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# THE EFFECTS OF CHILDHOOD TRAUMA AND HEALTH-RELATED QUALITY OF LIFE ON EMOTIONAL WELL-BEING AND SELF-ESTEEM

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## ABSTRACT

Studies of college students' emotional wellbeing paint a dismal image. The researchers don't seem to be in much better shape. Many graduate students report experiencing difficulties with stress, social isolation, despair, fatigue, and other bad symptoms. The gender gap on the factors was also explored in this research. Females have worse self-reported mental health than males and report receiving less social support. Financial assistance and gender were used as independent variables in a two-way analysis of variance (ANOVA). All dependent variables underwent analysis for both main and interaction effects. In our research, we found support for a large number of possibilities. Research students who do not have fellowships were shown to be significantly different from those who did.

**KEYWORDS: Emotional, Wellbeing, Mental, Social, Independent**

## INTRODUCTION

Studies of college students' emotional wellbeing paint a dismal image. The researchers don't seem to be in much better shape. Many graduate students report experiencing difficulties with stress, social isolation, despair, fatigue, and other bad symptoms. It has a negative impact on both the quality and amount of research produced by individuals. In reality, the numerous studies which are being undertaken at many research institutions are crucial to the development of a society in every element, including scientific progress, social change, cognitive expansion, and growth. Some research students, however, are losing interest in a research career due to mental health issues, and this is a serious problem. Marriage is a legal and binding relationship between a man and a woman, and it involves a specific set of responsibilities and rights. The words "formal" and "durable" signify the same thing: socially accepted and built to last. "conducted within a framework of specified rights and obligations" means that there are statuses and roles in a marriage, and that "Sexual Union" refers to sexual intimacies, including sexual intercourse.

In a marriage, the particular statuses are those of husband and wife; additional examples of statuses are police officer, teacher, student mother, and friend. When discussing the rights and responsibilities accorded to and placed upon a person with a certain position, the word "role" is often employed. As a result, spouses in a marriage have mutual obligations to each other as well as societal obligations that come with their respective responsibilities.

The family consists of individuals who (1) share a common subculture because they are married to or related by blood or by adoption; (2) interact with one another in the roles of husband, wife, father, mother, son, daughter, brother, sister, uncle, aunt, cousin, or grandparent; and (3) create and maintain a common subculture.

To expand the definition of "family" beyond biological or marital relationships, we may think of any group of people who share a home and care for one another as "family." Members of the same family are more likely to spend time together on a regular basis or at least frequently; they are more likely to know each other well; they are more likely to use affectionate language; they are more likely to eat and shop together; and they are more likely to identify with and support one another.

## LITERATURE REVIEW

**Abu-Bader, S.H. (2021).**This pilot randomised control trial (RCT) aims to examine the feasibility and preliminary efficacy of conducting a full-powered study for a newly designed pelvic floor muscle training (PFMT) app among pregnant women with urine incontinence (UI) in Malaysia. The KEPT app trial was a prospective, single-center, single-blind, parallel, randomized, controlled, pilot feasibility study. Twenty-six pregnant women with urine incontinence were selected from a large metropolitan healthcare facility and were allocated to either an intervention or waitlist control group. The KEPT app was given to the intervention group, while the control group got routine prenatal care (waitlist control). Sixteen of the twenty-six pregnant women (61.5%) were able to be followed up with for the whole two months. There was a 60% retention rate in the control group and a 62.5% retention rate in the intervention group. There was a significant difference between intervention and control groups' baseline assessment in the severity of UI ($p = 0.031$). The app enhanced their knowledge ($p = 0.011$) and self-efficacy ($p = 0.038$) after the first month and attitude ($p = 0.034$) after two months of intervention, compared with the control group. Our prospective cluster RCT has been validated by this research. Pregnant women with UI may be more likely to stick with their exercise routine if they use the KEPT app, which has been shown to improve their attitude toward PFMT and their confidence in their ability to complete the program. Applying for a trial: On February 19, 2021, the research was prospectively registered with ClinicalTrials.gov.

