

Trauma Exposure During Adolescence and Its Impact on Self Concept Among Adults

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ABSTRACT

This study investigated the connection between adolescent trauma experience and the clarity of one's self-concept as an adult. Identity formation is crucial throughout adolescence, and traumatic events at this time can have a significant impact on how one views oneself later in life. Data were gathered from 150 adult participants using a quantitative study methodology and two standardized instruments: the Self-Concept Clarity Scale (SCCS) to evaluate the stability and consistency of self-perception and the International Trauma Questionnaire (ITQ) to measure trauma exposure. The link between teenage trauma and the clarity of an adult's self-concept was assessed using statistical analyses such as linear regression, t-tests, and Pearson's correlation. The findings showed that self-concept clarity and trauma exposure had a substantial, statistically significant positive connection ($r = .715$, $p < .01$). The findings showed that self-concept clarity and trauma exposure had a substantial, statistically significant positive connection ($r = .715$, $p < .01$). Additionally, regression analysis revealed that self-concept clarity was strongly predicted by trauma exposure, accounting for about half of the variation ($R^2 = .502$, $p < .001$). Both male and female participants exhibited significantly high levels of trauma exposure and self-concept clarity, according to gender-based one-sample t-tests; men scored marginally higher on trauma exposure and females on self-concept clarity. These results cast doubt on the widely held belief that trauma only affects self-identity. Rather, they propose that people could absorb traumatic events in ways that help them develop a stronger and more distinct sense of self as adults, which is consistent with post-traumatic development theories. The study comes to the conclusion that although teenage trauma has hazards, it can also encourage introspection and identity formation.

Keywords: *Adolescents, Trauma, Self-Concept, Gender Differences*

Adolescence is a very important stage in life where young people start to understand who they are. Psychologist Erik Erikson explained that teenagers often face a major challenge called “identity vs. role confusion.” This means they are trying to figure out their identity. If they succeed, they develop a strong and stable sense of self. However, certain life events, like trauma, can interrupt this process and make it harder for them to form a clear identity.

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Trauma during adolescence—such as abuse, neglect, or losing someone close—can deeply affect how a person sees themselves. It can lead to negative thoughts, trouble trusting others, fear, and feelings of shame. These emotional wounds often don't go away and can carry into adulthood, making it hard for individuals to develop a stable and positive self-concept.

Having a clear self-concept means a person knows who they are and feels confident about themselves. This is important for good mental health. People with high self-concept clarity (SCC) are usually better at dealing with stress and forming healthy relationships. On the other

hand, people with low SCC may experience more anxiety, depression, and low self-esteem. This suggests that trauma during the teenage years might lead to unclear self-identity later in life. Even though these ideas are supported by theory, there is not enough research that directly looks at how trauma in adolescence affects self-concept in adulthood. Also, many studies ignore how gender may play a role, even though men and women often experience trauma and identity formation differently.

This study aims to explore the link between adolescent trauma and adult self-concept clarity using two tools: the International Trauma Questionnaire (ITQ) and the Self-Concept Clarity Scale (SCCS). It also looks at how gender might influence this connection.

LITERATURE REVIEW

Daniela M. Melamed, et. al. (2024) This meta-analysis of 134 studies examined the relationship between self-concept and childhood trauma (N = 255,334). It found that children's and teens' self-concept and their exposure to trauma had a small but significant negative connection ($r = -0.20$). The link was lessened by variables including the kind and intensity of trauma, but not by gender, measuring technique, study caliber, or country affluence. These findings highlight the need of offering targeted therapy support to adolescents who are experiencing or at risk for trauma.

Yufei Hu, et. al. (2024) investigates the ways in which the self-concept influences the relationships between traumatic childhood experiences and adolescent depression in both clinical and community groups. This study looked at the role that self-concept plays in mediating the link between childhood trauma and adolescent depression. It found that the clinical group had higher levels of cumulative trauma and trauma severity, as well as a worse self-concept, using data from 227 clinically depressed adolescents and 574 community adolescents. Physical and social self-concept significantly influenced the relationship between trauma and depression, with the effects being greater in the clinical group. These findings highlight the importance of self-concept as a key mechanism in trauma-related depression.

Bunnell, Alba (2024) An examination of the impact of traumatic event experiences on the development of identity. This qualitative, phenomenological study examined how trauma experienced as a child or adolescent affected the development of young people's identities. The study, which was informed by Erikson's psychosocial theory, involved interviewing twelve people who had experienced moderate trauma using semi-structured questions. Coping mechanisms, the negative impacts of trauma, emotional shifts, the role of outside help in identity development, and interpersonal changes were the five main themes that arose from the thematic analysis using Giorgi's technique. Twenty sub-themes also surfaced.

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The findings highlight how important it is to support teens' resilience and healthy identity development.

