

The Impact of Childhood Trauma on Emotional Regulation and Social Functioning in Adolescents

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ABSTRACT

The concept of childhood trauma has emerged as something that may influence the emotional experiences and interpersonal relationships that kids may have as they enter adulthood. The current study examined the relationship between traumatic events experienced in childhood, the methods through which people regulate emotions, and interpersonal relationships as they occur in adolescents aged 13-18 years. The study employed a correlation design and gathered information from 84 adolescents. They employed commonly recognized scales such as the Childhood Trauma Questionnaire (CTQ), the Emotion Regulation Questionnaire (ERQ), and the Social Functioning Questionnaire (SFQ). The results obtained indicated a weak negative correlation between childhood trauma, the application of cognitive reappraisal approaches, and social skills; however, this was not sufficient from a statistical viewpoint. Alternatively, emotional neglect demonstrated a reasonably strong negative correlation with cognitive reappraisal. Secondly, the study indicated that cognitive reappraisal exhibited a positive correlation with social functioning, implying that the greater the capacity for regulating emotions, the greater the capacity for interpersonal relationships amongst individuals.

Keywords: Childhood trauma, Emotional control, Social skills, Adolescents, Stress

INTRODUCTION

In today's ever-growing world, children in India, especially in the age group of 13 to 18 years, experience numerous issues that can impair their psychological well-being, and one among them is childhood trauma. Childhood trauma is described as the unfortunate experiences children suffer before turning 18 years of age, such as emotional abuse, physical abuse, sexual abuse, neglect, or exposure to dysfunction. All these unpleasant experiences can greatly hamper developmental stages, specially when considering emotional and social development. Notoriously, adolescence is an important developmental stage which is strewn with swift changes in the realms of cognition, emotion, as well as interpersonal relations.

Emotional regulation can be defined as an individual's capacity to manage, alter, or cope with emotional

experiences. Gross's paper specifically defines and reviews emotion regulation and its processes (Gross, 2015). Traumatized adolescents may have difficulties in regulating their emotions owing to their stress sensitivity, unusual bodily responses, and maladaptive strategies. The struggle to manage emotional regulation could result in mood swings, irritability, or aggression.

Social functioning

It is basically an adaptation to other people. Social adaptation in a child may get affected when he or she suffers from a traumatic experience. Children who experience traumatic events may have issues with trust, communication, or friendship. The teenager may avoid people, have conflicts with peers, or have difficulty in adjusting to a relationship.

Several studies have identified these links. Research indicates trauma has a bearing on regions in the brain

How to cite this Article: Singh, Aparna and Chandola, Rupali (2026). The Impact of Childhood Trauma on Emotional Regulation and Social Functioning in Adolescents. *Internat. J. Appl. Soc. Sci.*, **13** (9 & 10) : 1014-1020.

linked to the regulation of emotions and the making of decisions. Studies have indicated that the more trauma is witnessed in young people, the more impulsivity and emotionality are witnessed. Several studies have indicated the link among trauma in children and poor social adjustment and reduced acceptance by peers. Trauma in adolescents is seen to manifest in terms of impulsiveness and emotionality. Several studies indicated children suffering from abuse and neglect experience greater issues in society and reduced positive associations. Studies in India have indicated the effect on behaviour, emotional well-being, and interpersonal functioning.

Adolescents with trauma often show more impulsive and emotional reactions. Other studies find that children who face abuse or neglect have more social problems and fewer positive relationships.

Despite existing findings, few studies have jointly examined emotional regulation and social functioning together within the adolescent population in India. This highlights the need to investigate these variables simultaneously.