**Hajat, A.; Nurius, P. (2020)**Adverse childhood experiences (ACEs) are stressful events that may have negative effects on a person's mental and physical health far into adulthood. The purpose of this research is to compare and contrast various profiles of adversity trajectories over the life cycle, and to look into how they are connected to health and wealth outcomes. The 2011 Behavioral Risk Factor Surveillance System (BRFSS) survey n = 7953 in Washington State was utilized to compile our representative data set. Adverse Childhood Experiences (ACEs) were coupled with six Adverse Adulthood Experiences (AAEs) that occurred in the respondents' adulthood and were similar to the ACE, such as physical abuse in childhood and physical victimization in adulthood. We used latent class analysis to classify the varying degrees of hardship experienced by individuals and then examined if there were any statistically significant variations between the trajectories in terms of demographic, socioeconomic, and health

indicators. Six latent groups were found, including those with high AAE (1. Consistently High; 2.Substance Abuse and Incarceration; 3.Adult Interpersonal Victimization) and those with low AAE (4.Repeat Sexual Victimization, 5.High to Low, and 6. Consistently Low). The Consistently High group did badly across the board and had the greatest incidence of ACEs and AAEs. In contrast, some groups showed distinct demographic variations and unique patterns of ACE and AAE exposures (including notable subgroups such those with exposure to imprisonment). Findings from subgroup studies like this one supplement those from the whole population. When we know how people experience hardship throughout the course of their lives, we can tailor services to improve health and well-being at the individual level.

**Smink et al. (2018)**used The Self-Perception Profile for Children in a research of 1,007 people's sense of self-worth (SPPC, Harte, 1982). Males were shown to have a greater self-esteem than females overall, although this difference was only significant for the 'physical appearance' subscale. There were, however, no discernible gender differences on measures of international compatibility, academic prowess, or international sense of self-worth. In conclusion, an individual's mental health improves in tandem with their level of self-esteem. Given these results, the current research seeks to explore the connection between self-esteem and the other factors being examined.

**Tamannaeifar and Behzadmoghaddam (2016)**Utilizing the Zimet multidimensional Perceived Stress Scale and the Diner Life Satisfaction Scale, this study looked at the connection between life satisfaction and perceived social support in a group of 368 students from the University of ShahidBeheshti, comprising 214 females and 154 males. According to the results, 14.3% of the students surveyed reported having a lower than average level of perceived social support, 72.6% reported having an average level of support, and 13.0% reported having a higher-than-average level of support. On the "Family Support" scale, 27.1%, 59.3%, and 13.6% exhibited minimum, median, and maximum values, respectively. On the question of "Support from Friends," 15.6%, 27.1%, and 13.4% gave the lowest, middle, and highest possible scores. On the scale of "Support from important people," 15.1%, 67.1%, and 17.9% respectively scored as having low, medium, or high levels of social support. Satisfaction with one's life and the feeling of having social support appeared as significant predictors of students' happiness (r= 0.41).

## RESEARCH METHODOLOGY

This study's novel contribution was to analyze how fellowships affect the emotional well-being of graduate students engaged in research. Research in this area was prioritized because of the widespread belief that economic hardship is a major contributor to mental health issues. Examining whether or whether there were any disparities in the variables between the sexes was another objective. Conclusions Women have worse self-reported mental health than men and report feeling less social support from their peers. There were no statistically significant differences across the board. Compared to men, women are more likely to talk about the effects of their mental health problems. It has been hypothesized that women are better able to describe their struggles and the symptoms they are experiencing than men are, in part because of the more

social latitude they have for expressing their emotions and the greater variety of life experiences to which they are exposed.

**Analysis Of Variance**

Financial assistance and gender were used as independent factors in an analysis of variance. For the two-way analysis (2X2), we used four categories: two types of financial assistance (fellowship holders vs. non-fellowship holders) and two types of gender (male and female). All dependent variables underwent analysis for both main and interaction effects.

The following variables showed statistical significance in the tabular analysis of the groups: Wellness of the Mind.

**Inter-Correlation and Step-wise Regression Analysis**

Comparison of the two methods, using Pearson's Correlation and a Step-by-step Important determinants and correlations of mental health were identified using regression analysis. Researchers discovered that despair, anxiety, perceived stress, quality of life, self-esteem, and social support were all strongly connected to mental health in the group of fellowship holders. None of the assessed factors were unimportant predictors of mental health.

It is clear from the current study that research students' mental health is being negatively impacted by financial hardship. So that the research students' mental health doesn't suffer, it is crucial that both they and their institution pay attention to this element.

**DATA ANALYSIS**

Research scholars' mental health, depression, anxiety, perceived stress, quality of life, Self-Worth, and social support were the key foci of this study. The study also sought to assess the differences between fellowship and non-fellowship research students interested in Mental Health. This research also attempted to compare male and female research students on all of the measured characteristics. This research set out to examine whether or not there were any gender or financial support–related interactions. Research students at Panjab University in Chandigarh, India, had their mental health evaluated along with the factors that influence it.

Financial assistance (scholarship recipients vs. non-fellowship recipients) and gender were used as independent variables in a two-way analysis of variance (ANOVA) (two levels of the treatment: males and females).

