indicated a significant positive correlation between emotional intelligence and resilience, suggesting that individuals with higher emotional intelligence scores tend to be more resilient. This implies that emotional intelligence enhances an individual's ability to cope with adversity or stressful life events. However, no significant relationship was found between childhood trauma and emotional intelligence, indicating that varying levels of childhood trauma are not associated with emotional intelligence. Similarly, childhood trauma showed no significant relationship with resilience, suggesting that higher trauma scores do not necessarily correlate with lower or higher resilience.

Regression analysis was employed to identify predictors of resilience in young adults, with childhood trauma and emotional intelligence entered as predictor variables in the model.

No significant cases were found in the data, and all assumptions for the analysis were met. The assumption of independent errors

was met, as indicated by a Durbin-Watson value within the range of 1 and 3. The assumption of no perfect multicollinearity was also met, with all tolerance values greater than 0.20, suggesting no perfect linear relationship between the predictors (childhood trauma and emotional intelligence). Furthermore, the assumptions of homoscedasticity, linearity (as shown by scattered dots in scatter plots), and normally distributed errors (observed through a bell-shaped histogram and the absence of extreme variables in P.P. plots) were approximately met.

In Model I, the regression model, which included both predictor variables, was statistically significant, $R^2 = .452$, indicating that 27.2% of the variance in the outcome variable was explained. Of the two predictors, trait emotional intelligence was a significant positive predictor of resilience, whereas childhood trauma did not significantly predict resilience.

Significant gender differences were observed in childhood trauma. Males reported higher scores on the childhood trauma questionnaire than females. Cohen's $d = 0.34$ indicated a small to moderate effect size. No significant gender differences were found in trait emotional intelligence or resilience, as both variables had similar means. This suggests that males and females possess equal coping abilities when facing adversities.

DISCUSSION

The study included 150 adolescents and young adults aged 13-19 years. Participants comprised 60 males and 90 females, with education levels ranging from intermediate to postgraduate. Data were collected using an online Google Form distributed via social media and through in-person surveys at schools and colleges.

The first hypothesis posited a significant, positive, and strong relationship between emotional intelligence and resilience. This suggests that young adults with higher emotional intelligence are more resilient in coping with childhood trauma. However, no significant relationship was found

between childhood trauma and emotional intelligence, indicating that the level of childhood trauma experienced by participants did not correlate with their emotional intelligence. Furthermore, there was no significant correlation between resilience and childhood trauma, implying that individuals with higher trauma levels were not necessarily less resilient [25-29]. The second hypothesis proposed that emotional intelligence significantly predicts resilience, while childhood trauma does not. This suggests that past trauma does not determine an individual's level of resilience. These results imply that individuals with high emotional intelligence are better able to recover from adversity. The findings support the theoretical perspective that resilience is shaped by psychological resources, such as emotional intelligence, rather than by past traumatic experiences.

The third hypothesis indicated significant gender differences in childhood trauma, with males reporting higher levels of trauma than females. The results suggest that socio-cultural dynamics may discourage males from expressing vulnerability, potentially leading to increased exposure to adverse experiences. In contrast, no significant gender differences were found in emotional intelligence or resilience, indicating that males and females possess similar emotional and coping abilities. This suggests that, despite differences in childhood trauma experiences, both genders have an equal capacity to develop the emotional and psychological resources necessary for resilience [30-33].

The study found a significant, strong, and positive relationship between resilience and emotional intelligence, suggesting that individuals with high emotional intelligence are highly resilient to adversity. This aligns with existing literature indicating that higher emotional intelligence aids in coping with childhood trauma. However, childhood trauma itself showed no significant relationship with

resilience or emotional intelligence, implying that individuals who experience childhood trauma do not have compromised emotional intelligence or ability to cope with adversities.

Emotional intelligence was identified as a significant predictor of resilience among young adults, while childhood trauma was not. This indicates that higher emotional intelligence fosters resilience against trauma, and past traumatic experiences do not determine one's resilience level.

Significant gender differences were observed in childhood trauma, with males reporting more experiences than females. This could be attributed to cultural contexts where males often suppress their emotions, leading to underreporting of their trauma and an overreporting of female cases due to their cultural conditioning and openness [34-37].

The study also revealed a negative correlation between resilience and childhood trauma, suggesting that traumatic events can impair an individual's capacity to overcome obstacles. However, childhood trauma did not significantly predict resilience in this study. Access to therapy and social support may help mitigate these impacts, consistent with recent research.

Furthermore, the study indicates that a university student's resilience is predicted by their emotional intelligence. Higher emotional intelligence enables individuals to better manage stress, recover from hardship, and maintain psychological well-being. The findings suggest that emotional intelligence enhances resilience regardless of an individual's history of trauma.

One study reveals a strong relationship between emotional intelligence and psychological well-being. This supports the current findings that emotionally intelligent individuals can effectively manage emotional challenges, leading to higher resilience.

Research indicates that childhood trauma can impact psychological and emotional development. However, factors such as

cultural values, familial support, social support, and cognitive flexibility can mitigate these effects. These findings are somewhat related to the current study, which found that protective variables in participants' lives negate any significant connection between childhood trauma and mental agility or resilience [38-40].

This study significantly impacts clinical procedures by highlighting how strong emotional intelligence enhances resilience in individuals with childhood trauma. Future research should focus on developing mental health solutions and identifying positive emotions that help people overcome obstacles. Policymakers could apply these findings to youth-focused mental health initiatives, particularly in cultures with low mental health awareness like Pakistan. These initiatives should emphasize the value of psychological interventions in education and behavioral wellness. To understand how individuals manage the effects of childhood trauma and develop resilience, future research will concentrate on modulating and mediating mechanisms.

CONCLUSION

This research investigates the relationship between resilience, emotional intelligence, and childhood trauma in young adults. The findings indicate a connection between adaptability and emotional intelligence, irrespective of early adversity. Emotional intelligence predicts resilience in young people, suggesting that early traumatic events do not necessarily dictate psychological outcomes. Men reported higher levels of childhood trauma than women. However, there were no gender differences in emotional intelligence or resilience, implying that both genders are similarly capable of overcoming hardship. The study's findings demonstrate that emotional intelligence acts as a protective factor, helping individuals maintain resilience in the face of adversity. To explore specific variations in trauma responses and determine which protective elements of emotional intelligence enable people to overcome hardships, future research should

employ qualitative and longitudinal approaches.

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