Research Gap

Even Though some studies suggest childhood trauma could have a negative impact on a person's emotions and their relationships with others, there's a lot that's not been discovered. This is because most studies concern themselves with one or two issues or deal with adults or people from cultures in the West, which would make it hard to apply the results to Indian teens. There aren't many studies in India conducted simultaneously on childhood trauma, emotional regulation, and either social abilities or deficits, employing a Childhood Trauma Questionnaire, Emotion Regulation Questionnaire, and Social Functioning Questionnaire. Because a complete check hasn't been developed on these aspects simultaneously, a lot remains to be discovered about childhood trauma and the impact it has upon the emotional and social development of Indian teens. The aim of this study would, therefore, be to use well-tested instruments to explore these aspects and see how they are interrelated within a sample population of Indian teenagers

Review of literature

Childhood trauma is one of the most significant risk factors when it comes to the development of issues related to the regulation of emotions and the development of

social relationships during adulthood. Examples of trauma that can disrupt the psychological development of an individual, particularly during his adolescence, include emotional, physical, or sexual abuse, as well as experiences of neglect. This is because adolescence is a stage when the intensity of emotions is heightened, as well as the need for socialization. Numerous studies have indicated that problematic experiences in early life have been known to have a link to the regulation of emotions, consequently influencing interpersonal relationships. (Compas *et al.*, 2014) specifically discuss coping and emotion regulation from childhood through early adulthood and their developmental significance.

Research has indicated that there is a link between childhood traumas and problems with regulating emotions.

Kim and Cicchetti (2010) found that the children who experienced abuse struggled with the ability to grasp and control their emotions and therefore tended to have emotional issues. Shields and Cicchetti (2001) found in their studies that children who experienced trauma tended to be emotional and have issues with dealing with their emotions. This helps confirm the hypothesis because it shows how trauma affects the control of emotions and the emotional reactions exhibited in adolescence. Studies have also indicated a strong correlation between trauma in childhood and difficulties in social functioning.

Emotion regulation exhibited by individuals contributes largely to the influence of trauma on social functioning.

Gross and John (2003) found that the use of cognitive reappraisal was beneficial for regulating emotions and was related to positive outcomes with regards to both emotions and social behavior, while the use of expressive suppression was associated with poor social behavior. This was confirmed by the study of Burns *et al.* (2010), where the study discovered that people with trauma experience made use of expressive suppression as opposed to reappraisal. Collectively, all these studies indicate that childhood trauma has a significant impact on both control within and adjustment outside, thereby denoting adolescence as a vulnerable period.

Emotion regulation problems can have negative consequences for social problems, and problems with social skills can lead to more emotional distress, thus entering a vicious circle of issues. Even if there has been extensive attention paid to this topic around the globe, there have been very few studies on these issues combined, particularly in Indian adolescents in this

context.

Hence, there's an obvious void that needs to be satisfied by conducting some research on how emotional control and social abilities can be impacted by trauma, particularly during adolescence and based on a specific culture

Objective of the study

1. To assess the level of childhood trauma among adolescents.
2. To examine the relationship between childhood trauma and emotional regulation.
3. To explore the relationship between childhood trauma and social functioning.
4. To determine whether childhood trauma predicts emotional regulation and social functioning among adolescents.

Hypotheses

1. Childhood trauma is likely to display a negative correlation with emotional regulation strategies in adolescents.
2. There would likely be a negative relationship between childhood trauma and social functioning in the adolescents."
3. Variables for emotional regulation strategies would relate to social behavior in adolescent

METHODOLOGY

Research Design

The study used a correlational design to look at the relationship between childhood trauma, emotional regulation, and social functioning. This design was suitable because it allowed for examining naturally occurring associations between different variables without changing them.

Participants / Sample

The sample included adolescents who were selected through purposeful sampling. They ranged in age and included both boys and girls. Only those who provided informed consent and completed all questionnaires were included in the final analysis. The sample consisted of 84 adolescents aged 13-18 years, selected through purposive sampling from schools and community settings. Participants who could understand English or Hindi and provided assent along with parental consent were included.

Adolescents with diagnosed psychiatric or developmental disorders were excluded.

