



ORIGINAL RESEARCH PAPER

Psychology

A STUDY ON ADVERSE CHILDHOOD EXPERIENCES, SUICIDAL IDEATION AND SELF REGULATION AMONG YOUNG ADULTS

KEY WORDS: Adverse Childhood Experiences, Suicidal Ideation, Self-Regulation, Young Adults, Gender.

Bonshikha Bakshi*

Research Scholar, MSc. Clinical Psychology, Kristu Jayanti College
*Corresponding Author

Dr. Arjun Sekhar P M

Assistant Professor, Kristu Jayanti College

ABSTRACT

The present study investigated the relationship between adverse childhood experiences, suicidal ideation, and self-regulation. This study also attempts to study the gender differences in adverse childhood experiences, suicidal ideation and self-regulation that exist among young adults. The participants responded to the scales for adverse childhood experiences, suicidal ideation, and self-regulation (N=200). The results indicate that there is no significant relationship between Adverse Childhood Experiences and Positive Suicidal Ideation. There is a significant relationship between Adverse Childhood Experiences and Negative Suicidal Ideation, between Adverse Childhood Experiences and Self-Regulation, between Suicidal Ideation and Self-Regulation. The findings also indicates that there is no significant difference in adverse childhood experiences, suicidal ideation and self-regulation among young adults based on gender.

INTRODUCTION

Early life experiences are increasingly being linked to everyone's health throughout their lives. Individuals who have had adverse childhood experiences or childhood trauma (ACEs; during childhood or adolescence) might have more problems related to physical and mental health as adults compared to those who have not had ACEs, as well as a higher risk of premature death (Hughes et al., 2017). Individuals with ACEs may be predisposed to disease development due to differences in physiological development, as well as the adoption and maintenance of health-harming behaviours (Danese et al., 2009). According to the Felitti et al. 1998 study, overt child sexual abuse was the second most frequent ACE or trauma, as reported by 22% of the 9,508 people who underwent medical evaluation. It is time for the general medical and public health communities to start proactively addressing the occurrence of ACEs and their long-term impacts rather than leaving this obligation to social services, psychiatrists, psychologists, and trauma specialists.

Suicidal ideations (SI), usually referred to as suicidal thoughts or ideas, are a general word that covers a range of desires, preoccupations, and thoughts related to death and suicide. Clinicians, researchers, and educators encounter continual issues since there isn't a single, clear definition of SI (Harmer et al., 2020). Only a small percentage of those who have suicidal thoughts move on to plot their suicide, and only a small percentage of those who have a plan go on to attempt suicide, according to this model (Baca-Garcia et al., 2011). Young people aged 15 to 29 account for around one-third of all suicides worldwide, and rates of adolescent suicide are rising in many nations (Torok et al., 2022). Suicide is the fifteenth most common cause of death globally, accounting for 1.4% of all fatalities (WHO 2014). Throughout the world, the lifetime prevalence rates for suicidal ideation and suicide attempt are respectively 9.2% and 2.7%. (Nock et al. 2008). In India, suicide claims more than one lakh lives a year. Many suicides (37.8%) in India are committed by those under the age of 30 (Vijayakumar, 2010).

Self-regulation describes the many ways that individuals alter their ideas, attitudes, and behaviours to fulfil a specific objective, such as exerting conscious self-control. Although self-control is one type of self-regulation, there are other forms as well (Fujita 2011). When choosing between a delicious poutine and a healthy salad for lunch, for example, self-control is used to resolve the conflict between the short-term goal of eating delicious food and the long-term goal of being healthy and fit. Self-regulation is a wide word that

describes the dynamic process of choosing an intended result (a goal), acting to achieve it, and then tracking progress along the route (Scheier & Carver, 1998). Self-regulation entails directing behaviour towards an intended outcome. Self-regulation encompasses the control of ideas, emotions, as well as behaviour (Gross, 2015). According to Baumeister, 2004 self-regulation has a theoretical and an applied side. Even if there are often "two sides" to psychological issues, the study of self-regulation (possibly unlike some other disciplines) only has an influence when it advances both theory and practise.

