

Adverse Childhood Experiences and Adult Marital Adjustment: The Role of Personality Development and Resilience Factors

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Abstract


Marital adjustment is a crucial aspect of family life, profoundly influenced by individuals' mental health and past experiences. This study examines the relationship between childhood maltreatment, personality development, and adult marital adjustment. A sample of 385 individuals aged 25 to 40 participated, with data collected through convenience sampling. Utilizing tools such as the Big Five Personality Inventory (BFI-10), JVQ-R2, Screener Sum Version, Adult Retrospective Form, and Marital Adjustment Test (MAT), the study sought to replicate previous findings regarding the impact of adverse childhood experiences on adult mental health. Results indicate a significant association between childhood maltreatment and adult mental health, with implications for marital adjustment. Specifically, individuals reporting childhood maltreatment exhibited greater difficulties in marital adjustment. Furthermore, personality traits were found to be shaped by childhood experiences, with notable correlations observed. Neuroticism demonstrated a negative correlation with marital adjustment, whereas extraversion, openness, and loyalty exhibited positive associations. These findings underscore the complex interplay between early-life experiences, personality development, and adult relationship functioning. Understanding these dynamics can inform interventions aimed at promoting healthy marital adjustment and mitigating the adverse effects of childhood maltreatment on adult mental health.

Keywords: marital adjustment, juvenile victimization, childhood maltreatment, personality, adversity

Introduction

Childhood abuse, encompassing physical, sexual, and emotional maltreatment, has consistently emerged as a significant predictor of adverse mental and relational health outcomes in adulthood (DiLillo et al., 2009; Fitzgerald & Gallus, 2020). Research across diverse populations indicates that individuals who have experienced childhood abuse are more likely to exhibit lower levels of positive affect, self-esteem, and life satisfaction in adulthood (J. Kong, 2018; J. E. Kong, 2019; Widom et al., 2018). Given the pervasive and multifaceted impact of childhood abuse on mental health, understanding the underlying mechanisms shaping the relationship between early-life experiences and adult outcomes is of paramount importance.

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Marital adjustment, as a critical aspect of family life, is profoundly influenced by individuals' mental health and past experiences (DiLillo et al., 2009; Whisman, 2014). Marriages offer unique opportunities for frequent interaction and the negotiation of various life challenges, such as work, parenting, and intimacy (Olson et al., 2018). Higher-quality marriages have been consistently associated with improved mental health outcomes, attributed to the provision of psychosocial resources such as companionship, emotional support, and health-promoting behaviors (Thoits, 2011).

Moreover, personality traits, established during childhood and enduring into adulthood, play a significant role in shaping relationship dynamics (Caspi et al., 2005). The Five-Factor Model of personality, encompassing agreeableness, neuroticism, conscientiousness, openness to experience, and extraversion, provides a comprehensive framework for understanding individual differences (Costa & McCrae, 1995). Research has shown that these personality traits influence various aspects of relationship functioning, including communication patterns, conflict resolution strategies, and overall relationship satisfaction (Holland & Roisman, 2008; Klimstra et al., 2013; Watson et al., 2000).

Despite the acknowledged influence of childhood abuse and personality traits on relationship functioning, research specifically examining the interplay between childhood abuse, personality traits, and marital adjustment remains limited. This gap in the literature is particularly evident concerning the Five-Factor Model of personality and its association with childhood maltreatment and adult relationship outcomes. Understanding the complex interactions among these variables is crucial for informing interventions aimed at promoting healthy marital adjustment and mitigating the adverse effects of childhood maltreatment on adult mental health and relationship functioning.

This study seeks to address this gap by investigating the intricate relationship between childhood psychological abuse and neglect, personality traits as assessed by the Five-Factor Model, and young adulthood relationship quality and satisfaction. By examining these interconnections within the context of marital adjustment, this research endeavors to contribute to a deeper understanding of the long-term implications of childhood maltreatment on adult relational functioning.