**Table 1: Descriptive statistics for non-fellowship holder research students (n=200)**

| | Mental Health | Depression | Anxiety | Perceived Stress | QOL | Self-Worth | Social Support |
|---|---|---|---|---|---|---|---|
| Mean | 14.40 | 12.09 | 14.19 | 22.00 | 79.41 | 29.16 | 47.94 |
| Std. Deviation | 7.01 | 9.73 | 8.82 | 4.88 | 15.80 | 5.31 | 10.69 |

The mean (M) and standard deviation (S.D.) for a sample of one hundred research students who do not possess fellowships are shown in Table 1. M=14.40, SD=7.01 in terms of emotional well-being. The mean score for depression was 12.09, with a standard deviation of 9.73. The mean (M) anxiety score was 14.19, with a standard deviation (S. D.) of 8.82. M=22.00 and S. D=4.88 for how stressed people feel. Standard deviation Was 15.80, mean = 79.41 for QOL. The mean value of one's sense of self-worth is 29.16, with a standard deviation of 5.31. The mean value of social support is 47.94, with a standard deviation of 10.69.

**Table 2: Descriptive statistics for male research students (n=100)**

| | Mental Health | Depression | Anxiety | Perceived Stress | QOL | Self-Esteem | Social Support |
|---|---|---|---|---|---|---|---|
| **Mean** | 12.97 | 8.71 | 10.86 | 18.89 | 84.01 | 30.50 | 49.97 |
| **Std. Deviation** | 7.77 | 10.17 | 9.13 | 7.31 | 15.40 | 4.94 | 10.13 |

The mean (M) and standard deviation (S.D.) for a sample of 100 male research students are shown in Table 2. M=12.97, SD=7.77 when assessing psychological well-being. The mean score for depression was 8.71, with a standard deviation of 10.17. The mean anxiety score was 10.86, with a standard deviation of 9.13. The mean number of stressful events per person was 18.89, with a standard deviation of 7.31. Median (M) = 84.01, Standard Deviation (S. D.) = 15.40, Quality of Life. Mean Personal Worth is 30.50 and Standard Deviation is 4.94. Mean = 49.97, Standard Deviation = 10.13 for Social Support.

**Table 3: Descriptive statistics for female research students (n=100)**

| | Mental Health | Depression | Anxiety | Perceived Stress | QOL | Self-Esteem | Social Support |
|---|---|---|---|---|---|---|---|
| **Mean** | 14.77 | 8.84 | 11.29 | 19.87 | 81.25 | 30.15 | 47.21 |
| **Std. Deviation** | 4.80 | 4.65 | 7.50 | 4.45 | 14.85 | 4.03 | 7.71 |

The mean (M) and standard deviation (S.D.) for the overall sample size (n=100) of female research students are shown in Table 3. The mean score for emotional well-being was 14.77, with a standard deviation of 4.80. Statistics show that the mean (M) for depressive symptoms is 8.84, and the standard deviation (S. D.) is 4.65. Mean (with standard deviation) Was 11.29 (for anxiousness) and Standard Deviation (for the same group) = 7.50. The mean number of stressful events was 19.87, with a standard deviation of 4.45. Mean (M) = 81.25, Standard Deviation (S. D.) = 14.85 for Quality of Life. M = 30.15, SD = 4.03, and SR = SR. Mean = 47.21, Standard Deviation = 7.71 for Social Support.

**Reliability Coefficients of all the Measures**

**Table 4: Test-retest reliability coefficient for the scales**

| Sr. No. | Name of tool | Pre mean | Post mean | r | p value |
|---|---|---|---|---|---|
| 1 | General Health Questionnaire | 13.45 | 14.25 | 0.86** | <0.01 |
| 2 | Beck Depression Inventory | 7.9 | 8.52 | 0.91** | <0.01 |
| 3 | Hamilton Anxiety Rating Scale | 10.68 | 10.07 | 0.89** | <0.01 |
| 4 | Perceived Stress Scale | 19.4 | 17.57 | 0.86** | <0.01 |
| 5 | The Quality-of-Life Scale | 85.38 | 83.6 | 0.84** | <0.01 |
| 6 | Self-Worth scale | 30.43 | 30.81 | 0.78** | <0.01 |
| 7 | Social Support Questionnaire | 50.2 | 50.88 | 0.81** | <0.01 |

The instruments used in this research had their reliability determined by being tested again after a fifteen-day interval. Test-retest reliability seems to be high for all surveys (table 4).

