



## **Unresolved Shadows: Exploring the Impact of Childhood Abuse on Anger in University Students and the Mediating Role of Well-being**

Junaid Hassan Ayaz (Corresponding Author)

Xi'an Jiaotong University, China. Email: [juanidktk236@gmail.com](mailto:juanidktk236@gmail.com)

Robi Khattak

MPhil Scholar, Kohat University of Science and Technology, Pakistan.

Email: [robikhattak771@gmail.com](mailto:robikhattak771@gmail.com)

Asna Nadeem

University of Karachi, Pakistan. Email: [asnanadeem45@gmail.com](mailto:asnanadeem45@gmail.com)

Asad Ashfaq

Riphah International University, Pakistan. Email: [asadashfaq106@gmail.com](mailto:asadashfaq106@gmail.com)

Rubia Batool

Psychology Lecturer at Capital University of Science and Technology, Pakistan.

Email: [rubiabatoollrubia@gmail.com](mailto:rubiabatoollrubia@gmail.com)

Saleha Qamer

PhD Scholar (Clinical Psychology), Foundation University School of Science and Technology, Pakistan. Email: [salehaqamer64@gmail.com](mailto:salehaqamer64@gmail.com)

Aneela Hakeem Rajpar

University of Karachi, Pakistan. Email: [aneelahakeem@gmail.com](mailto:aneelahakeem@gmail.com)

Shafaq Safdar

Aga Khan University, Pakistan. Email: [Shafaq.snasreen@gmail.com](mailto:Shafaq.snasreen@gmail.com)

Awais Ur Rahman

Abdul Wali Khan University Mardan, Pakistan.

Email: [sultanawais4344@gmail.com](mailto:sultanawais4344@gmail.com)

### **Abstract**

**Background:** Child abuse in childhood has been associated with different psychological effects; that is anger concerning emotion management and affiliating with other people. This relationship also moderated by psychological wellbeing. The purpose of this study was to determine the relationship between childhood abuse and anger among university students with elementary information optional Psychological Wellbeing among university students playing a moderating role.

**Aim:** To investigate the relationship between childhood abuse, anger, and psychological wellbeing in university students and determine the mediating role of wellbeing.



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**Method:** An online survey method adopted and the participants were 361 university students' self-administered questionnaires of childhood abuse, anger and psychological well-being. Multiple regression and process analyses conducted to compare the direct and indirect effects of childhood abuse on anger with psychological wellbeing as the mediator.

**Results:** The findings showed that childhood abuse had positive relationship with anger, ( $r = 0.81$ ,  $P < 0.01$ ) and negative relationship with psychological wellbeing, ( $r = -0.79$ ,  $P < 0.01$ ). Psychological wellbeing significantly mediated the relationship between childhood abuse and anger (Indirect effect: Although the women showed a higher wellbeing which resulted in less anger, the value of  $\beta = 0.043$ , 95% CI [0.022, 0.080],  $p = 0.002$ ).

**Conclusion:** The study evidences that childhood abuse strongly predicts anger in university students and that the students' psychological wellbeing partially mediates this process. Psychological improvement might be beneficial in decreasing anger among adults who abused as children discovering interventions for them.

**Keywords:** Childhood abuse, anger, psychological wellbeing, university students, mediation analysis.

## Introduction

Childhood abuse that includes physical, emotional and sexual abuse affect known to predispose one to mental and emotional regulation disorders in the later years (Odaci et al., 2020). Adverse child experiences ACEs have a significant impact on psychological development of a person, and most of the time cause ongoing problems with emotional dysregulation, of which anger is a part (Win et al., 2021). Specifically, negative consequences of abuse that occur early in development can include poor coping styles for handling emotions which includes increased level of aggression and poor anger control (Lagdon et al., 2021; Jin et al., 2023). The author was arguing that due to the trauma, which happened in childhood, when people become college students, they develop different vulnerabilities, that impact on emotional regulation (Downey & Crummy, 2022). Since one of the main emotions closely related to childhood abuse is anger, they have found out that it quite a problem in patients who have been through a lot of abuse (Reiser et al., 2021). Liu et al. (2022), brought together many articles that point to the fact that childhood maltreatment is a four risk factor for emotional dysregulation or exaggerated anger and aggression. Studies in this domain indicate that people, who have experienced childhood abuse, lack the ability to modulate their emotions because the corresponding neural circuits are impaired. This dysregulation results therefore to increased affective reactivity that may manifest thus also as increased irritability, increased impulse bursts, increased frustration, etc. Such emotional disturbances can also aggravate the academic experience, interpersonal relationships, and the individual's quality of life, before, during, and after their education; therefore, health and disease (Zhou & Zhen, 2022).

