

# **The Influence of Childhood Trauma on Personalities Among Young Adults and Adults**

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## **Abstract**

The effect of childhood trauma on personality traits is explored in a quantitative study using 200 participants, who were divided into young adults (18-25) and adults (26-39), with gender and age differences considered to be significant components. The study uses the ACE Questionnaire and IPDE to investigate gender differences in trauma exposure and personality characteristics, while also exploring how childhood trauma affects one's specific personality traits. The results showed significant gender differences in personality traits, especially in adults. The ACE scores showed higher rates of paranoid, impulsive, anxious, and dependent traits in women than in men. Dissocial traits were also more prevalent among women. The most significant differences between in young adult were dissocial and anxious characteristics. While correlation analysis showed that childhood trauma had a strong impact on certain personality traits, the effect varied by gender and age. The correlation between Trait 7 and childhood trauma was significant among adult men ( $r = 0.403$ ,  $p = 0.001$ ). However, there were no strong associations for young women. According to these findings, there is a complex correlation between childhood trauma and gender that necessitates more gender-sensitive psychological evaluation and interventions.

**Keywords:** Child Trauma, Personality Traits, Gender Differences, Adverse Childhood Experiences (ACE), International Personality Disorder Examination (IPDE), Young Adults, Adults, Psychological Assessment.

## **CHAPTER 1**

### **INTRODUCTION**

#### **1.1 Introduction**

Introduction Child trauma is increasingly recognized as an essential factor that affects psychological, emotional and social development throughout life. Adverse experiences during childhood, especially those that include chronic stress, threats to emotional or physical security, or safe attachment interruption, have a significant and lasting impact on how people perceive. Sami, others and the world (Cook et al., 2020; Deighton et al., 2021). The growing set of evidence emphasizes that early trauma forms not only immediate emotional functioning, but also long -term results, such as the development of personality and gender -related identity formation (Nemeroff, 2022; Smith et al., 2023). Historically, traumatic research focused on clinical disorders such as stress disorder (PTSD), depression and anxiety (Herman, 1992). However, recent advances in the field of development psychopathology and personality theory suggest that in childhood trauma basically changes the development of personality features: it causes psychological structures that affect the way individuals think, relate, relate and behave (2020; McCrae and Costa, 2008). These properties play a key role in the configuration of relational patterns, self -

identification, management and vulnerability mechanisms to internalization and externalization of psychopathologies. The complex interaction between children's trauma, personality and gender development is not sufficiently explored and is sufficiently resolved in clinical and theoretical frameworks. Gender affects not only how trauma is experienced, focused on biological, psychological and cultural variables, but also in how they are processed, expressed and integrated into the development self (Hyde et al., 2020; Zimmerman & Posick, 2023). For example, girls can internalize an emergency, which leads to greater emotional sensitivity and addiction, while boys can suppress vulnerability, contribute to separation, emotional repression or aggression (Leadbeater et al., 2021; Hankin et al., 2007). This dissertation examines the long -term influence of childhood trauma in the development of personality features with emphasis on differences between sexes during adulthood and later life. Integrates the findings of psychological theory, empirical research and gender studies to better understand how early trauma shapes personality and identity within sex.

### **1.2 Definition of key concepts of trauma childhood**

Children's trauma includes very disturbing events that occur before age 18 that exceeds the child's ability to manage and endanger his sense of safety and stability. These include several forms of abuse (physical, emotional, sexual), negligence, loss of caregivers, exposure to domestic violence or chronic instability related to poverty or the use of parental substances (Felitti et al., 1998; Racine et al., 2022). The trauma can be acute or chronic and is often influenced by factors such as the development phase, the relationship with the perpetrator and the availability of social support (Lang et al., 2021). Personality development refers to the origin and consolidation of permanent patterns of ideas, emotions and behavior over time. While the characteristics show genetic inheritance, the first factors are deeply formed by the early environment, especially the experiences that interrupt safe attachment and emotional regulation (Widiger and Samuel, 2020). Child trauma can interrupt the maturation of personality domains, such as emotional stability, consent, impulse control and social trust (Watson et al., 2023). Sex Gender is a multidimensional construction that includes biological sex, identity (self -confidence), roles (social expectations) and expression (behavior and appearance). Unlike gender, sex is fluid, socially designed and mediated by individual experience (Hyde et al., 2020; Lindqvist et al., 2023). In the contexts of gender trauma, it significantly affects how internalized anguish is resolved and how identity and relationships are navigated. Gender differences in trauma response describe how men, women and people like the genre differ in emotional, physiological and behavioral reactions to trauma. Studies show that women are more likely to develop internalization disorders such as anxiety or PTSD, while men tend to outsource behavior such as aggression or substance abuse (Zimmerman and Poick, 2023; Taylor et al., 2021). These differences are formed by biological reactivity and sociocultural expectations surrounding gender roles and emotional expression.

### **1.3 Theoretical Frameworks**

A number of key theories are used to explain how childhood trauma affects personality and gender development: According to Attachment Theory by Blair (1969), Ainsworth (1978): Attachment theory suggests that early attachment with caregivers has a direct impact on internal working models of self and others. During critical attachment periods, trauma can cause attachment styles to become unstable or vulnerable (Fonagy & Allison, 2020), leading to changes in emotional regulation and social functioning. Defective attachment networks have the potential to promote personality traits like anxiety, avoidance, or dissociation. Developmental Psychopathology Framework (Cicchetti, 1984): In this perspective, development is viewed as the result of dynamic interactions between biological systems, psychological

systems and social structures. Trauma during childhood can impact the neurobiological systems involved in stress responses and brain structures related to emotion regulation and cognition, including the hypothalamic-pituitary-adrenal axis (Teicher et al, 2023). Atypical personality development and increased psychopathological risk are induced by these disruptions. Social Learning Theory (Bandura, 1977): According to social learning theory, behaviors and emotional responses are acquired through observation, modeling, and reinforcement. How is this taught? Maladaptive coping behaviors among children may impact their personality traits, and gender norms can also affect these traits. Boys may be taught to suppress their emotions due in part to societal expectations of masculinity, while girls may openly express distress. Gender Schema Theory (Bem, 1981): The way in which people internalize societal gender roles, as explained by this theory, affects their identity and behavior. Sexual schemas play a role in the perception and manifestation of trauma, contributing to an increase in culturally appropriate personality traits for both gender groups (Hyde et al, 2020). These schemas can be exacerbated or disturbed by trauma, which can impact both the functioning of emotions and relationships. According to the Five-Factor Model of Personality by McCrae & Costa (1997). A comprehensive model of personality traits, including openness, conscientiousness (FFM), extraversion, agreeableness and neuroticism, is based on the Five-Factor Model. Differences in the characteristics of childhood trauma, such as higher neuroticism and lower conscientiousness, have been associated with maladaptive emotional and behavioral patterns.