It is most evidently found in adult studies that there is a dose-response relationship between endorsement of adverse childhood experiences categories and many psychological, as well as non-psychological, medical conditions. Hence there is a necessity to do an in-dept study to bring light about the issues faced by those individuals with adverse childhood experiences specially in terms of Suicidal ideations and self-regulation. This study would help to identify if there is a relationship between adverse childhood experiences, suicidal ideation and self-regulation among young adults.

METHOD

Participants

The study was conducted on young adults between the 18-24 age group using convenience sampling technique which is a non-probability sampling technique and 200 individuals participated in the study among which 100 were males and 100 were females. Socio-demographic details of the participants such as the age, gender, education, area of living and family type was collected.

Tools Used for the Study

Adverse childhood experiences (ACE) questionnaire

The Adverse Childhood Experiences (ACE) Questionnaire was developed by Dr. Vincent J. Felitti and Dr. Robert Anda in 1998. It is a 10-item self-report measure that assesses childhood exposure to abuse, neglect, and other traumatic experiences.

Positive and Negative Suicide Ideation Inventory (PANSI)

The Positive and Negative Suicide Ideation Inventory was developed by Osman, Gutierrez, Kopper, Barrios, & Chiros in 1998. This 14-item instrument is designed to measure suicidal ideations. The PANSI has two subscales: positive ideation (PI:

items 2, 6, 8, 12, 13, and 14), and negative ideations (NI: items 1, 3, 4, 5, 7, 9, 10, and 11). Items are scored on a 5-point scale from 1 – none of the time to 5 – most of the time. The PANSI was developed from a pool of 165 items.

Short Self-Regulation Questionnaire (SSRQ)

The SSRQ was developed by Brown, Miller, & Lawendowski in 1999. It is a 31-item scale that was designed to assess self-regulation skills is the short version of self-regulation questionnaire. Items are scored on a 5-point Likert scale from 1 indicating strongly disagree to 5 indicating strongly agree. For reverse-scaled items, 1=5, 2=4, 3=3, 4=2, and 5=1. The SRQ has demonstrated satisfactory reliability and validity. The internal consistency of the SRQ is .89 for adults and .88 for adolescents, and the test-retest reliability is .90.

Procedure

This study aims to understand the relationship between adverse childhood experiences, suicidal ideation and self-regulation. At first a google form was made as the data was collected in online mode. The google form also consisted of socio-demographic details such as age, gender, area of living and family type. The participants were asked whether they wanted to participate in the study or not, and their consent was taken. After that, a briefing about nature and purpose of the study was given in the Google form to the participant to develop the rapport. They were assured that all information taken from them will be kept confidential. Informed consents were taken from them individually. Then ACE questionnaire, PANSI and SSRQ were individually administered to all the participants to determine their adverse childhood experiences, suicidal ideation and self-regulation. After the completion of their questionnaire, the scoring of all 200 questionnaires were done. Normality test was done for the results and according to the results non-parametric test was chosen for further analysis. Finally, the result was interpreted and discussed.

RESULTS AND DISCUSSION

The analysis was done using SPSS. In order to understand the relationship between the variables, correlation was conducted and Mann-Whitney U test was done to identify the gender differences in the variables.

Table-1 Correlation between Adverse Childhood Experiences, Positive and Negative Suicidal Ideation, Self-Regulation.

p*<.05. *p*<.01.

Variable	n	M	SD	1	2	3
1. Adverse Childhood Experiences	200	1.37	1.99	-		
2. Positive Suicidal Ideation	200	19.03	5.35	.00	-	
3. Negative Suicidal Ideation	200	13.64	7.36	.48**	.21**	-
4. Self-Regulation	200	102.38	15.28	.18**	.40**	.21**