Tools / Instruments

Childhood Trauma Questionnaire (CTQ)

For the purposes of measuring the respondents' experiences of the trauma that occurred prior to the age of 18, the Childhood Trauma Questionnaire (CTQ, Bernstein *et al.*, 2003) was applied. This scale taps five types of trauma: the emotional abuse, physical abuse, sexual abuse, emotional neglect, and physical neglect of the respondents. This scale uses the likert scale, with high scores signifying high amounts of trauma. In addition, the scale has been proven to have high reliability, as reflected in the high Cronbach alpha values of its five scales, that range from 0.79 to 0.94. For the purposes of the current study, the CTQ scale measured the amount of the trauma that the adolescents experienced.

Emotion Regulation Questionnaire (ERQ)

The Emotion Regulation Questionnaire (ERQ) developed by Gross and John in 2003 is a tool to measure the emotion regulation strategy used by adolescents. ERQ is specifically designed to measure two distinct emotion regulation strategies, namely cognitive reappraisal and expressive suppression. In cognitive reappraisal, the strategy followed by the individuals is to change their internal state by altering their interpretation of a situation to decrease the emotional impact, whereas in another strategy named expressive suppression, the person deliberately inhibits the expression of their emotions. In this study, the ERQ test is conducted to analyze the way in which adolescents control their emotions by adapting to their experiences in life.

Social Functioning Questionnaire (SFQ)

The Social Functioning Questionnaire was also employed to measure the extent of the participants' social functioning. This tool measures the ability of an individual to establish interpersonal relationships (Tyrer *et al.*, 2005). Items are rated using a form of the Likert scale, with higher scores reflecting more problems in social functioning. Previous research had found acceptable reliability and validity for the SFQ. In this study, the SFQ was used as a means of assessing the participants' social adaptations

The questionnaire looks at areas like relationships with friends, communication skills, taking part in social

activities, and sense of responsibility. People rate each item on a scale, with higher scores showing more problems with social functioning. Studies show the SFQ has acceptable reliability and validity.

Procedure

After getting informed consent, participants received the questionnaires in a standard order. Clear instructions were given to ensure understanding. Privacy and anonymity were maintained, and participation was voluntary. Data were collected and analyzed using standardized methods.

RESULTS AND DISCUSSION

This study investigated the relationships between childhood trauma, emotion regulation strategies, and social functioning in adolescents. Descriptive and correlation statistical analysis was used to determine the distribution of the scores and the relationships between the variables in this study. The data for this study was collected from 84 adolescents.

The descriptive statistics suggested that participants did experience levels of childhood trauma that were at least to some degree observable, and that emotional forms of childhood trauma were more prevalent than physical and sexual forms. From the dimensions of childhood trauma, the emotional neglect subgroup had the greatest average ($M=13.15$, $SD=4.52$) than emotional abuse ($M=12.46$, $SD=3.43$). The data implies that there is considerable prevalence in the study group in relation to issues involving emotional neglect and emotional abuse (Table 1). This is in keeping with data showing that emotional forms of childhood trauma are more common and not so overt in non-clinical groups of adolescents.

By contrast, physical abuse ($M = 8.40$, $SD = 3.74$) and sexual abuse ($M = 7.96$, $SD = 4.17$) had lower scores,

reflecting that there was a lower level of participants who had high levels of these experiences. Notwithstanding these lower scores, the fact that these forms of trauma are present is also significant in that it has already been shown in the literature that exposure to more than one type of adverse experience has a correlation with later problems in the realms of emotion regulation and interpersonally. A moderate level of physical neglect was found ($M = 10.20$, $SD = 3.16$).

Regarding emotion regulation strategies, there was more use of cognitive reappraisal ($M = 27.35$, $SD = 8.09$) than expressive suppression ($M = 18.15$, $SD = 6.02$) in the current study. This shows that the group relied more on beneficial emotion regulation strategies. Cognitive reappraisal, which is a technique where people try to change their appraisal of emotional experiences, typically has more beneficial Psychological and Social Outcomes in life. The higher mean score for cognitive reappraisal may reflect developmental improvements in emotional understanding during adolescence or exposure to adaptive coping strategies through social and educational environments.