#### **1.4 Need for study**

Despite the relationship established between children's trauma and psychopathology, limited research examines its long-term effects on personality development, especially in the informed genre. 1. Bring a research gap. While the impact of trauma on mental health is well documented, few studies examine their influence on the development of personality features and investigate the role of gender continuously (Watson et al., 2023; Samuel and Widiger, 2020). Integrative research is needed to understand how trauma, personality and gender interact throughout development. 2. The refinement of a psychological evaluation the different types of traumas have different personality results. Emotional negligence can support schizoid characteristics or avoid, while physical abuse can contribute to border or antisocial characteristics. Specific gender formulas also appear in clinical evaluations such as IPDE and DSM-5-TR (APA, 2022; Paris, 2023). 3. Improvement of clinical interventions that overlook personality structure or gender management strategies can be ineffective. Traumatic therapies should recognize the development of personality and gender as basic mediators of emotional expression and behavior results (Briere and Scott, 2021). 4. address identity and social functioning Trauma alters how people see themselves and their place in society. This is especially relevant in the formation of gender identity, social roles and relational patterns. A nuanced understanding can guide not only clinical interventions but also at the policy level (Lindqvist et al., 2023).

#### **1.5 Relationship between children's trauma, personality and gender**

1. Biological and neurodevelopment effects the trauma interrupts the HPA axis, which leads to the prolonged liberation of cortisol and changes in the key brain regions, including the tonsil, the hippocampus and the prefrontal cortex. These alterations are associated with traits such as emotional deregulation, impulsivity and dissociation (Teicher et al., 2023).
2. Atoco and emotional regulation Early trauma interrupts attachment processes, which leads to insecure or disorganized styles that affect the regulation of emotions and social trust, often expressing maladaptive personality traits (Fonagy and Allison, 2020).
3. Socialization and gender norms Boys and girls are differently conditioned to express or repress emotional states. Trauma tends to amplify these social differences, making children more vulnerable

- to antisocial behaviors and girls to anxiety and dependence (Hyde et al., 2020; Leadbeater et al., 2021).
4. Cognitive and identity development the trauma interferes with the development of a coherent self - concept and encourages shame, negative self -consciousness and dissemination of identity. This is especially harmful to people whose gender identity diverges from normative expectations (Zimmerman and Posick, 2023).

### 1.6 ASES, Personality and Gender Pathology in Clinical Populations

The high oil scores are constantly linked to a greater risk of personality disorders. For example, Zanarini et al. (2021) found that more than 90% of people with personality limit disorder (BPD) reported significant childhood trauma. Gender differences in exposure to trauma also predict the type of personality pathology: women with a history of sexual abuse are more prone to TLP or histrionic features, while men with a history of physical abuse often show antisocial characteristics (Paris, 2023). The IPDE and DSM-5-TR provide evidence that children's trauma shapes dysfunctions of lasting personality. The genre remains a crucial moderator, influencing the expression of symptoms, diagnostic patterns and treatment needs (APA, 2022; Hopwood et al., 2020).

1.6 Examples of the impact of childhood trauma on the example of personality and gender case: emotional negligence and avoidant features A 22 -year -old woman raised in an emotionally negligent home can be developed Avitative personality characteristics. She can describe herself as "invisible" and fight with intimacy, instead of adopting roles that are aligned with traditional gender expectations. Example of the case: physical abuse and male emotional repression A young man subject to repeated physical punishment and taught to "be hard" can grow emotionally Rome, defensive and distrustful, deals associated with narcissistic or antisocial tendencies and reinforced by stoic male ideals. Example of the case: non -compliance of gender and emotional abuse A non -binary adult who experienced family rejection and emotional abuse for expressing gender non -compliance can have difficulties for one's own identity, trust and regulation. This could manifest in limit or schizoid features, together with depression and anxiety.

### 1.7 Summary

This chapter introduced key constructions (childhood trauma, personality and gender development) and demonstrated how trauma works not only as a clinical phenomenon but as a force of development. It established that gender is a mediating factor, which shapes both experience and in the expression of results related to trauma. Subsequent chapters will explore these issues more thoroughly, offering an in -depth story based on evidence of how children's trauma influences who we become and how we sail through the world through gender lenses in the form of adversity.

## CHAPTER 2

### REVIEWS OF LITERATURE

#### 2.1 Traumatized concept from childhood

In childhood, trauma includes a number of unfavorable experiences that occur during formative years, including physical, emotional and sexual abuse, neglect and exposure to household dysfunction. This early experience may disrupt normative neurodevelopment, emotional regulation, cognitive processing and social behavior, often reaching into adulthood. The growing part of the research emphasized how such trauma leaves permanent prints on the development of personality and mental health. The following part represents eight key studies in chronological order and examines the multilateral effects of children's trauma.

1. Huang et al. (2023) conducted an extensive study of 5 317 Chinese adolescents to explore how emot-

ional neglect and verbal abuse affect emotional well-being in young adulthood. Their findings revealed that both forms of trauma were important predictors of depressive symptoms and poor emotional regulation. Adolescents exposed to neglect and abuse showed greater difficulty in managing interpersonal relationships and mood regulation. The study emphasized the cumulative effect of trauma, suggesting that repeated exposure to subtle psychological damage may have comparable long-term consequences as more apparent forms of abuse. The authors also emphasized the path specific to gender-specific and noted that women reported more internalizing symptoms, while men showed more externalizing behavior. They concluded that early emotional abuse is a critical goal for preventing and interventional strategies aimed at reducing adult psychopathology.

2. Mousavi et al. (2022) examined the impact of early trauma on cognitive distortion related to adulthood. Using a sample of 684 young adults, scientists have found that individuals who have experienced traumatic events before 12 age significantly support negative beliefs about themselves and others. This distortion included increased self-criticism, hypervigilance and distrust in interpersonal relationships. The study provided evidence that early trauma forms the formation of basic cognitive schemes that serve as internal templates to interpret future experiences. She also revealed that these beliefs persist into adulthood and are resistant to changes without therapeutic intervention. In addition, Mousavi et al. found gender differences in cognitive deformations, and women are more susceptible to self-blaming and men to hostility and Distrust, indicating potential areas for cognitive restructuring therapy.
3. Merrick et al. (2021) has expanded the original framework of unfavorable child experiences (ACE) by increasing mutual relationships, exposing violence in community and discrimination. When scientists analyzed 3,000 adolescents, they found that these other categories of trauma were strongly associated with anxiety, social withdrawal and antisocial behavior in adulthood. The study stressed that trauma is not limited to the household, but is anchored into wider social contexts, especially for marginalized groups. Gender differences were also observed; Women reported more emotional abuse and relational aggression, while men experienced more physical victimization. These findings urged to redefine trauma that reflect modern social dynamics and demanded inclusive preventive models that are responsible for gender and environmental penetration during trauma exposure.
4. Van Harmelen et al. (2020) used the functional and structural neuroimaging techniques to study the long-term neurological effects of children's trauma. Their sample consisted of 210 adolescents with different trauma history. The results revealed that individuals with exposure to early trauma showed a significant reduction in the volume of gray matter in the prefrontal cortex and increased reactivity in Amygdala. These nerve changes were associated with disturbed powerful functioning, problems in emotional regulation and increased threat perception. Importantly, these brain changes were more pronounced in women, suggesting a neurobiological path through which gender strives for trauma. Scientists have concluded that children's trauma basically changes the brain circuits involved in emotions and decision-making, increasing vulnerability to anxiety and personality disorders in adulthood.
5. Braga et al. (2019) examined the impact of chronic childhood trauma on physiological stress systems focusing on cortisol reactivity. Their longitudinal studies watched 300 children for 10 years and found that those that were exposed to repeated trauma showed dull cortisol reactions and dysregulated circadian rhythms. This disruption in the Hypothalamic-Hypophysis (HPA) axis (HPA) was strongly associated with emotional instability, low tolerance of frustration and increased pulse. Scientists have