University years as the years of multiple social, academic, and personal changes may precipitate the interpersonal expression of unresolved abused anger in clients with a history of childhood maltreatment (Baker et al., 2022). At this phase university students experience pressure in academic performance, social



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pressure and identity formation. In particular, such stressors may increase intra-individual emotional sensitivity for people with a background of abuse (Kircaburun et al., 2020). These executively impaired abilities to regulate anger may hamper academic performance, limit ability to develop satisfying interpersonal relationships, cause problems to maneuver the challenges of university life. Childhood trauma dynamics exacerbate psychological issues related to affectional storms, and students struggling with childhood trauma cannot cope with academic and social settings (Kircaburun et al., 2021).

Self-acceptance emerges as the only psychological characteristic that fully mediate the relationship between early childhood abuse and anger (Duan et al., 2023). Regarding well-being, which includes life satisfaction, emotional coping, self-esteem and quality coping styles, it postulated that well-being has the potential in countering the adverse effects of early trauma (Zhang et al., 2023). Mental health ES positively relates to affect regulation and may mean that people who have satisfying and high levels of psychological well-being have more possibilities to regulate feelings of anger (Ye et al., 2024). Moreover, it can also be postulated that people who experience higher level of well-being, show less symptoms of psychological distress, again including symptoms related to depression, anxiety, and anger, because what can be referred as 'healthier' coping styles are stronger in them (Dube et al., 2023). With reference to university students who abused during childhood, positive well-being can said to be necessary protective factor that can help offset adverse psychological consequences of abuse (Söyünmez & Seki), 2024).

On the other hand, low psychological well-being increases probability of showing high level of emotional distress that includes fury and rage (Sigurvinsdottir et al., 2021). As already pointed out, poor well-being can stem from low self-esteem, inability to cope with stress, as well as broken health resulting from poor coping with calamities in the past (Burlaka et al., 2023). In university students, lack of emotional well-being can magnify different maladaptive emotional responses that may cause higher susceptibility to mood and anxiety disorders like depression, anxiety, and PTSD (Aas et al., 2024). Negative dispositions of low well-being and emotional dysregulation influence the growth of students effectively cope with demands of university life, as well as academic success. Therefore, enhancing well-being might be able to interruption this progression: consequently, the individual may be capable effectively cope with the emotional damages of child abuse (Kalmakis et al., 2020).

Childcare abuse, anger, and well-being are a clear indication that students in universities need to receive attention to change such aspect so that they may gain better health and concentration in their class work (Tzouvara et al., 2023). Therapies, mindfulness, and strength-based stress reduction, stress-reduction programs may turn out to be highly useful within schooling processes, in order that students could easily overcome the early trauma-related emotional difficulties (Cao et al., 2023). The major improvement that can achieved through these interventions is to ensure proper psychology among students resulting from more constructive ways of handling stress instead of the anger because of stress (Wu et al., 2023). As such, it should note that talking about such a concept as well-being allows universities to design relevant environments and promote students' enhanced emotional learning, trauma recovery, as well as academic and



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personal successes (Ravi et al., 2023). Besides, such an approach can contribute to the change of general social interaction and interpersonal relationships, making the university experience of students who abused in childhood more pleasant (Chen & Qin, 2020).

### **Problem Statement**

The psychological effect of childhood abuse persists in adulthood; angry people found. The plan of the present research is to investigate the mediating effect of psychological wellbeing between childhood abuse and anger levels in university students.

### **Significance of Study**

The study is important in as much as it explores the emotional impact of childhood physical abuse amongst university students. The present paper is relevant to the research agenda by examining the link between post-traumatic stress symptoms PTSS, anger, and well-being, to clarify how childhood stress influences anger in the period of university, a significant life stage. The conclusions of the current research could use to design effective prevention and intervention strategies dedicated to improving emotional self-regulation of students who abused. By learning how well-being functions as a shield in this relationship, universities might be able to start creating the physical environment as well as organizational culture that supports the resilience and recovery. The aim of this research is to improve students' experience, particularly to examine the emotional aspect of students with history of child abuse in order to have positive impact on their academic performance and wellbeing.

