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EXPLORING THE RELATIONSHIP BETWEEN ADVERSE CHILDHOOD EXPERIENCES AND RESILIENCE IN EARLY ADULTHOOD

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Abstract:

This study examines the impact of Adverse Childhood Experiences (ACEs) on resilience in early adulthood (ages 18-40) with a sample of 60 young adults, equally divided between males and females. Using standardized tools, including the Adverse Childhood Experiences Questionnaire for Adults (Felitti et al., 1998) and the Resilience Scale (Connor Davidson, 2003), data was analysed using statistical methods such as mean, standard deviation, Pearson correlation, and Cronbach's Alpha test. The results revealed a weak negative correlation between ACEs and resilience for both genders, with a slight decrease in resilience as ACE scores increased. However, no significant linear relationship was found between ACEs and resilience in females, suggesting that ACEs may not directly affect resilience in women. Overall, the findings indicate a correlation between higher ACEs and lower resilience in early adulthood, with a more pronounced effect observed in males. Key Words: Adverse Childhood Experiences, Resilience, Early Adulthood

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Introduction:

Adverse Childhood Experiences (ACEs) refer to a range of traumatic events or situations encountered during childhood, such as physical, emotional, or sexual abuse, neglect, and household dysfunction. The impact of these early adversities can have long-lasting effects on an individual's mental, emotional, and physical well-being, often influencing their ability to adapt and thrive in challenging situations. Resilience, defined as the ability to spring back from adversity and cope effectively with stress, is a crucial factor in lessening the negative outcomes associated with ACEs. The relationship between ACEs and resilience has been a subject of growing interest in social research, as it offers insights into how individuals process and overcome trauma.

In India, the effects of ACEs on resilience have gained attention due to the increasing recognition of childhood trauma as a public health concern. With rapid societal and economic changes, many Indian children face numerous adversities, including family violence, substance abuse, poverty, and neglect. These experiences often leave a long-lasting imprint on an individual's emotional and psychological wellbeing. In a diverse country like India, where cultural, socio-economic, and familial contexts significantly shape childhood experiences, understanding the relationship between ACEs and resilience is important.

Studies conducted in India suggest that ACEs are prevalent in various forms across different regions and communities, and their impact on adult mental health cannot be underestimated. Research indicates that individuals who experience higher levels of childhood adversity tend to exhibit lower levels of resilience in adulthood. This is particularly concerning in the context of mental health issues such as depression, anxiety, and substance abuse, which are common among young adults.

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The present study aims to explore the relationship between ACEs and resilience in young adults in the age range of age 18 years -40 years in the city of Mumbai.

Review of Literature:

Sasidharan & Talwa (2023) assessed the impact of adverse childhood experiences (ACEs) on resilience among college students, exploring gender differences and the relationship between ACEs and resilience. The study involved 154 students from a private college in Mangalore, using nonprobability convenience sampling. Data were collected through the Adverse Childhood Experience Scale and the Resilience Scale. Pearson correlation and multiple regression analyses were conducted. The results revealed a low but significant correlation between ACEs and resilience, with females reporting more ACEs than males. The study concluded that early identification of ACEs is crucial to mitigate their long-term effects on resilience and highlighted the need for comprehensive resilience interventions.

Dalal & Rana (2023) examined the relationship between adverse childhood experiences (ACE), resilience, and well-being during emerging adulthood. The study involved 110 participants (49 females, 61 males) aged 18-29, using convenience sampling. Data were collected through the ACE Questionnaire, the Brief Resilience Questionnaire, and the WHO-5 Well-being Index. Pearson correlation analysis showed a significant negative correlation between ACE and both well-being and resilience, while a positive correlation was found between well-being and resilience. The study concluded that ACEs negatively impact both well-being and resilience and that resilience mediates the relationship between ACE and well-being, emphasizing the need for interventions promoting resilience to improve well-being in emerging adulthood.