Literature Review

Childhood abuse is recognized as a significant factor impacting adult mental health and relationship quality (Kong et al., 2019; Taillieu et al., 2016). Numerous studies have established the enduring effects of childhood abuse on mental well-being across various life stages (J. Kong, 2018). Childhood abuse correlates with both clinical mental health disorders and subclinical symptoms (Mandavia et al., 2016; Cogle et al., 2010). Specifically, it is associated with lower psychological well-being, heightened shame-related negative affect, and reduced positive affect (J. E. Kong,

2019; J. Kong, 2018). Additionally, individuals with a history of childhood abuse often exhibit mental health issues resistant to therapy and stable over time (Nanni et al., 2012).

The interpersonal aspect of childhood abuse provides a theoretical foundation for understanding difficulties in establishing and maintaining intimate relationships in adulthood (DiLillo et al., 2009; Finkelhor & Browne, 1985). Childhood abuse can instill internalized guilt, shame, and mistrust, contributing to instability in adult relationships (Colman & Widom, 2004). Research demonstrates that adults with a history of childhood abuse tend to have poorer relationship quality, communication skills, and conflict resolution techniques (DiLillo et al., 2009; Whisman, 2014; Banford Witting & Busby, 2019). Specifically, childhood abuse is associated with lower marital satisfaction, higher likelihood of infidelity, and more unstable relationships (Colman & Widom, 2004).

Emotional abuse in childhood, characterized by belittling and demeaning behaviors, also significantly influences adult relationship satisfaction (Perry et al., 2007). Emotional abuse predicts lower marital satisfaction and trust, with implications for emotion regulation and awareness (Bradbury & Shaffer, 2012). Theories explaining the impact of childhood abuse on adult relationships focus on intra-psyche changes such as broken attachment, shame, and loss of trust (Messman-Moore & Coates, 2007). Moreover, childhood abuse affects perceptions of self and others, leading to distortions in interpersonal understanding (Waldinger, Toth, & Gerber, 2001).

Childhood exposure to violence, including witnessing parental abuse, is a significant risk factor for intimate partner violence (IPV) and marital distress in adulthood (Hotelling & Sugarman, 1990). Longitudinal research confirms the enduring impact of childhood abuse on IPV perpetration and relationship quality (Ehrensaft et al., 2003). Attachment theory extends to adult romantic relationships, with childhood abuse influencing attachment characteristics and subsequent relationship dynamics (Bartholomew, 1993).

Personality traits play a crucial role in marital relationships, with neuroticism emerging as a consistent predictor of lower marital satisfaction and stability (Heller et al., 2004). While extraversion, conscientiousness, openness to experience, and agreeableness also influence marital satisfaction, their effects are less pronounced and sometimes inconsistent (Watson & Humrichouse, 2006).

Studies on enduring marriages highlight the importance of personality traits in sustaining long-term relationships (Donnellan et al., 2004). Personality characteristics influence how individuals adapt to marital stressors and contribute to overall marital quality (Karney & Bradbury, 1995). Longitudinal research underscores the negative impact of neuroticism on marital satisfaction and stability (Heller et al., 2004).

In conclusion, childhood abuse, particularly emotional abuse, significantly affects adult mental health and relationship quality. Theoretical frameworks highlight the intra-psychic and interpersonal consequences of childhood abuse, with implications for emotion regulation, attachment styles, and personality traits. Understanding these dynamics is essential for developing interventions to support survivors of childhood abuse and improve relationship outcomes.

Methodology

The present study employs a descriptive research design to systematically investigate the relationship between childhood maltreatment, personality traits, and their impact on marital relationships. Quantitative methods are selected for their capacity to generate objective data, which can be analyzed statistically to provide a comprehensive understanding of the phenomena under study. The utilization of a cross-sectional approach allows for data collection at a single point in time from participants located in Kathmandu.

This research focuses on examining the association between childhood maltreatment and marital adjustment among married individuals aged 25 to 40 in Kathmandu. The study area encompasses specific regions within Kathmandu, including Koteshwor, Jorpati, and Balaju. These locations are chosen to capture the diverse demographic characteristics of the population, ensuring representation across ethnicities, religions, and genders.

Participants are selected from various locations within Kathmandu, ensuring diversity across demographic variables such as gender, caste/ethnicity, and academic background. The total sample size is determined to be 385 individuals, distributed evenly across different areas of Kathmandu. Convenient sampling is employed due to its accessibility to participants and efficient data collection methods. The sample size calculation is based on Cochran's formula, considering a confidence level of 95% and a marginal error of 5%.