found that these physiological patterns predictive to maladaptive personality traits in adulthood, including border and antisocial tendencies. Gender -based analyzes revealed that women showed higher cortisol dysregulation associated with emotional withdrawal, while men showed impulsive behavior. These findings suggest that biological reactions to trauma contribute to the creation of specific personality traits and that these reactions are alleviated by gender.

6. Heleniak et al. (2018) conducted a longitudinal study to investigate the effects of interpersonal violence on emotional development. The study followed 340 children from middle childhood to adolescence and discovered that high levels of exposure to violence were linked to greater emotional reactivity and deteriorated social cognition. The participants had difficulty interpreting social signals, exhibited high fear responses and, often, threatened poorly attributed in benign situations. These results were associated with a higher risk of personality pathology, including paranoia and social withdrawal. The authors also found that females demonstrated greater affective deregulation, while men were more likely to participate in a reactive aggression. This study emphasized the role of trauma in the configuration of emotional reactivity patterns that influence adult personality, and gender plays a fundamental role in the way in which these patterns are expressed.
7. Danish and McLaughlin (2017) synthesized findings of more than 25 studies to examine the biological and psychological effects of childhood trauma. His meta -analysis revealed that trauma is associated not only with psychiatric disorders but also with long -term alterations in immune function, inflammation and metabolic regulation. These physiological effects contributed to fatigue, chronic pain and the instability of mood, sings that cross personality such as neuroticism and somatization. The authors found that females exposed to trauma had higher inflammatory responses, while men showed more signs of metabolic interruption. His work highlighted the multisystemic nature of the impact of trauma and requested an integrated model that includes biological, psychological and gender dimensions of the response to trauma.
8. Anda et al. (2006) conducted one of the fundamental studies on children's adverse experiences (ACE), analyzing data from more than 17,000 adults. The study established a clear dose-response relationship between the ACE number and the probability of developing psychiatric disorders, abuse of risky substances and behaviors. He found that early trauma affects attachment, identity formation and self -concept, personality components. In addition, researchers reported specific gender trends, with women who show greater vulnerability to depression and anxiety and men are more likely to participate in outdoor behaviors. The integral approach to the study established the basis for subsequent research and interventions focused on early trauma prevention and highlighted the need for gender -sensitive therapeutic approaches.

## 2.2 Studies on Child Trauma and Personality Development

Child trauma plays a crucial role in personality development configuration, influence emotional regulation, interpersonal functioning and self -concept. These experiences often leave lasting traces that manifest in personality disorders and maladaptive personality traits in adulthood. This section reviews Empirical studies that explore how early adverse experiences influence the trajectory of personality development in various populations.

1. Zhao et al. (2024) conducted a longitudinal study on 1,200 young adults in urban China to evaluate the impact of child trauma on emerging personality traits. They discovered that people with high levels of child emotional negligence were more likely to exhibit traits associated with avoidant and schizoid personality patterns. Emotional suppression and interpersonal detachment were dominant

characteristics in those with early negligence experiences. The study emphasized the mediating role of emotional deregulation between trauma and subsequent difficulties of personality. Gender analysis revealed that men showed higher levels of emotional detachment, while women showed greater anxiety. The study required trauma -centered interventions adapted to cultural contexts. These findings offer new ideas about how trauma shapes personality styles in non -western populations. He also demonstrated the influence of trauma in the trends of self concept, autonomy and attachment. The authors emphasized the early integration of youth mental health programs.

2. Andersson et al. (2023) explored how different types of child abuse predicted specific characteristics of personality disorder in adulthood. Using a Swedish community sample of 1,500 adults, the study found strong links between sexual abuse and symptoms of limit personality (BPD) disorder, which include impulsivity, emotional instability and identity confusion. Physical negligence predicted compulsive obsessive features, especially among male participants. Women exposed to emotional abuse showed greater vulnerability to depressive features and interpersonal hypersensitivity. The modeling of the structural equation suggested that trauma -related cognitive schemes mediate the relationship between abuse and personality pathology. The study underlines the importance of specific gender trauma responses in the configuration of personality development. The researchers concluded that not all types of trauma are equal in their psychological results. The findings support a nuanced approach for personality evaluation that considers the typology of trauma and gender differences.
3. Chen et al. (2022) conducted a meta -analysis of 38 studies to explore the link between the adverse experiences of childhood and maladaptive personality traits. The analysis found that emotional abuse and inconsistent parenting were more predictive of limit, narcissistic and paranoid personality characteristics. Genus stratified data revealed that females tended towards emotional deregulation and dependency features, while men were more likely to develop antisocial and paranoid characteristics. This gender -based divergence was attributed to biological and socialized coping styles. The study also stressed that early trauma distorts interpersonal trust and the regulation of emotions, which are critical for the healthy development of personality. The researchers emphasized that trauma therapy should consider both the type of adversity and gender identity. These findings validate previous psychodynamic theories with modern empirical evidence. The study supports the integration of personality evaluation in the care informed by trauma.
4. Tomlinson et al. (2021) Evaluated the role of early trauma in the formation of personality traits among 600 university students in the United Kingdom. Using the child trauma questionnaire and the neo-PI-R, the study found that exposure to trauma predicted a high neuroticism and low kindness. Participants who experienced physical or emotional abuse exhibited greater impulsivity and interpersonal sensitivity. In contrast, negligence was linked to low awareness and self -efficacy. Gender analysis showed that women exposed through trauma obtained a higher score in neuroticism and internalization symptoms, while men showed more externalization and risk taking behaviors. The study emphasized the nature of a lifetime of the effects of trauma on personality and behavior. He recommended early detection in educational institutions to avoid the beginning of personality difficulties. Their findings supported the cognitive-behavioral approaches focused on the restructuring of trauma-related beliefs.
5. Akca and Arikan (2020) conducted an intercultural study to examine how early trauma shapes narcissistic and dependent features in Turkish and European students. The results revealed that emotional negligence and entanglement were significantly associated with vulnerable narcissism and dependence, particularly among women. Great narcissism was more frequent among men with trauma

stories that imply an emotional invalidation. The study emphasized the impact of parenting styles and gender role expectations in the configuration of personality after trauma. Cultural norms further influenced how trauma was internalized or expressed, with collectivist cultures that show more relational dependence features. The researchers recommended therapeutic models that incorporate cultural and gender sensitivity. The study provided valuable information about the intersection of culture, gender and personality development based on trauma.