Expressive suppression, where one suppresses the external display of emotions, had relatively low mean scores. Even when suppression is employed conditionally, chronic use of this strategy has been found to cause emotional distress and impair interpersonal functioning. The moderate score on suppression indicated that the adolescents occasionally employed the strategy in controlling their emotions but did not largely bank on it.

Pearson correlation analysis showed that there was a very weak negative correlation between total trauma in childhood and cognitive reappraisal ($r = -.10$, $p > .05$), as well as a very weak negative correlation between trauma in childhood and social functioning ($r = -.09$, $p > .05$). These values are very weak and also nonsignificant. This suggests that trauma does not act as a strong predictor of emotional regulation and social functioning for this population. While the direction of the correlation relates well to theoretical foundations that predicted this study, the values are of low importance. Overall, the results suggest that while childhood trauma was present among participants, its direct associations with emotion regulation strategies and social functioning were limited in strength within this non-clinical adolescent population.

The results show that participants had moderate levels of emotional neglect and abuse. Cognitive reappraisal scores were higher than expressive

Table 1 : Mean and Standard Deviation of Study Variables (N = 84)

Variable	Mean	Standard deviation
Physical Abuse	8.40	3.74
Emotional Abuse	12.46	3.43
Sexual Abuse	7.96	4.14
Physical Neglect	10.20	3.16
Emotional Neglect	13.15	4.52
Cognitive Reappraisal	27.35	8.09
Expressive Suppression	18.15	6.02
Social Functioning SFQT)	67.49	11.87

suppression, suggesting that participants used more adaptive emotional control strategies.

Correlation Analysis

Pearson's correlation coefficients were calculated to look at how childhood trauma, emotional regulation, and social functioning are connected.

We used Pearson's correlation to check how the total amount of trauma, emotion regulation methods, and social functioning are connected. The results are in Table 2.

Table 2 : Correlation Matrix of Childhood Trauma with Emotional Regulation		
Variable	Pearson r	Sig. (p)
Childhood Trauma – cognitive Reappraisal	-0.10	0.31
Childhood Trauma- Expressive Suppression	0.06	0.58

Childhood trauma shows a very weak negative correlation with cognitive reappraisal. It shows a very weak positive correlation with expressive suppression. Both correlations are not statistically significant ($p > .05$) (Table 3).

Table 3 : Correlation Matrix of Childhood trauma with Social Functioning		
Variable	Pearson r	Sig. (p)
Childhood Trauma – SFQT	-0.09	0.41

Childhood trauma has a very weak negative relationship with SFQT scores. The relationship is not statistically significant.

The current research has investigated the associations between childhood trauma, emotion regulation strategies, and social functioning in adolescents. Our findings partially support the hypothesis of a negative impact of early adversity on the course of both emotional and interpersonal development. Nevertheless, the observed associations were weak and did not reach statistical significance, which underlines the cautious interpretation of trauma-related outcomes within non-clinical adolescent samples.

Whereas there were weak negative associations of childhood trauma with cognitive reappraisal ($r = -0.10$) and social functioning ($r = -0.09$), neither of these associations reached significance ($p > .05$). This suggests that, within the present sample, childhood trauma in isolation was not a substantial predictor of either emotion

regulation difficulties or impaired social functioning. However, the observed trends were in the theoretically expected direction, which aligns with developmental and trauma-based models that early adversity may subtly impact emotional processing and interpersonal behaviors rather than directly or uniformly resulting in outcomes. One possible source of these non-significant findings may be the presence of protective and moderating variables such as resilience, social support, adaptive coping, and developmental change during adolescence (Švecová *et al.*, 2023). Adolescence is characterized by growing cognitive maturity and increased awareness of emotions, which may provide an individual the capacity to implement compensatory mechanisms despite experiencing adversity earlier in their development. Therefore, the effects of trauma may be diminished or moderated in community based, non-clinical samples, as is the case in the current study.