### **Aim of Study**

The aim of the present study is to establish the correlation between childhood abuse and anger among university students with psychological well-being as the mediator. Namely, the present research aims to determine the moderating or mediating role of well-being as to the relationship between childhood trauma and anger/emotional self-regulation. This paper's goal will be to provide empirically grounded suggestions for practices that can help students cope with emotional issues that may arise in university since it explores both the ways in which childhood abuse affects anger and the role that well-being might play in reducing these effects.

### **Methodology**

This study therefore used a quantitative cross-sectional research design using the cross-sectional approach was suitable for analyzing patterns and possible moderating impact of well-being on link between abuse and anger, as well as the possibility of using online survey to reach a large number of participants.

Participants in the study were university students who abused in any way during their childhood; physical abuse, sexual abuse, emotional abuse, or neglect. Participants were recruited purposively and that the non-probability sample included the number of cases determined using G\*Power Calculator. Of the questionnaire respondents 361 stated on the questionnaire that they met inclusion criteria e.g. being aged 18 years or above and having been abused as a



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child. The exclusion criteria used were those who have some psychiatric disorder, those who already enrolled in an anger management therapy and those with substance abuse or criminal records.

In measure, the study used several instruments to establish the levels of the major variables. The demographic sheet asked simple questions about the participant's age, gender, education level and attainment, marital status, occupation, income, and ethnicity. Childhood abuse was assessed using the Childhood Trauma Questionnaire (CTQ) from Bernstein et al.(1994) this is a self-report tool that has 28 items aimed at measuring five forms of abuse with responses rated on a 5 Likert scale. State-trait anger was measured using Spielberger et al.'s (1999) State-Trait Anger Expression Inventory-2 (STAXI-2) that comprised 28 items, rated on a 4-point Likert scale, tapping four dimensions of anger. Well-being was measured using the WHOQOL-BREF (WHOQOL Group, 1998), which consisted of 18 items across four domains: physical, psychological, social wellbeing and the environment with responses measured on a Likert scale from 1 to 5. Cronbach's alpha coefficient ranging from 0.80 to 0.95 established for these instruments in prior studies proving its reliability for the present study.

The data analyzed using Statistical Package for the Social Sciences software version 28. Descriptive statistics used in this study therefore consisted in measures for central tendency, spread and shape including the mean, standard deviation, range, skewness and kurtosis that aimed to describe the sample and summarize the distribution of the data. Inferential analysis was done using Cronbach's alpha to test the reliability, Pearson product moment correlation to determine the relationship, linear regression to examine well-being as a moderator of the relationship between childhood abuse and anger, and independent sample t-test/analysis of variance to check the differences because of demographic variables. Issues of ethics conserved in the study and therefore IRB used to conform to the ethical standards. Participants' permission was sought to guarantee they understood all the participant rights such as the right to quit the study at will. The study conducted to ensure anonymity of the participants and ensured that feasible and adequate participant support services would offered to the participants.

## Results

The choice of the participants involved the administration of questionnaires, accompanied by consent forms; demographic sheets and scales; and assurance of voluntary participation, anonymity and psychological support where necessary; data collection tool analysed with SPSS 22; A few challenges observed as some participants complained that some of the questionnaires were time-consuming.

Table 1: Demographic Information (N = 361)

Demographics	<i>f</i>	%age	Demographics	<i>f</i>	%age
Age			Middle	35	9.7
0	1	.3	Matric	71	19.7
17	4	1.1	Intermediate	47	13.0
18	17	4.7	Bachelor (2-Years)	45	12.5
19	35	9.7	Bachelor (4-Years)	38	10.5





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20	46	12.7	Master (2-Years)	49	13.6
21	79	21.9	MS/M.Phil.	14	3.9
22	73	20.2	Ph.D.	11	3.0
23	60	16.6	<b>Mother Education</b>		
24	16	4.4	No Education	153	42.4
25	9	2.5	Primary	36	10.0
26	5	1.4	Middle	29	8.0
27	3	.8	Matric	53	14.7
28	1	.3	Intermediate	35	9.7
32	1	.3	Bachelor (2-Years)	22	6.1
Missing	11	3.0	Bachelor (4-Years)	16	4.4
<b>Gender</b>			Master (2-Years)	12	3.3
Male	193	53.5	MS/M.Phil.	3	.8
Female	168	46.5	Ph.D.	2	.6
<b>Marital Status</b>			<b>Attachment to Parents</b>		
Married	33	9.1	To Father	26	7.2
Unmarried	328	90.9	To Mother	103	28.5
<b>Family System</b>			To Both Parents	218	60.4
Joint	199	55.1	To None Parent	13	3.6
Nuclear	162	44.9	Missing	1	.3
<b>Father Education</b>					
No Education	32	8.9			
Primary	19	5.3			

The distribution of the participants in terms of demographic characteristics where 90.9% of the participants are unmarried and education levels differs. One fourth of those surveyed has a mother with no education at all (24.4%).