6. Cullen et al. (2019) explored how early trauma contributes to the formation of personality disorders of group B among 800 psychiatric patients. Using structured interviews and trauma stories, they discovered that child emotional abuse significantly predicted the limit and narcissistic features. Female patients were more likely to report autograc behaviors that care and emotional instability, while men exhibit grandeur and interpersonal antagonism. The study supported personality pathology development models that link affective instability and identity alteration with unresolved childhood trauma. These findings validated psychodynamic theories and based on the attachment of personality development. The authors recommended specific gender interventions, such as DBT for women with limit characteristics and scheme therapy for men with narcissistic features.
7. Paris (2018) In a conceptual review, Paris examined how early adverse experiences contribute to the vulnerability of personality disorder. He stressed that children's trauma compromises the development of emotional regulation and self -sis, especially during periods of sensitive development. The limit, antisocial and dependent features were identified as common long -term results. Paris emphasized that women tend to develop more internalization features, while males are inclined towards externalization behaviors, such as aggression or misuse of substance. He proposed that biological sensibilities interact with traumatic environments to determine the development trajectory. His review highlighted the role of attachment in the mediation of the effects of trauma on personality. Paris advocated early therapeutic intervention during adolescence as a preventive strategy.
8. Johnson et al. (2017) conducted a 10 -year prospective study that tracks 1,200 people from childhood to early adulthood. They discovered that exposure to trauma before the age of 10 was significantly associated with the appearance of maladaptive personality features at age 20. Those exposed to repeated abuse obtained more from the measures of neuroticism, suspicion and interpersonal dependence. Gender differences arose over time, with women who exhibit more instability of mood and men who show aggression and distrust. The study supported development psychopathology theories that link early environmental stress with lasting personality disturbances. The researchers emphasized the need for early intervention programs aimed at emotional regulation and identity training. Their findings provide one of the few longitudinal validations of trauma personality links.

### **2.3 Influence of children's trauma on personality development**

1. Lee et al. (2023) examined how the different types of trauma during childhood influence the personality features of the five greats in a sample of South Korean adults. The study revealed that emotional abuse significantly predicted a higher neuroticism and a lower kindness. In addition, people exposed to prolonged negligence exhibited a reduced consciousness. The authors emphasized the importance of specific trauma interventions adapted to the most affected personality dimensions. These findings suggest that child trauma does not lead to uniform results, but alters personality patterns in a nuanced way. The use of structural equations modeling strengthened causal interpretations. The study had strong external validity due to its large and diverse sample.

2. Miller & O'Connor (2022) conducted a longitudinal study on American university students and discovered that early trauma, particularly emotional abuse, significantly predicted lower levels of openness and extraversion in early adulthood. Interestingly, the effect was moderated by gender, with women who show stronger changes in extraversion. The study used both retrospective trauma interviews and personality inventories. During the period of four years, exposure to trauma continued to influence the self-concept and social behavior of the participants. The research highlights how personality training remains vulnerable during late adolescence and early adulthood.
1. 3.Zhang et al. (2021) analyzed how the different types of child trauma were related to the hexaco model of personality traits between 700 Chinese adults. The researchers found that high trauma scores were correlated with high levels of emotionality and decreased honesty-humility. Physical abuse and emotional neglect were the most influential types of trauma. The study used the Child Trauma (CTQ) questionnaire and the hexaco-p scores. The findings emphasized how trauma influences not only emotional stability but also moral and interpersonal features, potentially increasing susceptibility to interpersonal conflict.
3. Villalta et al. (2020) focused on adolescents in the United Kingdom and discovered that trauma led to alterations in self-perception and identity formation, which directly influenced the development of maladaptive personality features. Young people with high exposure to trauma exhibited traits aligned with limit and evasive personality trends. The study used in-depth clinical interviews and dimensional personality evaluations. The researchers concluded that unresolved trauma shapes the lens through which individuals interpret both themselves and others. This development interruption was especially prominent in women with parents rejection stories.
2. 5.Pérez-Scotor et al. (2019) investigated how child sexual abuse influenced personality profiles among adults under psychotherapy in Spain. The study found significant increases in neuroticism and reductions in kindness and consciousness. Participants also reported high levels of distrust, autolestar and identity confusion. The researchers emphasized the mediating role of the insecurity of attachment in the configuration of these personality distortions. The findings were consistent with the clinical theories that link trauma with the development of fragmented identity.
3. 6.Benedetti et al. (2018) found that adults with accumulated exposure to children's trauma obtained significantly higher scores in the PID-5 maladaptive features, including hostility, impulsivity and emotional lability. Using a clinical sample of Italy, the study linked early emotional neglect with lasting affective deregulation. Participants also reported chronic instability and difficulty forming stable interpersonal relationships. These features often reflected those seen in Group B personality disorders, underlining the long-term psychopathological effects of trauma.
4. Shields et al. (2017) explored the link between exposure to trauma and antisocial personality traits in young men imprisoned in the United States prison. Their results showed that early physical and emotional abuse predicted higher levels of insensitive-not emotional traits and impulsivity. The study used a combination of forensic interviews and psychometric tools. The results suggest that trauma contributes not only to internalization disorders but also to externalization and antisocial features. This admits trauma-informed approaches even in forensic environments.
5. Luntz and Widom (1994) provided early evidence that people with children's abuse had significantly more likely to develop antisocial personality traits in adulthood. His longitudinal research followed the abused children in their 30 years, using judicial records and interviews. The study found that child trauma independently predicted the pathology of adult personality even after controlling the

socioeconomic state and intellectual coefficient. This fundamental research highlighted the lasting and generalized effects of trauma in personality trajectories.