**Analysis of Variance (2-way ANOVA)**

**Table 5 Way ANOVA results for Gender and Financial Support on Mental Health**

| Source | Sum of Squares | df | Mean Square | F |
|---|---|---|---|---|
| Gender | 324.00 | 1 | 324.00 | 4.95** |
| Financial support | 2560.36 | 1 | 2560.36 | 54.88** |
| Gender * Financial support | 184.96 | 1 | 184.96 | 3.96* |
| Corrected Total | 21543.24 | 399 | | |

Table 5 shows that there is a statistically significant difference in the way that financial aid and gender interact with regards to research students' mental health. Mean square is also 184.96, hence the total of the squares is 184.96, and the f-value is 3.96** (p 0.01). This demonstrates that hypothesis H3.1 may be safely ignored. Gender had a significant main impact (4.95**, p0.01), as did parental income (f=54.88**, p0.01).

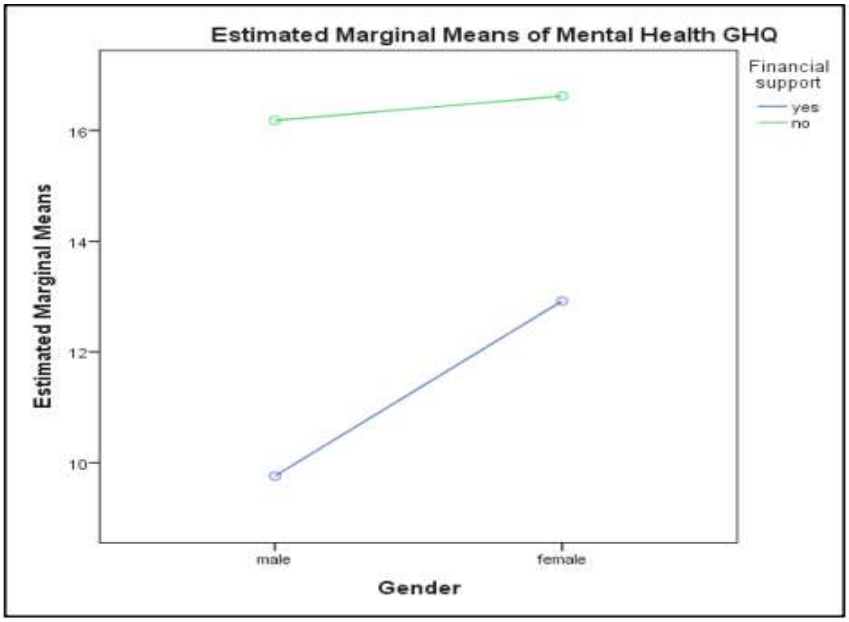


**Figure 1: Graphical Representation of Interaction between Gender and Financial Support on Mental Health**

**Correlates of Mental health: Pearson Correlation**

**Table 6 Correlates of Mental health among non-fellowship holder research students (n=200)**

| Variables | Mental Health | Depression | Anxiety | Perceived Stress | QOL | Self-Worth | Social Support |
|---|---|---|---|---|---|---|---|
| Mental Health | 1 | 0.48** | 0.45** | 0.39** | -0.45** | -0.52** | -0.18* |
| Depression | | 1 | 0.45** | 0.15* | -0.40** | -0.39** | -0.38** |
| Anxiety | | | 1 | 0.14 | -0.19** | -0.22** | -0.33** |
| Perceived Stress | | | | 1 | -.024** | -0.25** | -0.18* |
| QOL | | | | | 1 | 0.52** | 0.23** |
| Self-Worth | | | | | | 1 | 0.29** |
| Social Support | | | | | | | 1 |

The correlation coefficients (r) for all variables are shown in Table 6 for the sample of N=200 research students who received fellowships.

## CONCLUSION

Graduate students doing research represent a significant proportion of the university student body. They labored diligently to finish their PhD studies and produce something really unique. In the majority of nations across the world, a Ph.D. is the minimum educational prerequisite for a professorial position. The gender gap on the factors was also explored in this research. Females have worse self-reported mental health than males and report receiving less social support. Financial assistance and gender were used as independent factors in an analysis of variance. Two categories of demographics (fellowship holders vs. non-fellowship holders) and two categories of demographics (male vs. female) were entered into a two-way analysis table, or 2 (male and female). All dependent variables underwent analysis for both main and interaction effects. In our research, we found support for a large number of possibilities. Research students who do not possess fellowships were shown to be significantly different from the others. It is clear from the current study that research students' mental health is being negatively impacted by financial hardship. Thus, it is crucial that both the student and the university take care of this issue so that the mental health of the research students does not suffer.

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