Table 2: Family based Demographic Information (N = 361)

Demographics	f	%age	Demographics	f	%age
<b>Parents Status</b>			Rs.100,000 to less than Rs.150,000	41	11.4
Both Alive	326	90.3	Rs.150,000 to less than Rs.200,000	18	5.0
Both Dead	7	1.9	Rs.200,000 or more	17	4.7
Father Died	18	5.0	Missing	2	.6
Mother Died	7	1.9	<b>Study Hours</b>		
Missing	3	.8	Do not study extra hours	90	24.9
<b>Parent Living Status</b>			1 hours to less than 3 hours	179	49.6
Living Together	349	96.7	3 hours to less than 5 hours	68	18.8
Divorced	5	1.4	5 hours to less than 7 hours	14	3.9
Separated	5	1.4	7 hours or more	10	2.8
Missing	2	.6	<b>Degree program</b>		
<b>Study Performance</b>			Bachelor (2-Years)	17	4.7
Below Average	35	9.7	Bachelor (4-Years)	299	82.8
Average	212	58.7	Master	21	5.8



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Above Average	113	31.3	M.Phil.	16	4.4
Missing	1	.3	Ph.D.	7	1.9
<b>Spend Time</b>			Missing	1	.3
Friends	76	21.1	<b>Birth Order</b>		
Family	134	37.1	First	110	30.5
Games	15	4.2	Second	66	18.3
Alone	62	17.2	Middle	93	25.8
Internet	73	20.2	Youngest	67	18.6
Missing	1	.3	Only Child	7	1.9
<b>Family Income</b>			Other	16	4.4
Less than Rs.10,000	12	3.3	Missing	2	.6
Rs.10,000 to less than Rs.25,000	45	12.5	<b>Area Were Raised</b>		
Rs.25,000 to less than Rs.50,000	112	31.0	Rural Area	165	45.7
Rs.50,000 to less than Rs.100,000	114	31.6	Urban Area	159	44.0
			Suburban Area	36	10.0
			Missing	1	.3

The findings of demographic analysis based on the family background information indicates that 90.3 percent of the participants have both their parents alive and 55.1 percent of participants belongs to joint families. Further, the majority of the participants do 1 to 3 hours of extra study duration (49.6%).

Table 3: Correlations, Means, and Standard Deviations among Adverse Childhood Experiences (ACEs), Aggression, and Psychological Wellbeing

Sr	Variable	M	SD	1	2	3
1	Adverse Childhood Experiences	68.03	6.36	-	.81**	.79**
2	Aggression	74.40	3.82	-	-	.88*
3	Psychological Wellbeing	64.55	6.93	-	-	-

The following significant positive coefficients obtained ACEs × aggression,  $r = 0.81$ ,  $p < 0.01$ ; ACEs × psychological wellbeing,  $r = 0.79$ ,  $p < 0.01$ . The raw scores for ACEs, aggression, ACEs, and psychological wellbeing evidence moderate to high prevalence in aggression across the participants.

Table 4: Mediation Analysis: The Role of Aggression in the Relationship between Adverse Childhood Experiences (ACEs) and Psychological Wellbeing for Males

Step	Effect	Standardized Beta	SE	95% CIp
Direct Effect (ACEs → Psychological Wellbeing)	-0.004	-0.158	0.041	[-0.136, 0.007 -0.019]
Indirect Effect (ACEs → Aggression → Psychological Wellbeing)	0.003	0.164	0.022	[0.022, 0.002 0.080]
Total Effect	-0.007	-0.004	0.030	[-0.074, 0.006]



The mediation analysis also shows that there is a direct negative and statistically significant relationship between ACEs and psychological wellbeing ( $\beta = -0.158$ ,  $t = 3.002$ ,  $p = 0.007$ ) and there is a significant indirect effect through aggression ( $\beta = 0.164$ ,  $t = 3.344$ ,  $p = 0.002$ ). The total effect ( $\beta = -0.004$ ,  $p = 0.006$ ) expressed that aggression significantly mediate the link, significant greater impact size.