#### **2.4 Gender differences on the impact of child trauma on personality development**

1. Cohen et al. (2024) Cohen and his colleagues investigated how exposure for life trauma influences the development of pathological personality features, with an focus on gender differences. His study involved 148 clients from a Community Mental Health Clinic that completed the trauma history questionnaire and personality inventory for the DSM-5-Brief form. The results revealed a significant association between exposure to trauma and pathological personality traits in men, particularly in the domains of antagonism and detachment. In contrast, this association was not observed in women. The study highlights the importance of considering the specific vulnerabilities of the genre in evaluating and treating people with a history of trauma.
2. Pracrason, T., Mutlu, I., Fusar-Poli, L., et.,al. (2024). Gender differences in associations between childhood adversity and psychopathology in the general population. Published in social psychiatry and psychiatric epidemiology, this study examined how several subtypes of child adversity correlate with psychiatric symptoms, highlighting specific gender associations. Research helps to understand the nuanced forms in which early adverse experiences affect mental health results differently between genres. Dandona (2024) examined the relationship between adverse childhood experiences (ACE) and personality traits in emerging adults, considering possible gender differences. The study included 366 participants from various community and educational environments. The results indicated that the females reported slightly higher ACE scores, while men obtained higher scores in extraversion and females in neuroticism. A negative association between Aces and Extraversion was observed, and a positive relationship between ACE and psychoticism. These findings underline the complex interaction between child adversity, personality and gender development, which suggests the need for custom interventions.
3. Gour & Gupta (2024) in a critical review, Gour and Gupta synthesized literature on the impact of childhood trauma on personality development among young adults. The review emphasized how the first adverse experiences interrupt adaptive personality traits, which leads to maladaptive behaviors. He stressed that people exposed to childhood trauma can exhibit greater emotional reactivity, difficulties to face and altered social skills, increasing personality risk and mood disorders. The authors advocated interventions informed by trauma to promote healing and recovery in young adults affected by children's trauma.
4. Yang and Huang (2024) performed a meta -analysis that examines the relationship between child abuse and mentalization capacity. His analysis revealed that people with a history of child abuse exhibited significant impediments in mentalization skills, which are crucial to understand and interpret mental and others themselves. These impediments were linked to greater vulnerability to various psychological disorders, including personality disorders. The study underlines the importance of addressing mentalization deficits in therapeutic interventions for individuals with a history of trauma.
5. Wais et al. (2024) Wais and his colleagues explored the differential roles of sexual abuse and mentalization in symptoms related to trauma among adolescents. His findings indicated that sexual abuse was a significant predictor of posttraumatic stress and limit personality characteristics. In addition, the deficits to mentalize mediated the relationship between sexual abuse and trauma -related symptoms. The study highlights the critical role of the mentalization of the abilities to understand the

impact of sexual abuse on the psychological results of adolescents and suggests that improving mentalization skills could be a therapeutic objective.

6. Shields et al. (2017) investigated the link between exposure to trauma and antisocial personality traits in young men within the United States prison system. His The results showed that early physical and emotional abuse predicted higher levels of insensitive-not emotional traits and impulsive. The study used forensic interviews and psychometric tools, which suggests that trauma contributes to both internalization and outsourcing disorders. These findings support the implementation of approaches informed by trauma in forensic environments to address the underlying causes of antisocial behavior.

### **2.5 Paper of attachment, regulation of emotions and gender in the development of personality related to trauma**

1. Gander, Buchheim and Sevecke (2024) explored how attachment trauma contributes to personality disorders among adolescents who receive psychiatric care. The study found that people with early relational trauma exhibited insecure attachment styles that were strongly correlated with the limit, narcissistic and avoidant features. The girls most frequently demonstrated a worried attachment, which led to emotional deregulation and relational instability. Children, in contrast, showed more derogatory or fearful evasion styles, contributing to impulsivity and detachment. These gender routes were especially evident in those with chronic exhibition to the rejection or inconsistency of the parents. The study highlights attachment centered therapy as crucial to treat the pathology of personality rooted in trauma.
2. Thomas, Rossell and Gurvich (2024) This study examined gender differences in associations between children's trauma, schizotypal features and affective anguish. Made in a non -clinical sample, he found that women with trauma stories showed significantly higher schizotypal characteristics and high levels of depression and anxiety. Men, despite informing an exhibition similar to trauma, did not exhibit these results related to personality. The researchers concluded that women can be more vulnerable to interruptions related to trauma in identity and emotional regulation. Mental health professionals are encouraged to integrate specific gender detection and trauma stories when evaluating emerging personality symptoms.
3. Teicher and Samson (2016) This neurological development study showed that early abuse and negligence interrupt the brain regions involved in the regulation and attachment of emotions, including the tonsil and the anterior cingulate cortex. The females exhibited a greater reactivity of the amygdala to the emotional stimuli, while the males had more structural changes in the regulatory regions such as the prefrontal cortex. These differences explained the gender expressions of trauma related features: females with augmented fear responses and males with deteriorated impulse control. The results suggested that therapeutic models should integrate neurological and emotional development with trauma stories to customize attention.
4. Lanius et al. (2010) Using neuroimaging, they demonstrated that early trauma leads to lasting changes in brain networks involved in self -regulation, particularly the network by default and the limbic system. The female participants showed greater hyperactivation in the areas of emotional processing, which resulted in persistent affective instability. The males demonstrated hyporesponsive in the same regions, indicating an emotional flute. These patterns are aligned with the typical gender presentation of personality trauma features: Border features in women, antisocial trends in men. The authors advocated psychotherapeutic approaches sensitive to gender aimed at emotional integration and self -awareness.

5. Schore (2003) theorized that attachment trauma interrupts the development of right brain systems responsible for emotional regulation and interpersonal tuning. He stressed that evil a; Women tend to develop concerned attachment and affective instability, while males develop patterns and avoidant aggression. Its neuropsycholytic model links early emotional deprivation with subsequent self - organization dysfunctions, offering a convincing framework for gender -informed treatment.
6. Fonagy et al. (2002) Fonagy and his colleagues introduced the concept of "mentalization" as a function of crucial development interrupted by trauma. His research showed that united children safely develop a strong ability to reflect on internal mental states, while children exposed to trauma often do not develop this ability. The deteriorated mentalization was linked to personality disorders, such as limit and narcissistic characteristics. The team discovered that girls tended to blame themselves for the tuning of the caregiver, while boys blamed, impacting gender patterns of emotional and interpersonal functioning.

## **2.6 Specific gender personality results after trauma**

Numerous studies have identified gender differences in personality trajectories after trauma.

Pechtel and Pizzagalli (2011) reviewed Neuroimagen studies and concluded that exposure to trauma leads to divergent brain activity in men and women. For example, women exhibited a greater activation of the tonsil. Associated with emotional hypersensitivity, while men showed interruptions in prefrontal functioning, often linked to behavioral disinhibition and risk taking.

Kerig and Becker (2015) argued that socialization plays a fundamental role in the configuration of trauma responses. In general, girls are encouraged to express emotion and seek help, which can increase vulnerability to dependent, avoided or limit features. On the contrary, children are often socialized to suppress vulnerability, resulting in emotional anumination and antisocial features.

Agnew-Blais et al. (2018), using a longitudinal design, reported that child abuse predicted the increases in the personality traits of group B (for example, limit, histrionic) in women and group B features with antisocial and narcissistic characteristics in men. The study highlighted the importance of specific gender risk roads that link early trauma with personality pathology.

## **2.7 Intercultural Studies on Trauma, Personality and Gender**

Intercultural research further supports the idea that trauma interacts with gender and culture to influence personality.

Ji et al. (2021) found that neuroticism and low awareness mediated the relationship between children's trauma and depression among Chinese adults, with stronger effects through neuroticism on women and the strongest effects through antagonism and reduced consciousness in men. Similarly, Naicker et al. (2019), in a South African sample, they found that women exposed to trauma were more likely to develop internalizing features (for example, submission), while the males exposed to traumas exhibited externalization features (for example, aggression). These findings emphasize the influence of cultural gender norms on trauma responses and personality training.