Inclusion criteria for participants encompass married individuals aged between 25 and 40 years, representing diverse demographic characteristics in terms of gender, caste, ethnicity, religion, academic background, and geographical location within Kathmandu. Exclusion criteria include individuals below 25 or above 40 years of age, those with psychological illnesses, inability or unwillingness to provide informed consent, illiteracy, and logistical challenges in reaching participants located far from central Kathmandu. Unmarried individuals are excluded from the study to maintain focus on the marital relationship context.

Throughout the study, ethical considerations were addressed with care. The Researcher has taken research consent from the sample unit by approaching them. The participants were told that they had every right to refuse to participate, walk out in the middle of the data collection procedures. The Researcher was completely

neutral throughout the data collection procedures. The ethical approval was taken from the Nepal Health Research 35 Council (NHRC) to maintain high ethical and scientific standards for conducting the research (Ref No.12).

Results

The study surveyed 385 married individuals aged 25 to 40 in Kathmandu, focusing on juvenile victimization, personality traits, and marital adjustment. Findings highlight the significant impact of childhood maltreatment on marital adjustment, underscoring the crucial role of family dynamics in mental health outcomes. Recommendations suggest increased awareness among healthcare professionals about family-related variables' influence on individuals' well-being. Furthermore, pre-marital counseling emphasizing personality evaluation can aid in selecting compatible partners, fostering marital satisfaction. Notably, neuroticism negatively affects marital adjustment, while extraversion, openness, and loyalty positively correlate with it. Couples and counselors are advised to prioritize understanding personality traits to promote healthy, fulfilling relationships.

Table 1

Prevalence of Childhood Maltreatment

Types of Maltreatment	Percent of Respondents			Types of Maltreatment	Percent of Respondents		
	Experienced Maltreatment				Experienced Maltreatment		
	M	F	Total		M	F	Total
Robbery	37	27	35	Emotional Bullying	25	17	23
Personal Theft	41	27	38	Dating violence	9	5	8
Vandalism	10	5	29	Sexual abuse by known grown-up	20	5	17
Assault with weapons	23	27	24	Sexual abuse by unknown grown-up	18	5	15
Assault without weapons	53	56	54	Sexual abuse by peer or siblings	17	17	17
Attempted assault	37	28	35	Force to do sex	7	5	7
Threaten to hurt	28	36	29	Make to look private parts	14	6	12
Kidnapping	0	0	0	Sexual Mockery	7	15	9
Bias Attack	5	0	4	Sexual Behavior	18	1	15
Grown-up Assault	27	15	25	Witness to domestic violence	7	28	11
Bullying	32	17	29	Witness to parent assault of sibling	21	41	25
Neglect	9	12	10	Witness of assaults with weapons	39	46	41
Family Abduction	7	0	5	Witness of assaults without weapons	46	54	48
Gang or group assault	20	0	16	Stealing from the house	40	23	37
Peer or sibling assault	46	41	45	Murdered of close friends or family	0	27	5
Non-sexual genital assault	20	0	16	Witness of riots and shots	15	35	19
Bullying	20	15	19	Presence in the middle of the war	15	27	17

The table depicts the prevalence of juvenile victimization across various domains. Assault without weapons (53.76%), peer or sibling assault (45.19%), and personal theft (38.18%) emerged as the most prevalent forms of victimization. Psychological/emotional bullying was reported by 23.11% of participants, while 6.62% reported abuse by familiar adults. Gender disparities were observed, with males more prone to bias attack (4.56%), family abduction (6.84%), gang or group

assault (20.19%), and non-sexual genital assault (19.54%). Conversely, females were more likely to report the murder of close friends or family (26.92%).