The findings also showed that adolescents rated the use of cognitive reappraisal to a relatively greater extent than expressive suppression. Cognitive reappraisal seemed to be relatively higher, and the sample seemed to possess adaptive strategies for regulating emotions, but since there was not a direct statistical relationship explored between cognitive reappraisal and social functioning, this observation needs to be ascertained statistically.

Expressive suppression showed only a weak positive but non-significant correlation with childhood trauma. This result indicates that slightly more traumatized adolescents might depend on expressive suppression of emotion; however, the lack of statistical significance indicates that suppression was not a dominant or consistent coping strategy within the sample. This reinforces contemporary perspectives on emotion regulation, which emphasize flexibility and context-dependent use of strategies rather than rigid reliance on maladaptive patterns. Notably, results highlight that emotion regulation strategy use and social behavior are complex phenomena that are mediated by a variety of co-occurring factors rather than exposure to trauma *per se*. Emotional development occurs in the context of family relations, peer settings, cultural mandates, and individual differences in personality style. Thus, results indicate that trauma must be conceptualized as merely one factor in a more complex developmental context.

Implications

The above results have important implications for mental health practitioners, teachers, and policymakers. For adolescents, trauma-informed intervention strategies need to emphasize enhancing emotional awareness and regulation abilities. Although cognitive reappraisal is hypothesized to be an adaptive coping strategy, it is not possible to statistically verify the direct effect of this strategy on social behavior. It is recommended that intervention strategies be based on existing evidence while encouraging more research to verify the above relationships. Early intervention to prevent problems in emotional regulation needs to be emphasized in order to prevent long-term interpersonal and psychological difficulties.

Limitations and Future Work

There are certain limitations of this study must also be considered. Firstly, there could be biases within this study due to the utilization of self-reporting instruments. Secondly, this study was cross-sectional, and this restricts causal interpretations and does not allow any inference on the nature of the relationship among trauma, emotion regulation, and social functioning. Thirdly, this study had a relatively small sample size, which was selected by purposive sampling.

Future research should utilize long-term study design to assess developmental patterns and causal links between trauma and outcomes in terms of emotions and social aspects. Further study should test the link between emotion regulation strategies, such as cognitive reappraisal, and social behavior using correlation and predictive analysis. Including qualitative study and data from multiple sources may help generate more insights.

In conclusion, with regard to the research, it can be seen that even when controlling for other variables, there is no statistical significance found in the data as to whether childhood trauma is an influential factor in the regulation of emotion and social functioning as it applies to adolescents, although there is support for the models of emotion regulation by the trends found in the research.

Conclusion

This research has helped in grasping the complexities involved in the linkage between childhood traumas and emotional regulation, as well as social functioning, particularly in the case of adolescents. Even if there was a weak negative correlation between childhood traumas, emotional regulation, and social functioning, it did not

achieve the status of significance. This implies that, by itself, childhood trauma can be a weak predictor for difficulties in emotional regulation or social functioning in a non-clinical group of adolescents. This could be due to the fact that the effect can be subtle, with various complex factors involved.

Results further show that adolescents self-reported higher descriptive levels of cognitive reappraisal than the expressive suppression of emotions as an emotion regulation strategy. Cognitive reappraisal was descriptively higher, showing a possible adaptive tendency, but its influence on shaping social functioning could not be statistically established in the present study and calls for further empirical confirmation. Since no direct relationship was tested among the strategies of emotion regulation and social functioning, conclusions regarding protective or predictive effects have to be interpreted with caution. In sum, the results underscore the need for careful interpretation with regard to outcomes associated with trauma, especially for studies with community-based samples of adolescents. Processes associated with emotional and social development during adolescence may be impacted by a variety of factors, such as those associated with resilience, social support, or the use of coping resources that can act to mitigate adversity.

The current study highlights the imperative to adopt a trauma-informed and developmentally sound framework in a schooling or mental health facility and also verifies the future implications of extensive statistical modeling to understand patterns between childhood trauma, emotion strategies, and adolescent social behavior.

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