## **2.8 International Personality Disorder (IPDE) examination in the evaluation of personality traits in relation to ACEs**

The International Personality Disorder (IPDE) exam is a widely used diagnostic tool to evaluate personality disorders and traits in clinical environments. Its application has been fundamental to elucidate the relationship between adverse children's experiences (ACE) and personality pathology. Through semi -structured interviews and a standardized score system, the IPDE offers a reliable means to evaluate durable maladaptive personality traits that can come from early trauma.

1. Kumar et al. (2024) conducted a comparative study that involves individuals with and without an ace history, using the IPDE to evaluate emotional regulation, stress tolerance and personality disorder features. The findings He revealed that people with a history of Ace exhibited significantly lower emotional regulation skills and greater stress reactivity. The study suggested that personality traits, such as emotional lability, impulsivity and interpersonal distrust, were more pronounced in those exposed to child trauma. Women in the study showed greater affective instability and limit features, while men demonstrated more antisocial characteristics. The IPDE proved to be sensitive to detecting variations of nuanced features between the genres, emphasizing its usefulness in the evaluation informed by the trauma.
2. Martínez and Beardsley (2023) applied the IPDE in a longitudinal study of 400 young adults, examining how child abuse and negligence influenced the appearance of personality features of group B. discovered that emotional negligence was strongly associated with narcissistic and limit features in women, while physical abuse predicted the antisocial tendencies in men. The IPDE allowed distinctions at the feature level, highlighting how early trauma interacts with specific gender development paths. His study reinforced the value of the tool to differentiate trauma -related personality profiles, particularly among emerging adults.
3. Nguyen et al. (2022) explored how cumulative Acela scores are correlated with the dimensional classifications of the characteristics of personality disorder using the IPDE. They found that the highest ACE scores predicted greater gravity of the features avoided, dependent and paranoids in both sexes. In particular, women were more likely to exhibit high dependence and interpersonal sensitivity, while men showed greater detachment and hostility. The researchers emphasized the effectiveness of the IPDE in the mapping of the intersection between exposure to trauma, personality pathology and gender expression.
4. Baker et al. (2020) analyzed psychiatric case files and re -administered the IPDE to a sample of adults exposed to trauma. They discovered that the ACEs, particularly emotional and sexual abuse, were significantly associated with lasting personality dysfunctions. The IPDE identified persistent features such as dissemination of identity, fear of abandonment and emotional deregulation. The female participants obtained higher scores in articles related to the limit and histrionic features, while the males showed greater impulsivity and antisocial characteristics. The study recommended incorporating the IPDE in psychiatric evaluations informed by trauma. Han et al. (2018) used the IPDE to evaluate a cohort of imprisoned individuals with high levels of child adversity. The findings showed that trauma -related features, such as aggression and emotional numbness, prevail and vary according to gender. The IPDE captured these subtleties, with females that show high dependence and anxiety, while men obtained higher scores in narcissism and Antisociality This study illustrated the usefulness of the IPDE in forensic and correctional environments.
5. Zanarini et al. (2017) focused on the diagnostic concordance between the IPDE and clinical interviews for the borderline personality disorder (BPD). They found strong correlations between the characteristics of BPD and the ASES, such as emotional abuse and negligence. The specific gender analysis revealed that women with ACE reported more frequent interpersonal and interpersonal instability, while men were more prone to aggression and withdrawal. The structured framework of the IPDE allowed a consistent identification of personality pathology influenced by trauma.
6. Widiger and Samuel (2005) reviewed the dimensional use of the IPDE in the capture of maladaptive features that arise from early trauma. They proposed that a dimensional approach allows better

detection of subclinical features and common patterns in trauma survivors. Gender differences arose in emotional regulation and social expression, and females often obtain high affective lability and interpersonal sensitivity, and men in detachment and suspicion. His work advocated the most nuanced and conscious use of IPDE gender in trauma research.

## **CHAPTER 3**

### **METHODOLOGY**

#### **3.1 Aim**

To study the influence of childhood trauma on personalities of males and female in young and adult adults.

#### **3.2 Objectives**

1. Study gender differences in young adults for trauma and children's personalities
2. Study gender differences in adults for childhood trauma and personalities
3. Study the relationship between children's trauma and personalities about women among young and adult adults.
4. Study the relationship between children's trauma and personalities in men among young and adult adults.

#### **3.3 Hypothesis**

H1. There will be a significant gender difference between children's trauma and personalities among young adults.

H2. There will be a significant effect of child trauma on personality

H3. There will be a significant gender difference between children's trauma and personalities among adults.

H4. There will be a significant relationship between children's trauma and personalities among women with young adults and adults

H5. There will be a significant relationship between children's trauma and personalities among adult and adult men

#### **3.4 Sample**

The study will include a total sample of 200 subjects, with the same representation of gender and age groups. The sample will be divided into two main age categories: • Young adults (18-25 years): This group will consist of 50 men and 50 women, for a total of 100 subjects. • Adults (26-39 years): This group will also consist of 50 men and 50 women, for a total of 100 subjects.

#### **3.5 Research design**

This study will use a transverse quantitative research design to examine the influence of child trauma on personality development in young adults (18-25) and adults (26-39), with an approach to gender differences. Its objective is to explore how early adverse experiences affect personality traits, such as emotional regulation, interpersonal functioning and behavioral tendencies in different age and gender groups. The data will be collected in a single point in time using the Children's Experiences Questionnaire (ACE) (ACE) and International Personality Disorder (IPDE). The independent variable between men and women in young and adult adults will be child trauma and the dependent variable will be the development of personality.

#### **3.6 Tools used**

The study used the following tests to measure the development of child trauma and personalities.

1. 0.70 to 0.88, indicating a strong internal and moderate consistency to High reliability of test-retest over

time ( $\kappa = 0.64-0.78$ ). The questionnaire also shows strong validity, with high construction validity, since ACE scores are significantly associated with mental and physical health results, and predictive validity, as the highest scores correlate with a greater risk of conditions such as depression, anxiety and chronic diseases. In addition, it is aligned with other validated trauma measures, such as the Child Trauma (CTQ) questionnaire. However, limitations include their dependence on retrospective self-report, which can be affected by memory bias and its lack of inclusion of adversities such as bullying, community violence and economic difficulties. Despite these limitations, the ACES questionnaire remains a valuable tool to study the long-term psychological and physiological impacts of the adversity of early life, particularly in populations as young adults with migraines.