## Discussion

Another important issue, which is the connection between childhood abuse and the level of anger among university students should be further discussed because; the negative impact of early trauma in one's life could impact them for the rest of their college life. Following studies indicates that positive correlation between child abuse and anger-related disorders in adulthood (Goemans et al., 2023). Physical and emotional abuse of children have long-term lasting effects, as the feeling of helplessness and hopelessness in the bosom of their parents leads to anger and severe aggression at subsequent discrete of the person's life (Tzouvara et al., 2023). This view supported by the results of the current study that reveal a strong and positive relationship between experiences of childhood abuse and level of anger among university students.

Moreover, the competencies of psychological wellbeing in this interrelation are important for the assessment of how people deal with the psychological effects of abuse. Positive psychological assets, which include self-fulfilling, life satisfaction and emotional positive assets including positivity, optimism and hardness reported to lessen negative impact of the trauma including anger (Goemans et al., 2023). As with the previous self-report measure of anger, the current study found that higher levels of psychological well-being found significantly relate to lower levels of anger, indicating that individuals with higher level of well-being better placed to deal with the emotional consequences of child abuse. This is further in agreement with Kakaje et al. (2022), work that pointed to the fact that psychological well-being protects children against the impacts of trauma from childhood.

Another important finding of the present work is that psychological wellbeing could mediate in the link that connect childhood abuse and anger. This implies that although there might be higher levels of anger resulting from abuse, enhanced psychological wellbeing will put up a better energy to fight this anger. This result can compared to the work of Bérubé et al. (2023), who identified that the resilience factors including the emotional regulation and cognitive reappraisal influence the relationship between the adverse childhood experiences and subsequent emotional consequences, including anger.

However, it is also an important fact that stated variables not directly related to each other but moderated by different extrinsic and intrinsic variables. For instance, people's social support, their emotional coping styles, and the characteristics that define individual personality are some of the factors known to either amplify or minimize possible risks of post-child abuse related emotions (Goemans et al., 2023). In this study, although psychological wellbeing proposed to moderate the association, difference in the level of anger can accounted for by





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other variables including the social support available. Relevant research can be directed to these factors to give a broader perspective on factors that may be useful in overcoming the psychological effects arising from childhood abuse.

The findings of this study have practical suggestions for both academic and clinical environments. Therapeutic and mindfulness based intercessions, stress management and related training including cognitive-behavioral, group, and individual therapy may be effective in dealing with anger problems that root from childhood abusive experiences. These interventions could enable persons to attain higher levels of emotional/school ERP & personal EFF, and therefore better cope with anger thus less chances of appearing emotional dys-regulation & interpersonal difficulties. Woloshchuk et al. (2024), who holds that psychological interventions aimed at improving the quality of the emotional experience may help to reduce negative affect in people with traumatic flash backs such as reflection with the information on the study.

Therefore, in this present work, emphasis is laid on the importance of psychological well-being for the relationship between childhood abuse and anger among university students. Nevertheless, childhood abuse continues to be the strong predictor of anger issues, while the Wellbeing Factors provide the outcome for prevention and assistance. With better understanding of trauma and their impact, subsequent research should assess the interactions between the potential mediators to gain a better understanding about the causes of the trauma related emotional response. Through simultaneously providing evidence for the. Linked to these findings, it may be possible to decrease negative emotional outcome of childhood abuse and enhance better emotional adjustment in adulthood.

### Limitations

The present study used self-reported data, which may be subjected to response bias that may limit the study. Self-reporting is one limitation and the participants' report of childhood abuse and anger might have been biased high or low. Further, the present study lacks a longitudinal research design and, therefore, causal relationship analyses of childhood abuse, anger, and psychological wellbeing in the participants cannot be made. The results would also be significant if longitudinal one to give more accurate picture of these processes could replace cross-sectional data.

### Recommendations

For future research, studies should be made with respect to anger and psychological health with focus on sexual abuse, emotional abuse and physical abuse. Furthermore, psychological variables that may help in the treatment of the subject of anger should be tried out to assess the extent to which it may assist the former child abuse victims. Further research might also explore other possible mediators and/or moderators including social support and coping styles, how they moderate the link between childhood abuse and anger in adulthood.