Objectives:

- 1. To examine the relationship between adverse childhood experiences (ACEs) and resilience in early adulthood for both females and males.
- 2. To analyze the impact of adverse childhood experiences (ACEs) on resilience in females during early adulthood.
- 3. To investigate the effect of adverse childhood experiences (ACEs) on resilience in males during early adulthood.

Methodology:

This study used two standardized tools to collect data. The first tool was the Adverse Childhood Experiences Questionnaire - Adults (10 items), developed by Felitti, Anda, Nordenberg, Williamson, Spitz, and Edwards in 1998. This questionnaire was an integral part of the academic research program designed to measure the effect of adverse childhood experiences. The second tool was the Resilience Scale, developed by Connor Davidson in 2003, which consists of 25 items and was used to assess resilience in young adults.

The research design adopted for this study was a Comparative Study Design, which aimed to explore the differences in resilience between young adults with varying levels of adverse childhood experiences.

In terms of variables, resilience during early adulthood is the dependent variable, as it is expected to be influenced by the independent variable. The independent variable in this study is adverse childhood experiences, which is hypothesized to affect the level of resilience in young adults.

Data was collected from 60 young adults aged between 18 to 40 years, consisting of 30 females and 30 males, located in the city of Mumbai. A purposive sampling method was employed to select participants who fit the criteria for the study. The sample was balanced to ensure equal representation of both genders, allowing for a comparative analysis between females and males regarding their resilience in relation to adverse childhood experiences.





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Results:

Sample Distribution:

Table 4.2.1 Sample Distribution as per Gender

Gender				
	Frequency	Percent	Valid Percent	Cumulative Percent
Male	30	50.0	50.0	50.0
Female	30	50.0	50.0	100.0
Total	60	100.0	100.0	

Table 4.2.1 Indicates that there were 60 respondents 30 females and 30 males, indicating an equal distribution between the two genders. The term "frequency" in this context refers to the distribution or occurrence of individuals within a population based on their gender. This equal

frequency suggests a balanced representation of both females and males within the population under consideration.

Pearson Correlation Coefficient and P-value between Adverse Childhood Experiences score and Resilience score of both Gender

Correlations			
		ACE core	Resilience's Score
ACE Score	Pearson Correlation Coefficient	1	270*
	P-value		.037
	N	60	60
Resilience Score	Pearson Correlation Coefficient	270*	1
	P-value	.037	
	N	60	60





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Objective 1: To understand the effect of adverse childhood experiences on the resilience of males and females during early adulthood.

Null Hypothesis H0.1: There is no significant correlation between adverse childhood experiences and the resilience of females and males during early adulthood.

Alternate Hypothesis H1.1: There is a significant correlation between adverse childhood experiences and the resilience of females and males during early adulthood.

Interpretation: The results indicate that the calculated p-value was 0.037. It was less than 0.05. Therefore, the correlation was rejected. Hence null hypothesis was rejected and the alternate hypothesis was accepted.

Conclusion: There is a significant correlation between adverse childhood experiences and the resilience of females and males during early adulthood.

Findings: The correlation analysis between the ACE Score (Adverse Childhood Experiences) and Resilience Score yielded a Pearson correlation coefficient of -.270*, indicating a weak negative linear relationship between the two variables. The negative sign suggests that as the ACE Score increases, the Resilience Score tends to decrease slightly. The asterisk denotes that this correlation was statistically significant at the p < .05 level, with a p-value of .037, indicating that this finding was unlikely to have occurred by chance.

Pearson Correlation Coefficient and P-value between Adverse Childhood Experiences score and Resilience score of Women

Correlations				
			ACE	Resilience's
			Score	Score
ACE Score	Pearson Coefficient	Correlation	1	143
	P-value			.450
	N		30	30
Resilience Score	Pearson Coefficient	Correlation	143	1
	P-value		.450	
	N		30	30





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Objective 2: To study the effect of adverse childhood experiences on the resilience of women during early adulthood.

Null Hypothesis H0.2: There is no significant correlation between adverse childhood experiences and the resilience of females during early adulthood.

Alternate Hypothesis H1.2: There is a significant correlation between adverse childhood experiences and the resilience of females during early adulthood.