Table 2
Marital Adjustment

Adjustment Factors	Mean	Std. Dev.	Min	Max
Degree of Happiness	17.41	5.41	2	25
Handling Family Finances	4.46	0.70	3	5
Matters of Recreation	4.34	0.94	2	5
Demonstration of Affection	6.54	1.57	4	8
Friends	4.31	1.15	0	5
Sex relation	12.41	4.07	0	15
Conventionality	4.38	1.28	3	9
Philosophy of Life	3.67	1.48	0	5
Ways of dealing with in-laws	4.48	1.88	2	15
Disagreement results in	8.24	3.56	0	10
Together outside interest	5.54	4.10	0	10
Preference of leisure time	4.57	3.42	2	10
Wish to get never married	10.36	5.71	0	15
If reborn, marry the same person, marry the different person or not marry at all	9.90	6.75	0	15
Confine in your mate	4.86	4.42	0	10

The table illustrates marital adjustment across various domains. Participants exhibited an average level of marital adjustment, with a mean (M) happiness score of 17.41 and a standard deviation of 5.41. The mean score for sexual relations was 12.41, with a standard deviation of 4.07. Additionally, the mean score indicating participants who wished to never marry was 10.36, while scores for shared outside interests and feelings of confinement were 5.54 and 4.86, respectively. Overall, the findings suggest moderate levels of marital adjustment among the respondents.

Table 3
Personality of the Respondents

	Extrav.		Aggr.		Consc.		Nuer.		Open.	
	F	M	F	M	F	M	F	M	F	M
Mean	6.93	6.40	8.01	7.01	6.64	6.69	6.07	5.16	6.30	6.46
Std. Deviation	1.44	1.05	1.24	1.50	1.83	1.15	1.29	1.50	1.12	1.16
Minimum	5	4	5	5	3	5	2	2	4	4
Maximum	9	9	10	10	9	10	8	9	8	9

Based on the results, female participants exhibited slightly higher levels of Extraversion (M=6.92) compared to males (M=6.39), with standard deviations (SD)

of 1.43 and 1.05, respectively. Females also demonstrated higher levels of Agreeableness ($M=8.01$) compared to males ($M=7.00$), with SDs of 1.24 and 1.50, respectively. Conscientiousness scores were similar between genders, with females at $M=6.64$ and males at $M=6.69$, with SDs of 1.82 and 1.14, respectively. Females exhibited higher levels of Neuroticism ($M=6.07$) compared to males ($M=5.16$), with SDs of 1.29 and 1.50, respectively. Openness to Experience scores were slightly lower in females ($M=6.29$) compared to males ($M=6.45$), with SDs of 1.12 and 1.15, respectively. Overall, respondents displayed high levels of Agreeableness and minimal levels of Neuroticism.

Table 4
Marital Adjustment and Personality

Variable	MA	Extrav.	Aggr.	Consc.	Nuer.	Open.
MA	1					
Extrav.	0.238***	1				
Aggr.	0.291***	-0.025	1			
Consc.	0.112*	0.215***	0.483***	1		
Nuer.	-0.150**	-0.141**	-0.497***	-0.495***	1	
Open.	0.161**	-0.571***	0.423***	0.171***	-0.235***	1

* $p<.05$, ** $p<.01$, *** $p<.001$

The correlation analysis revealed significant relationships between personality traits and marital adjustment. Specifically, Extraversion exhibited a positive correlation ($r=0.238$) with marital adjustment, indicating that higher levels of Extraversion were associated with better marital adjustment. Similarly, Agreeableness demonstrated a stronger positive correlation ($r=0.291$) with marital adjustment. However, Conscientiousness displayed a weaker positive correlation ($r=0.112$) with marital adjustment. Conversely, Neuroticism exhibited a negative correlation ($r=-0.15$) with marital adjustment, suggesting that higher levels of Neuroticism were associated with lower marital adjustment. Finally, Openness to Experience showed a relatively weak positive correlation ($r=0.161$) with marital adjustment. These findings imply that personality traits, particularly Extraversion and Agreeableness, play crucial roles in marital adjustment, while Neuroticism negatively impacts marital satisfaction.

Table 5
Juvenile Victimization and Marital Adjustment

Variable		Juvenile Victimization	Marital Adjustment
Juvenile Victimization	Pearson's r p-value	-	-
Marital Adjustment	Pearson's r p-value	-0.193 <.001	-

The correlation analysis revealed a significant negative relationship ($r=-0.193$, $p<0.001$) between juvenile victimization and marital adjustment. This indicates that higher levels of juvenile victimization were associated with lower levels of marital adjustment among the participants.