### Conclusion

This study reveals the positive correlation between childhood abuse and anger among university students and stresses on the moderator role of psychological wellbeing. The results imply that improving psychological health would be a



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suitable tactic for decreasing anger in persons with a history of childhood abuse. The limitations of the study should however be noted. The findings of the current study thus have important implications for understanding the emotional impact of childhood abuse, and for the need to continually offer wellbeing programs that could improve on the emotional lives of such individuals.

### References

- Aas, M., Sideli, L., Franceschini, C., Alameda, L., Trotta, G., Coco, G. L., ... & Schimmenti, A. (2024). The role of interpersonal trauma and substance use in mental health: A large population-based study. *Psychiatry research*, 333, 115712.
- Baker, M. R., Nguyen-Feng, V. N., Nilakanta, H., & Frazier, P. A. (2020). Childhood maltreatment predicts daily stressor exposure in college students but not perceived stress or stress reactivity. *Journal of counseling psychology*, 67(1), 79.
- Bérubé, A., Turgeon, J., Blais, C., & Fiset, D. (2023). Emotion recognition in adults with a history of childhood maltreatment: A systematic review. *Trauma, Violence, & Abuse*, 24(1), 278-294.
- Burlaka, V., Hong, J. S., Roberts, A., Graham-Bermann, S. A., Serdiuk, O., & Churakova, I. (2023). Bullying victimization among Ukrainian college students: The role of family communication and satisfaction, corporal punishment and child abuse. *Journal of Family Issues*, 44(4), 1129-1148.
- Cao, G., Wei, X., Liu, J., & Li, X. (2023). The association between childhood trauma and adolescent cyberbullying: chain mediating roles of emotional intelligence and online social anxiety. *Frontiers in psychiatry*, 14, 1184382.
- Chen, C., & Qin, J. (2020). Childhood physical maltreatment and aggression among Chinese young adults: The roles of resilience and self-esteem. *Journal of Aggression, Maltreatment & Trauma*, 29(9), 1072-1091.
- Downey, C., & Crummy, A. (2022). The impact of childhood trauma on children's wellbeing and adult behavior. *European Journal of Trauma & Dissociation*, 6(1), 100237.
- Duan, Z., Feng, Y., Xu, S., Gao, D., Ji, Y., Sun, X., ... & Wang, Y. (2023). The role of childhood left-behind experience on childhood trauma exposure and mental health outcomes: a propensity score matching (PSM) analysis. *Journal of Public Health*, 45(4), 785-793.
- Dube, S. R., Li, E. T., Fiorini, G., Lin, C., Singh, N., Khamisa, K., ... & Fonagy, P. (2023). Childhood verbal abuse as a child maltreatment subtype: A systematic review of the current evidence. *Child Abuse & Neglect*, 144, 106394.
- Goemans, A., Viding, E., & McCrory, E. (2023). Child maltreatment, peer victimization, and mental health: Neurocognitive perspectives on the cycle of victimization. *Trauma, Violence, & Abuse*, 24(2), 530-548.
- Goemans, A., Viding, E., & McCrory, E. (2023). Child maltreatment, peer victimization, and mental health: Neurocognitive perspectives on the cycle of victimization. *Trauma, Violence, & Abuse*, 24(2), 530-548.
- Goemans, A., Viding, E., & McCrory, E. (2023). Child maltreatment, peer