**2. International Personality Disorder (IPDE) Exam:** The International Personality Disorder (IPDE) exam is a structured clinical interview used to evaluate personality disorders based on criteria DSM-5 and ICD-10. Studies have reported a reliability between moderate to excellent evaluators, with Kappa ( $\kappa$ ) values that vary from 0.62 to 0.94, and the reliability of test-treatment between 0.58 and 0.84, indicating good stability over time. Its internal consistency, measured by the Alpha of Cronbach, varies according to the category of personality disorder, but generally falls between 0.65 and 0.85, which reflects the acceptable consistency for a strong consistency. In terms of validity, the IPDE demonstrates construct validity, since it correlates well with other personality disorder evaluations established as SCID-II and MMPI. However, its reliability can fluctuate depending on the specific disorder evaluated, and the agreement between evaluators can be inconsistent due to the subjective interpretations of the clinician. In addition, its categorical approach has been criticized for lack of dimensional precision, since there are personality traits in a continuum. Although the IPDE remains a widely recognized tool to diagnose personality disorders, their reliability and validity are not universally accepted, and alternative dimensional models have been suggested such as potentially more precise approaches for personality evaluation.

## CHAPTER: 4

### RESULT

The study has tried to explore the relationship between the variables: children's trauma and personalities in different adult and adult groups

#### 4.1 Gender differences between variables

**Table 1. Children and personalities Gender difference in young adults**

Variable	Female mean	Male Mean	Female (SD)	Male (SD)	p-value	Interpretation
paranoid	3.1	3.64	1.32	1.41	0.051	Not significant
Schizoid	4	4.62	1.82	1.71	0.795	Not significant
dissocial	2.82	3.18	1.76	1.59	0.008	Significant
impulsive	2.48	2.16	1.34	1.29	0.951	Not significant
borderline	2.32	2.22	1.18	1.26	0.160	Not significant
histrionic	2.58	2.78	1.27	1.21	0.364	Not significant
anankastic	3.86	4.2	1.69	1.06	0.829	Not significant
anxious	3.52	2.78	1.23	1.35	0.046	Significant
dependent	2.94	3.02	1.34	1.39	0.110	Not significance

ACE	2.62	2.86	2.32	2.34	0.156	Significant
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There are significant gender differences in some personality traits in young adults. • Men obtained significantly higher scores in dissocial features. • The females obtained significantly higher scores in anxious features. However, there is no significant gender difference in ACE scores, which means that both sexes reported similar levels of child adversity. So, the hypothesis that declared that there will be a different significant genre between childhood trauma and personalities among young adults is partially correct.

**Table 2. Children's trauma and personalities Gender difference in adults**

Variable	Female mean	Male Mean	Female (SD)	Male (SD)	p-value	Interpretation
paranoid	2.84	3.1	1.39	1.65	0.014	Significant
Schizoid	4.78	4.34	1.55	1.89	0.828	Not significant
dissocial	3.08	3.34	1.60	1.68	0.027	Significant
impulsive	2.36	2.36	1.24	1.19	0.002	Significant
boderline	2.44	2.18	1.18	1.22	0.000	Significant
histrionic	2.74	2.96	1.61	1.42	0.765	Not significant
anankastic	4.14	3.36	1.91	1.33	0.004	Significant
anxious	2.64	2.84	1.53	1.36	0.000	Significant
dependent	3.08	2.74	1.39	1.27	0.000	Significant
ACE	2.12	2.02	2.20	1.91	0.000	Significant

The previous table of the table shows that females of gender difference obtain a significantly higher score than males in traits such as paranoid, impulsive, limit, anankastics, anxious and dependent, as well as in ACE scores. The P values for these features are all  $<0.05$ , indicating statistically significant gender differences. The men, on the other hand, obtained higher scores only in the dissocial feature. Therefore, our hypothesis shows that there will be a different significant genre between childhood trauma and personalities among adults

## 4.2 Relationship between variables

**Table 1. Correlation between children's trauma and personalities in females among young and adult adults (Young adults)**

Personality Trait	Correlation Coefficient (r)	p-value
Trait 1	<b>0.35</b>	<b>Sig***</b>
Trait 2	-0.21	Not Sig***
Trait 3	0.04	Not Sig***
Trait 4	<b>0.16</b>	<b>Sig***</b>
Trait 5	<b>0.25</b>	<b>Sig***</b>
Trait 6	<b>0.29</b>	<b>Sig***</b>
Trait 7	0.10	Not Sig***
Trait 8	<b>0.29</b>	<b>Sig***</b>

Trait 9	0.14	Not Sig***
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(Adults)

Personality Trait	Correlation Coefficient (r)	p-value
Trait 1	<b>0.27</b>	<b>Sig***</b>
Trait 2	0.14	Not Sig***
Trait 3	0.16	Not Sig***
Trait 4	<b>0.34</b>	<b>Sig***</b>
Trait 5	<b>-0.28</b>	<b>Sig***</b>
Trait 6	<b>-0.18</b>	<b>Sig***</b>
Trait 7	-0.10	Not Sig***
Trait 8	<b>-0.42</b>	<b>Sig***</b>
Trait 9	-0.25	Not Sig***

According to the findings, childhood trauma (ACE) was significantly associated with various personality traits in young adult females, including Trait 1 and Traits 4 ( $r = 0.35$ ,  $p = 0.05$ ), Trait 5 by Prismaq (5,100 children per 1000), Trait 6 ( $R = 0.29$ , parental interest rates were low, but high for each type) and Trait 8 (reported rate was high.) Higher levels of childhood trauma are associated with higher scores in personality traits, suggesting that young adult females who have experienced significant and intense trauma may possess a greater chance of developing these characteristics. Such results reveal a strong connection between early trauma and changes in one's personality, particularly in young women. Childhood trauma (ACE) was also significantly associated with traits in adult females, unlike the other groups. Trait 1 had a p value of 0.27, whereas trait 4 indicated r value for similar traits. However; traceable to trait 5 has remarked that trait quality showed significant differences between relative traits and traits: trait 6 had relatively weak correlations but not as strong evidence as reported by Tra. Specifically, Trait 1 and Trait 4 were positively related, but Traits 5, 6, and 8 were negatively related. A possible adaptive response may be explained by the correlation between positive and negative outcomes, which suggests a connection between increased childhood trauma and lower scores in these traits as adults mature. Such adaptive changes might be a reflection of the way in which adult females develop skills for emotional regulation or resilience, with the aim of mitigating the impact of trauma on aspects of personality.