Interpretation: The results indicate that the calculated p-value was 0.450. It was more than 0.05. Therefore, the correlation was accepted. Hence null hypothesis was accepted and the alternate hypothesis was rejected.

Inference: There is no significant correlation between adverse childhood experiences and the resilience of females during early adulthood.

Findings: The correlation analysis between the ACE (Adverse Childhood Experiences) Score and Resilience Score for females was weak yields a Pearson correlation coefficient of -.143, which was not statistically significant (p = .450, N = 30). This suggests that there was no meaningful linear relationship between the ACE Score and Resilience Score in this sample. In other words, variations in one variable do not appear to be associated with systematic changes in the other variable, indicating that adverse childhood experiences may not directly influence resilience levels in this context.

Pearson Correlation Coefficient and P-value between Adverse Childhood Experiences score and Resilience score of Men during early adulthood

		ACE Score	Resilience's Score
ACE Score	Pearson Correlation Coefficient	1	544**
	P-value		.002
	N	30	30
Resilience Score	Pearson Correlation Coefficient	544**	1
	P-value	.002	
	N	30	30





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Objective 3: To study the effect of adverse childhood experiences on the resilience of men during early adulthood.

Null Hypothesis H0.3: There is no significant correlation between adverse childhood experiences and the resilience of males during early adulthood.

Alternate Hypothesis H1.3: There is a significant correlation between adverse childhood experiences and the resilience of males during early adulthood.

Interpretation: The results indicate that the calculated p-value was 0.002. It was less than 0.05. Therefore, the correlation was rejected. Hence null hypothesis was rejected and the alternate hypothesis was accepted.

Inference: There is a significant correlation between adverse childhood experiences and the resilience of males during early adulthood.

Findings: The analysis revealed that the ACE score and resilience score for males exhibit a significant negative correlation, with a Pearson Correlation Coefficient of -.544** (p = .002, N = 30). This means that individuals with a greater history of adverse childhood experiences tend to have lower resilience scores, indicating a potentially diminished ability to cope with stress and adversity in adulthood. The results suggest that adverse childhood experiences can have a lasting impact on an individual's ability to handle adversity and stress.

Conclusion:

The study aims to explore the effect of adverse childhood experiences (ACE) on resilience during early adulthood, with a focus on gender differences. The research surveyed 60 participants (30 males and 30 females) using a structured questionnaire to assess their ACE scores, resilience levels, and health outcomes.

The analysis revealed that the ACE score and resilience score for males exhibit a significant negative correlation, with a Pearson Correlation Coefficient of -.544** (p = .002, N = 30). This means that individuals with a greater history of adverse childhood experiences tend to have lower resilience scores, indicating a potentially diminished ability to cope with stress and adversity in adulthood. The results suggest that adverse childhood experiences can have a lasting impact on an individual's ability to handle adversity and stress.

The study found a mean ACE score of 31.33% and a mean resilience score of 62.93%, indicating varying degrees of adverse experiences and resilience among the sample. The reliability of the scale was confirmed by testing through Cronbach's Alpha. Correlation analyses demonstrated a significant negative relationship between ACE scores and resilience levels for both genders, suggesting that a higher prevalence of adverse childhood experiences corresponds with lower resilience in early adulthood. Interestingly, the strength of this correlation was found to be stronger among males.

The findings underscore the profound influence of early life experiences on individuals' resilience during early adulthood, with implications for mental and emotional well-being. The study highlights the importance of addressing adverse childhood experiences to promote resilience and mitigate potential long-term negative health outcomes. The gender-specific analysis sheds light on the differential effects of ACE on resilience and suggests a need for tailored interventions and support systems to bolster resilience, particularly among individuals with a history of adverse childhood experiences. Policymakers, healthcare professionals, and educators can use this information to develop targeted strategies to foster resilience and promote positive outcomes for individuals transitioning into adulthood.

Overall, this study provides valuable insights into the impact of adverse childhood experiences on resilience during early adulthood, stressing the importance of early intervention and targeted support for individuals struggling with adverse experiences.





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