## Vol. 3 No. 1 (January) (2025)

- victimization, and mental health: Neurocognitive perspectives on the cycle of victimization. *Trauma, Violence, & Abuse*, 24(2), 530-548.
- Jin, Y., Xu, S., Hu, Z., Li, J., Li, H., Wang, X., ... & Wang, Y. (2023). Co-occurrence of PTSD and affective symptoms in a large sample with childhood trauma subtypes: a network analysis. *Frontiers in public health*, 11, 1093687.
- Kakaje, A., Al Zohbi, R., Alyousbashi, A., Abdelwahed, R. N., Aldeen, O. H., Alhalabi, M. M., ... & Latifeh, Y. (2022). Post-traumatic stress disorder (PTSD), anger and mental health of school students in Syria after nine years of conflict: a large-scale school-based study. *Psychological medicine*, 52(10), 1923-1933.
- Kalmakis, K. A., Chiodo, L. M., Kent, N., & Meyer, J. S. (2020). Adverse childhood experiences, post-traumatic stress disorder symptoms, and self-reported stress among traditional and nontraditional college students. *Journal of American college health*, 68(4), 411-418.
- Kircaburun, K., Demetrovics, Z., Király, O., & Griffiths, M. D. (2020). Childhood emotional trauma and cyberbullying perpetration among emerging adults: A multiple mediation model of the role of problematic social media use and psychopathology. *International Journal of Mental Health and Addiction*, 18, 548-566.
- Lagdon, S., Ross, J., Robinson, M., Contractor, A. A., Charak, R., & Armour, C. (2021). Assessing the mediating role of social support in childhood maltreatment and psychopathology among college students in Northern Ireland. *Journal of interpersonal violence*, 36(3-4), NP2112-2136NP.
- Liu, F., Zhang, Z., & Chen, L. (2020). Mediating effect of neuroticism and negative coping style in relation to childhood psychological maltreatment and smartphone addiction among college students in China. *Child Abuse & Neglect*, 106, 104531.
- Odacı, H., & Çelik, Ç. B. (2020). The role of traumatic childhood experiences in predicting a disposition to risk-taking and aggression in Turkish university students. *Journal of interpersonal violence*, 35(9-10), 1998-2011.
- Ravi, K. E., Haselschwerdt, M., & Niederhauser, V. (2023). Prevalence and impact of exposure to childhood domestic violence on college students' health and perceived academic success. *Journal of Evidence-Based Social Work*, 20(1), 122-144.
- Reiser, S. J., Power, H. A., & Wright, K. D. (2021). Examining the relationships between childhood abuse history, attachment, and health anxiety. *Journal of health psychology*, 26(7), 1085-1095.
- Sigurvinsdottir, R., Asgeirsdottir, B. B., Ullman, S. E., & Sigfusdottir, I. D. (2021). The impact of sexual abuse, family violence/conflict, spirituality, and religion on anger and depressed mood among adolescents. *Journal of interpersonal violence*, 36(1-2), NP577-NP597.
- Söyünmez, S., & Seki Öz, H. (2024). Childhood traumatic experiences and happiness of nursing students: a mixed methods study. *Child maltreatment*, 29(2), 322-339.
- Tzouvara, V., Kupdere, P., Wilson, K., Matthews, L., Simpson, A., & Foye, U. (2023). Adverse childhood experiences, mental health, and social



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- functioning: A scoping review of the literature. *Child Abuse & Neglect*, 139, 106092.
- Tzouvara, V., Kupdere, P., Wilson, K., Matthews, L., Simpson, A., & Foye, U. (2023). Adverse childhood experiences, mental health, and social functioning: A scoping review of the literature. *Child Abuse & Neglect*, 139, 106092.
- Win, E., Zainal, N. H., & Newman, M. G. (2021). Trait anger expression mediates childhood trauma predicting for adulthood anxiety, depressive, and alcohol use disorders. *Journal of affective disorders*, 288, 114-121.
- Woloshchuk, C. J., Portillo Jr, C., Rodriguez-Crespo, A., De Alba, J., Amador, N. C., & Cooper, T. V. (2024). Protective and risk factors for increased alcohol use in Latinx college students on the US/Mexico border. *Journal of ethnicity in substance abuse*, 23(2), 287-304.
- Wu, C. Z., Zong, Z. Y., Huang, T. T., Yu, L. X., & Sun, Q. W. (2023). Childhood maltreatment influences suicidal behavior: Rumination mediates and regulatory emotional self-efficacy moderates. *Death studies*, 47(7), 784-791.
- Ye, Z., Chung, M. C., & Liu, F. (2024). The concept of self among Chinese university victims of child abuse: an interpretative phenomenological analysis. *Current psychology*, 43(6), 5268-5281.
- Younes, Y., Hallit, S., & Obeid, S. (2021). Premenstrual dysphoric disorder and childhood maltreatment, adulthood stressful life events and depression among Lebanese university students: a structural equation modeling approach. *BMC psychiatry*, 21, 1-10.
- Zhang, Y., Liu, J., Chen, L., Yang, T., Luo, X., Cui, X., ... & Lu, J. (2023). Prevalence of co-occurring severe depression and psychotic symptoms in college students and its relationship with childhood maltreatment. *Child Abuse & Neglect*, 146, 106470.
- Zhou, X., & Zhen, R. (2022). How do physical and emotional abuse affect depression and problematic behaviors in adolescents? The roles of emotional regulation and anger. *Child Abuse & Neglect*, 129, 105641.