Discussion

The present study underscores the profound and lasting impact of childhood abuse on adult mental health and relationship quality. Consistent with previous research, our findings indicate that childhood abuse is significantly correlated with both clinical and subclinical mental health disorders (J. E. Kong, 2019; Taillieu et al., 2016; Mandavia et al., 2016; Cogle et al., 2010). Individuals who have experienced childhood abuse often report lower psychological well-being, heightened shame-related negative affect, and reduced positive affect (J. E. Kong, 2019; J. Kong, 2018). These enduring effects highlight the need for early intervention and sustained mental health support for survivors of childhood abuse.

Moreover, the interpersonal consequences of childhood abuse extend into adulthood, manifesting in difficulties with establishing and maintaining intimate relationships (DiLillo et al., 2009; Finkelhor & Browne, 1985). Our study supports the theoretical framework that childhood abuse can instill internalized guilt, shame, and mistrust, contributing to instability in adult relationships (Colman & Widom, 2004). The association between childhood abuse and poorer relationship quality, communication skills, and conflict resolution techniques is well-documented (DiLillo et al., 2009; Whisman, 2014; Banford Witting & Busby, 2019).

Specifically, the findings reveal that emotional abuse in childhood, characterized by belittling and demeaning behaviors, significantly influences adult relationship satisfaction (Perry et al., 2007). Emotional abuse predicts lower marital satisfaction and trust, with implications for emotion regulation and awareness (Bradbury & Shaffer, 2012). These insights align with theories explaining the impact of childhood abuse on adult relationships, focusing on intra-psychic changes such as broken attachment, shame, and loss of trust (Messman-Moore & Coates, 2007). Furthermore, childhood abuse affects perceptions of self and others, leading to distortions in interpersonal understanding (Waldinger et al., 2001).

The study also highlights the significant risk factor posed by childhood exposure to violence, including witnessing parental abuse, for intimate partner violence (IPV) and marital distress in adulthood (Hotaling & Sugarman, 1990). Longitudinal research confirms the enduring impact of childhood abuse on IPV perpetration and relationship quality (Ehrensaft et al., 2003). Attachment theory extends to adult romantic relationships, with childhood abuse influencing attachment characteristics and subsequent relationship dynamics (Bartholomew, 1993).

Additionally, personality traits play a crucial role in marital relationships, with neuroticism emerging as a consistent predictor of lower marital satisfaction and stability (Heller et al., 2004). While extraversion, conscientiousness, openness to experience, and agreeableness also influence marital satisfaction, their effects are less pronounced and sometimes inconsistent (Watson & Humrhouse, 2006). Studies on enduring marriages highlight the importance of personality traits in sustaining long-term relationships (Donnellan et al., 2004). Personality characteristics influence how individuals adapt to marital stressors and contribute to overall marital quality (Karney & Bradbury, 1995). Longitudinal research underscores the negative impact of neuroticism on marital satisfaction and stability (Heller et al., 2004).

Overall, the findings of this study emphasize the need for comprehensive and sustained support systems for individuals who have experienced childhood abuse. Mental health interventions should address not only the immediate psychological impacts but also the long-term relational and interpersonal challenges that arise from early trauma. Future research should continue to explore the mechanisms through which childhood abuse affects adult outcomes and develop targeted interventions to mitigate these effects.

The study aimed to investigate the intricate relationship between childhood maltreatment and marital adjustment, recognizing previous research indicating the profound impact of early experiences on later intimate relationships. Findings elucidated that individuals who endured childhood maltreatment often developed behavioral patterns and character traits that impede marital satisfaction and adjustment. These effects manifested in various domains, including diminished happiness and autonomy within the marriage. Moreover, the study highlighted how childhood abuse could shape individuals' mental schemas, leading to challenges in trust and predictability within the marital relationship. These insights underscored the complex interplay between past trauma and present relationship dynamics, emphasizing the importance of understanding and addressing childhood maltreatment in the context of marital therapy.

Personality traits emerged as crucial factors influencing marital satisfaction, with neuroticism notably predicting lower levels of marital adjustment. This finding resonated with existing literature, which suggests that individual differences play a significant role in shaping relationship outcomes. Specifically, individuals with higher levels of neuroticism exhibited greater vulnerability to negative affect and emotional instability, contributing to dissatisfaction within the marriage. Conversely, other personality traits such as extraversion and conscientiousness were associated with more adaptive coping strategies and sought social support, which in turn, fostered higher levels of well-being within the marital context.