Table 4.1 indicates that correlation was calculated for the three variables, Adverse childhood Experiences, Suicidal Ideation and Self-Regulation with N=200 which is significant at (*p*<0.01) level. the correlation coefficient results showed that there is no significant relationship between Adverse Childhood Experiences and Positive Suicidal Ideation (*r*=.002, *p*>0.01). There is a significant positive relationship between Adverse Childhood Experiences and Negative Suicidal Ideation (*r*=.438, *p*<0.01). In a study conducted by Wang et al. (2019) concluded that the risk of SI increased with the number of ACEs, and there was a cumulative effect between ACEs and SI. SI in young adults was impacted by the cumulative effects of 14 different types of ACEs. There is a significant negative relationship between Adverse Childhood Experiences and Self-Regulation (*r*= -.189, *p*<0.01). There is a significant positive relationship between

Positive Suicidal Ideation and Self-Regulation (*r*= .408, *p*<0.01). There is a significant negative relationship between Negative Suicidal Ideation and Self-Regulation (*r*= -.217, *p*<0.01). Zlotnick C., et al. (2003) conducted a study which found that suicidal adolescents and young adults experienced similar levels of overall disruption in self-regulation. There is a significant positive relationship between Positive Suicidal Ideation and Age (*r*= -.061, *p*<0.01).

Table-2 Mann-Whitney test for Adverse Childhood Experiences, suicidal ideation and self-regulation based on Gender

Variables	Male			Female			u	p
	n	M	SD	n	M	SD		
Adverse Childhood Experiences	100	1.36	1.93	100	1.38	2.06	483	.65
Positive Suicidal Ideation	100	1.36	4.21	100	1.38	6.27	480	.62
Negative Suicidal Ideation	100	1.36	7.55	100	1.38	7.17	442	.14
Self-Regulation	100	1.36	15.4	100	1.38	15.1	451	.23
			1			3		0.00

Table 4.2 showing Mann-Whitney test conducted to compare the differences in gender in Adverse childhood experiences, positive and negative suicidal ideation, and self-regulation among young adults. The results showed the value (u= 4831.50, *p*>0.05) which revealed that there was no significant difference in the scores of adverse childhood experiences based on gender. A study conducted by Jones et al. (2022) suggested that ACEs (by age 5) are associated to psychological discomfort differently for boys and girls. For boys, ACEs were mostly related to externalized misery, while for girls, ACEs were predominantly related to internalized distress. The results also showed the value (u= 4800.00, *p*>0.05) which revealed that there was no significant difference in the scores of positive suicidal ideations based on gender and the value (u= 4420.00, *p*>0.05) which revealed that there was no significant difference in the scores of negative suicidal ideations based on gender. In order to determine the prevalence of suicide ideation and behaviour in gender nonconforming children, adolescents, and young adults, a meta-analysis was conducted by Surace, et al. (2021) which revealed no significant differences in suicidal ideation according to biological sex. The results also showed the value (u= 4510.00, *p*>0.05) which revealed that there was no significant difference in the scores of self-regulation based on gender. In a systematic review conducted by Manousiadou, (2021) it was found that three research have examined the impact of gender on traumatically affected children and adolescents' capacity for emotional self-regulation. The fact that physical and sexual abuse traumatised experiences have a stronger effect on lowering boys' emotional self-regulation towards girls stands out.

CONCLUSION AND IMPLICATIONS

The study was performed to understand the relationship between Adverse Childhood Experiences, Suicidal Ideation and Self-Regulation among young adults. The study also focuses on the gender differences in adverse childhood experiences, suicidal ideation, and self-regulation. Therefore, this study provides a better understanding of the correlations between adverse childhood experiences, suicidal ideation, and self-regulation. Additionally, this study provides insight into gender differences and their potential implications, in terms of mental health and suicide prevention.

REFERENCES:

[1] Baca-Garcia, E., Perez-Rodriguez, M. M., Oquendo, M. A., Keyes, K. M., Hasin, D. S., Grant, B. F., & Blanco, C. (2011). Estimating risk for suicide attempt: Are we asking the right questions? *Journal of Affective Disorders*, 134(1-3), 327-332.
 [2] Baumeister, R. F., & Vohs, K. D. (Eds.). (2004). *Handbook of self-regulation: Research, theory, and applications*. Guilford Press.