Daniel P. Relihan, et. al. (2023) examined how trauma is transmitted through the media and shared social identities. The study examined how shared social identities with trauma survivors might raise people's personal vulnerability and discomfort when a traumatic event is made public by media coverage. For instance, those who identified as Hispanic or LGBT reported experiencing acute stress and heightened media exposure during the 2018 Kavanaugh hearings and the 2016 Pulse nightclub tragedy. The results showed that media exposure related to shared identities raised stress levels, with different results for those with two or more identities. These findings suggest that trauma-related media may have an impact on public health, especially for those who share identities.

Rachel Potterton, et. al. (2022) A Systematic Review and Meta-Analysis of Identity Development and Social-Emotional Disorders in Adolescence and Emerging Adulthood. This study assessed and meta-analysed 20 longitudinal studies that examined the connections between identity development (synthesis/confusion) and symptoms of eating disorders, anxiety, and depression in adolescents and emerging adults. The narrative synthesis suggested a reciprocal relationship between identity formation and social-emotional disorders. However, meta-analyses of a selection of studies found no significant associations between identification and anxiety or depression symptoms. Most studies were rated as being of fair or low quality. Overall, the findings indicate that more thorough research is needed to clarify these links.

Objectives

To achieve this aim, the study is guided by the following specific objectives:

1. To assess the gender differences in level of trauma exposure and self-concept during adolescence among adults
2. To assess the relationship between trauma exposure during adolescence and self-concept clarity among adults.
3. To assess trauma exposure during adolescence significantly predicts self-concept among adults.

Hypotheses

1. There will be significant gender differences in level of trauma exposure and self-concept during adolescence among adults.
2. There will be significant relationship between trauma exposure during adolescence and self-concept clarity among adults
3. Trauma exposure during adolescence significantly predicts self-concept among adults.

METHODOLOGY

Sample

The study population comprised 150 persons between the ages of 18 and 60 who self-reported having gone through at least one major traumatic incident while they were in their adolescent years (ages 12 to 18).

Instruments

Two measures were used in this study,

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1. **The International Trauma Questionnaire (ITQ):** The International Trauma Questionnaire (ITQ) is a self-report instrument used to assess Post-Traumatic Stress Disorder (PTSD) and Complex PTSD (CPTSD) based on the criteria specified in the International Classification of Diseases, 11th Revision (ICD-11).

Structure and Scoring: The ITQ consists of eighteen items. On a 5-point Likert scale, where 0 means "not at all" and 4 means "extremely," participants rate how severe their symptoms are.

Reliability: The ITQ has shown high internal consistency; the PTSD subscale's Cronbach's alpha (α) ranges from 0.87 to 0.90. The DSO subscale's Cronbach's alpha (α) ranges from 0.88 to 0.94. Furthermore, test-retest reliability is robust during short and longer time periods.

Validity: Significant relationships with other validated trauma and mental health measures, such as the WHO Quality of Life instruments, the Depression Anxiety Stress Scales (DASS), and the PTSD Checklist for DSM-5 (PCL-5), lend credence to convergent validity. The ITQ's capacity to differentiate between unrelated categories, such as physical health, and PTSD/CPTSD symptomatology is evidence of its discriminant validity. Strong construct validity is another feature of the ITQ, which successfully distinguishes between PTSD and CPTSD.

2. **Self-Concept Clarity Scale:** Campbell et al. (1996) developed the Self-Concept Clarity Scale (SCCS), a widely used self-report instrument for assessing how well a person's self-concept is internally consistent, stable across time, and clearly defined.

Structure and Scoring: The SCCS consists of twelve components. Respondents assess each question on a 5-point Likert scale, where 1 represents "strongly disagree" and 5 represents "strongly agree."

Reliability: With Cronbach's alpha (α) values frequently ranging from 0.86 to 0.90, the SCCS exhibits a high level of internal consistency. Furthermore, the scale has shown excellent test-retest reliability over time (for instance, $r = 0.79$ over a 4-week period).

Validity: Convergent validity is supported by strong correlations with related variables:

- Positively associated with self-esteem and psychological well-being.
- Negatively correlated with sadness, anxiety, and neuroticism.

Procedure

This study used a quantitative approach and collected data through an online survey. Participants were selected using convenience sampling and were invited through social media. Only adults aged 18 and above could take part.

Before starting, participants read an information sheet and gave their consent. The survey was anonymous, and all data were kept private.

Two tools were used in the survey:

1. International Trauma Questionnaire (ITQ) – to measure trauma symptoms from adolescence.
2. Self-Concept Clarity Scale (SCCS) – to measure how clearly people understand themselves.

The survey took around 10–15 minutes to complete. After data collection, the responses were analyzed using SPSS to explore the link between trauma and self-concept clarity, and to see if gender had any effect.

RESULTS

Table No.1 Table for Descriptive Statistics

Variable	N	Min	Max	Mean	Std. Deviation
ITQ (Trauma Symptoms)	150	0	69	32.34	16.75
SCCS (Self-Concept Clarity)	150	20	51	33.89	8.01

Data from 150 participants were analyzed using two scales: the International Trauma Questionnaire (ITQ) for trauma symptoms and the Self-Concept Clarity Scale (SCCS) for self- concept clarity.