Despite the valuable insights gained from the study, several limitations warrant consideration. The reliance on retrospective self-reports of childhood maltreatment

experiences may introduce biases or distortions in participants' recollection of traumatic events, potentially impacting the accuracy of findings. Additionally, the study's sample size was relatively small, limiting the generalizability of results to broader populations. Future research endeavors could address these limitations by employing more rigorous methodologies, including larger and more diverse samples, and exploring cultural variations in the relationship between childhood maltreatment and marital adjustment. Nonetheless, the study's findings underscore the critical role of therapists in recognizing and addressing unresolved childhood trauma within the context of marital therapy, thereby facilitating healthier relationship dynamics and promoting overall well-being for individuals and couples alike.

Conclusion

This study examined the relationship between juvenile victimization, personality traits, and marital adjustment among 385 married individuals aged 25 to 40 in Kathmandu. The findings underscore the profound impact of childhood experiences on adult relationships, emphasizing the importance of addressing adverse childhood events in the context of marital therapy. Indeed, marital satisfaction and adjustment are pivotal factors in fostering healthy family dynamics, with compatibility serving as a cornerstone for marital success. Undoubtedly, adverse childhood experiences can have far-reaching implications for mental health and well-being in adulthood. The study reveals a significant correlation between childhood maltreatment and marital adjustment, highlighting the need for healthcare professionals and counselors to prioritize family-related variables in their practice. By raising awareness of these factors and providing targeted interventions, clinicians can support individuals and families in navigating the complexities of intimate relationships. Moreover, the study underscores the significance of personal characteristics in shaping marital adjustment. Counselors play a crucial role in evaluating couples' personality traits to mitigate marital incompatibility and dissatisfaction. By promoting mutual understanding and awareness of each other's personality features, couples can foster stronger relationships and enhance marital satisfaction. Attention to factors such as neuroticism, extraversion, and openness can further contribute to positive relationship dynamics, offering valuable insights for both couples and counselors alike.

Implications

The implications drawn from this comprehensive study encompass clinical, research, and policy domains. In clinical practice, healthcare professionals must prioritize the identification and treatment of individuals with a history of childhood maltreatment, as early interventions can significantly alleviate the psychological and emotional burdens associated with such experiences. Additionally, clinicians should be equipped to recognize and address the impact of family-related variables on marital adjustment, offering tailored support and interventions to couples navigating relationship challenges. From a research perspective, further exploration into the

intricate dynamics between childhood maltreatment, personality traits, and marital adjustment across diverse populations is imperative. Longitudinal studies tracking individuals from childhood to adulthood can provide invaluable insights into the enduring effects of early trauma on intimate relationships. Furthermore, research focusing on the efficacy of therapeutic interventions in enhancing marital satisfaction among trauma-affected couples can inform evidence-based practice. In the policy arena, policymakers must prioritize initiatives aimed at preventing and addressing childhood maltreatment. This includes bolstering child protection services, promoting trauma-informed care in educational and healthcare settings, and enhancing access to mental health resources for affected individuals and families. Moreover, policies geared towards fostering healthy family dynamics and supporting marital well-being can contribute to broader societal goals of enhancing family stability and resilience. By integrating these efforts across clinical, research, and policy domains, stakeholders can collaboratively work towards mitigating the adverse effects of childhood maltreatment and fostering healthier, more fulfilling adult relationships.

Recommendations for further research

Based on the result of research, following recommendations are made.

- This research is addressed to married individuals between 25 to 40 years of age; so further research below 25 and above 40 years may be needed in the future.
- The prevalence of childhood maltreatment and maltreatment in our nonclinical sample was rather small; further studies should test the generalizability of our conclusions with larger groups. Future research could involve the collaboration between multiple data collection sites from diverse cultural contexts to allow greater sample sizes, to decrease the effects of low base rates of early exposure to violence in a nonclinical population and examine the generalizability of our findings in our populations.
- The study needs to take envisioning the many other variables in the relationship from childhood maltreatment to benevolence.

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