**Table 2. Correlation between children's trauma and personalities in males among young and adult adults (Young adults)**

Personality Trait	Correlation Coefficient (r)	p-value
Trait 1	0.003	Not Sig***
Trait 2	-0.029	Not Sig***
Trait 3	-0.015	Not Sig***
Trait 4	0.014	Not Sig***
Trait 5	-0.237	Not Sig***
Trait 6	0.118	Not Sig***

Trait 7	-0.119	Not Sig***
Trait 8	0.150	Not Sig***
Trait 9	0.101	Not Sig***

## (Adults)

Personality Trait	Correlation Coefficient (r)	p-value
Trait 1	-0.185	Not Sig***
Trait 2	0.273	Not Sig***
Trait 3	0.097	Not Sig***
Trait 4	0.080	Not Sig***
Trait 5	0.184	Not Sig***
Trait 6	0.109	Not Sig***
Trait 7	<b>0.403</b>	<b>Sig***</b>
Trait 8	0.255	Not Sig***
Trait 9	0.246	Not Sig***

In adult males, childhood trauma (ACE) was significantly associated with Trait 7 ( $r = 0.403$ ,  $p = 0.137$ ), as indicated by the results. Higher levels of childhood trauma are associated with higher scores in Trait 7, suggesting that the effects of trauma may be more pronounced on adult males. Childhood trauma was not significantly associated with any other personality trait among these participants, indicating that Trait 7 is particularly sensitive to such events. Despite this, there was no significant connection between childhood trauma (ACE) and any of the personality traits in young adult males. The absence of a direct correlation suggests that childhood trauma does not seem to have any bearing on the personality traits of young adult males.

## CHAPTER - 5 DISCUSSION

The present study aimed to examine the influence of child trauma on personality traits between gender and age groups, using a sample of 200 individuals equally divided into young adults (18-25) and adults (26-39), with balanced representation of men and women. Four main hypotheses were tested, addressing gender differences and trauma correlations -personality in these groups. The use of the IPDE tools questionnaire allowed a structured analysis of the long -term psychological effects of early adversity. The results revealed that among young adults, there were limited but significant gender differences. The men obtained significantly higher scores in the dissocial features, while the females obtained significantly higher scores in the anxious features. ACE scores did not differ significantly according to the genre in this group, which suggests comparable child trauma levels. Therefore, the first hypothesis was partially supported. Among adults, gender differences were more pronounced. The females reported significantly higher scores in multiple features (paranoids, impulsive, limit, anankastics, anxious and dependent), as well as significantly higher ACE scores. The men obtained higher scores only in the dissocial feature. This confirms the Second hypothesis that gender differences are significantly observable in adulthood. With respect to the third hypothesis, the correlation between children's trauma and personality features among women did not yield any statistically significant results. Although the HAVE RATING showed the highest

correlation in young adults and traits\_8 showed a reversal from positive to negative through age, none of the features was statistically significant at the level of 0.01. This leads to the conclusion that the third hypothesis is not compatible. In contrast, the results for men partially supported the fourth hypothesis. The trait\_7 in adult men showed a statistically significant positive correlation with childhood trauma ( $R = 0.403$ ,  $p = 0.0037$ ). No other trait in any of the age groups reached importance. This finding highlights a potential delayed influence or dependent on the age of trauma in the development of personality in men. These findings underline the importance of considering both age and gender by evaluating the psychological impact of early adversity. While gender differences in personality traits become more pronounced with age, the effect of trauma on personality seems to be selective and develops clearly in adulthood.

**5.1 Limitation** Despite producing significant ideas, the study had several limitations that should be recognized: Sample size: although the sample was balanced in terms of age and gender, it may not have been large enough to detect more subtle or complex relationships between the variables, particularly in subgroup analysis. Self-report measures: ACE and IPDE evaluations were based on the self-report of the participants, which can introduce a bias due to the inaccurate memory or social desire, especially in relation to the traumatic experiences of childhood. Transversal design: As the data was collected in a single point in time, causal inferences cannot be drawn on the long-term impact of childhood trauma on personality development. Training coding: Personality traits were labeled numerically (for example, trait\_1, trait\_2), which can limit clarity and psychological interpretation unless they explicitly align with recognized personality constructions. Limited diversity: The study used a gender-basic framework and did not take into account cultural, ethnic or socio-economic diversity, which can affect both exposure to trauma and the expression of personality.

**5.2 Suggestions for more research** To develop current findings and address these limitations, future research should consider the following: Larger and more representative samples: including participants from various origins and the increase in sample size could improve statistical power and generalization of findings. Longitudinal approach: following people over time would allow a better understanding of how child trauma shapes personality throughout useful life and through different stages of development. Mixed method design: The combination of qualitative interviews with quantitative evaluations can provide a deeper vision of the personal context of trauma and personality development. Dimensional evaluation tools: The use of personality measures that capture traits throughout a continuum (for example, the large five) can offer more nuanced interpretations compared to categorical approaches. Inclusion of non-binary and diverse identities: expanding the study to include non-binary and gender individuals would improve the inclusion and understanding of how gender identity is crossed with trauma and personality.

## **CHAPTER 6**

### **CONCLUSION**

This study explored the influence of child trauma on personality traits on men and women in two age groups: young adults (18-25) and adults (26-39). A total of 200 participants were evaluated using the ACE questionnaire for exposure to trauma and IPDE for the evaluation of personality trait. The objective was to evaluate gender differences in trauma and personality and examine whether child trauma is significantly correlated with personality traits in men and women in age groups. The results revealed strong gender-based differences in adults, more modest differences in young adults and a significant correlation of trauma-personality only in adult men for a feature. Four hypotheses were examined. The first hypothesis, which predicts significant gender differences among young adults, was partially supported: the notable

differences were found only in dissocial and anxious features. The second hypothesis, which expected such differences in adults, was fully supported, since the females obtained significantly higher scores in multiple features and ACE scores. The third hypothesis, regarding the relationship between trauma and personality in women, was not supported, since no statistically significant correlations were found. The fourth hypothesis was partially supported, with adult men who show a significant positive correlation between the\_7 and ACE. These results emphasize the importance of age and gender in moderation of the impact of childhood trauma on personality development.

- **Hypothesis testing :**

1. Partial support for Hypothesis 1. While there are gender differences in certain personality traits, childhood trauma (ACE) is not present in young adults.
2. The Hypothesis 2 is supported based on the fact that childhood trauma has significant consequences for certain personality traits in both females and adult males.
3. Hypothesis 3 is supported. There are significant gender differences in childhood trauma and personality traits among adults.
4. Hypothesis 4 is supported. Childhood trauma is strongly linked to the personality traits of both young and adult females
5. Hypothesis 5 is partially supported. Childhood trauma is significantly related to Trait 7 among adult males but not among young adult males or other personality traits.

- **Limitations:**

There are several drawbacks to this quantitative study. Due to the cross-sectional design, causality between childhood trauma and personality traits cannot be established, leading to conclusions that only link associations. Self-report questionnaires may result in social desirability or recall errors, which can impact the accuracy of responses. The sample's insufficient diversity in terms of age, ethnicity, and socioeconomic status may result in incomplete generalizations. Also, this study examined only a small sample of personal characteristics rather than other psychological or environmental factors that could have affected relationships

- **Future recommendations:**

In future studies, it is crucial to use longitudinal designs to better understand the impact of childhood trauma on personality development and establish causality. Multi-method assessment approaches, such as clinical interviews or observational data, may be utilized to mitigate biases that are inherent in self-reporting. Increasing the diversity of the sample would make the results more general. Furthermore, further investigation into other psychological elements such as emotional control, coping mechanisms, and resilience is required to gain a deeper comprehension of the relationship between trauma and personality.

## Chapter 7

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