The average ITQ score of 32.34 shows a moderate level of trauma symptoms, with a wide range indicating varied trauma severity. The average SCCS score of 33.89 suggests moderate to high clarity in self-concept, with less variation among participants.

Table No.2 Table for Pearson Correlation Analysis

	ITQ	SCCS
ITQ	1	.715
SCCS	.715	1
Sig. (2- tailed)	--	.000

A strong, positive correlation ($r = .715, p < .01$) was found between trauma symptoms (ITQ) and self-concept clarity (SCCS). This means higher trauma scores are linked to higher self-concept clarity. Possible reasons include post-traumatic growth, identity rebuilding after trauma, or some overlap in the measures.

Table No.3.1 Table for International Trauma Questionnaire result

Gender	t-value	df	Sig. (2-tailed)	Mean Difference	95% CI (Lower - Upper)
Female	14.601	74	.000	30.227	26.10 – 34.35
Male	19.495	74	.000	34.453	30.93 – 37.97

Table No.3.2 Table for Self-Concept Clarity Scale result

Gender	t-value	df	Sig. (2-tailed)	Mean Difference	95% CI (Lower - Upper)
Female	33.392	74	.000	34.293	32.25 – 36.34
Male	41.134	74	.000	33.480	31.86 – 35.10

Table No.3.3 Table for Comparative Gender Analysis

Measure	Male Mean	Female Mean	Difference
ITQ	34.45	30.23	+4.22
SCCS	33.48	34.29	-0.81

Gender-based One-Sample t-Test Result:

Both men and women showed significant trauma symptoms (ITQ) and self-concept clarity (SCCS) scores above zero ($p < .001$). Men had higher trauma scores (34.45) than women (30.23), while women had slightly higher self-concept clarity (34.29) compared to men (33.48). This suggests men report more trauma, but women have a clearer sense of self.

Table No.4.1 Table for Regression Model Summary

R	R Square	Adjusted R Square	Std. Error of the Estimate
.708	.502	.499	5.639

Table No..4.2 Table for Anova

Source	SS	df	MS	F	Sig.
Regression	4805.543	1	4805.543	151.147	.000
Residual	4769.082	150	31.794		
Total	9574.625	151			

Table No.4.3 Table for Coefficients

Predictor	B	Std. Error	Beta	t	Sig.	95% CI for B
Constant	22.900	1.003	—	22.830	.000	[20.918, 24.882]
ITQ	0.337	0.027	.708	12.294	.000	[0.283, 0.392]

Trauma symptoms (ITQ) strongly predict self-concept clarity (SCCS), with a correlation of .708. Trauma explains 50% of the differences in self-concept clarity. The model is statistically significant ($p < .001$). For each increase in trauma score, self-concept clarity rises by 0.337. This shows a clear positive link between trauma and self-concept clarity in this group.

This study examined the relationship between adolescent trauma and adult self-concept clarity. Using data from 150 adults, we found a strong positive correlation ($r = .715, p < .01$) between trauma symptoms and self-concept clarity. Surprisingly, individuals with higher trauma symptoms reported a clearer and more stable sense of self.

Both men and women showed significant levels of trauma and self-concept clarity. Men reported slightly more trauma, while women showed slightly stronger self-concept clarity. These results suggest that, rather than damaging identity, trauma may encourage deeper reflection and personal growth for some individuals.

This finding aligns with the idea of post-traumatic growth, where people develop a stronger self-understanding after adversity. Reflecting on traumatic experiences—especially with support—may help individuals form a clearer identity over time.

DISCUSSION

This study explored the impact of adolescent trauma on adult self-concept clarity using the International Trauma Questionnaire (ITQ) and Self-Concept Clarity Scale (SCCS). Results showed a strong positive correlation ($r = .715, p < .01$), indicating that higher trauma symptoms were linked with a clearer self-concept in adulthood. Men reported higher trauma levels, while women showed slightly greater self-concept clarity. Regression analysis revealed that trauma explained 50.2% of the variance in SCCS scores, suggesting that traumatic experiences may lead to increased identity clarity, possibly due to post-traumatic growth. Cultural norms and emotional processing styles may influence these gender-based differences. Although self-reported data has limitations, the findings challenge traditional views that trauma only disrupts identity. Instead, they highlight how trauma may prompt deeper self-reflection and identity formation. Future research should consider longitudinal

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designs, diverse populations, and narrative methods to better understand how trauma shapes self-concept over time.

To sum up, the current study questions the widely held belief that identity is always broken by teenage trauma. Rather, it provides factual evidence in Favor of a more dialectical perspective, according to which adversity may lead to a more distinct self when it is accompanied by adaptive cognitive and social processes. By shedding light on the positive aspects of this intricate relationship, our results pave the way for new study and practice directions that honour trauma's scars as well as the possibility for healing, coherence, and resilience that follow.

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Conflict of Interest

The author(s) declared no conflict of interest.

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