- [3] Carver, C. S., & Scheier, M. F. (1998). *On the Self-Regulation of Behavior* (1st ed.). Cambridge University Press.
- [4] Danese, A., Moffitt, T. E., Harrington, H., Milne, B. J., Polanczyk, G., Pariante, C. M., Poulton, R., & Caspi, A. (2009). Adverse childhood experiences and adult risk factors for age-related disease: Depression, inflammation, and clustering of metabolic risk markers. *Archives of Pediatrics & Adolescent Medicine*, 163(12), 1135–1143.
- [5] Felitti, V. J., Anda, R. F., Nordenberg, D., Williamson, D. F., Spitz, A. M., Edwards, V., Koss, M. P., & Marks, J. S. (1998). Relationship of Childhood Abuse and Household Dysfunction to Many of the Leading Causes of Death in Adults. *American Journal of Preventive Medicine*, 14(4), 245–258.
- [6] Fujita, K. (2011). On Conceptualizing Self-Control as More Than the Effortful Inhibition of Impulses. *Personality and Social Psychology Review*, 15(4), 352–366.
- [7] Gross, J. J. (2015). Emotion Regulation: Current Status and Future Prospects. *Psychological Inquiry*, 26(1), 1–26.
- [8] Harmer, B., Lee, S., Duong, T. vi H., & Saadabadi, A. (2023). *Suicidal Ideation*. In StatPearls. StatPearls Publishing.
- [9] Hughes, K., Bellis, M. A., Hardcastle, K. A., Sethi, D., Butchart, A., Mikton, C., Jones, L., & Dunne, M. P. (2017). The effect of multiple adverse childhood experiences on health: A systematic review and meta-analysis. *The Lancet Public Health*, 2(8), e356–e366.
- [10] Jones, M. S., Pierce, H., & Shafer, K. (2022). Gender differences in early adverse childhood experiences and youth psychological distress. *Journal of Criminal Justice*, 33, 101925.
- [11] Manousiadou, A. (2022). Low Emotional Self-regulation of Children and Adolescents with Traumatic Experiences Impacts on Their Life Quality. *Open Journal of Psychology*, 1(1), 1–16.
- [12] Nock, M. K., Borges, G., Bromet, E. J., Alonso, J., Angermeyer, M., Beautrais, A., Bruffaerts, R., Chiu, W. T., de Girolamo, G., Gluzman, S., de Graaf, R., Gureje, O., Haro, J. M., Huang, Y., Karam, E., Kessler, R. C., Lepine, J. P., Levinson, D., Medina-Mora, M. E., ... Williams, D. (2008). Cross-national prevalence and risk factors for suicidal ideation, plans and attempts. *The British Journal of Psychiatry: The Journal of Mental Science*, 192(2), 98–105.
- [13] Surace, T., Fusar-Poli, L., Voza, L., Cavone, V., Arcidiacono, C., Mammano, R., Basile, L., Rodolico, A., Bisicchia, P., Caponnetto, P., Signorelli, M. S., & Aguglia, E. (2021). Lifetime prevalence of suicidal ideation and suicidal behaviors in gender non-conforming youths: A meta-analysis. *European Child & Adolescent Psychiatry*, 30(8), 1147–1161.
- [14] Torok, M., Han, J., McGillivray, L., Wong, Q., Werner-Seidler, A., O’Dea, B., Caelear, A., & Christensen, H. (2022). The effect of a therapeutic smartphone application on suicidal ideation in young adults: Findings from a randomized controlled trial in Australia. *PLoS Medicine*, 19(5), e1003978.
- [15] Vijayakumar, L. (2010). Indian research on suicide. *Indian Journal of Psychiatry*, 52(Suppl 1), S291-296.
- [16] Wang, Y.-R., Sun, J.-W., Lin, P.-Z., Zhang, H.-H., Mu, G.-X., & Cao, F.-L. (2019). Suicidality among young adults: Unique and cumulative roles of 14 different adverse childhood experiences. *Child Abuse & Neglect*, 98, 104183.
- [17] World Health Organization. (2014). *Preventing suicide: A global imperative*. World Health Organization.