



EFFECT OF ADVERSE CHILDHOOD EXPERIENCES ON EMOTIONAL INTELLIGENCE (EI) AND SPIRITUAL INTELLIGENCE (SI)

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ABSTRACT

The current study investigates the significant influence of Adverse Childhood Experiences on emotional intelligence (EI) and spiritual intelligence (SI), which are essential aspects of human functioning that greatly contribute to overall well-being. Adverse childhood experiences refer to a variety of potentially traumatic events or hardships that individuals may face throughout their early years, such as abuse, neglect, dysfunction in the household, and other sources of stress. Adverse Childhood Experiences can hamper the development of emotional intelligence by negatively affecting key components such as empathy, self-awareness, and emotional regulation. This, in turn, impairs individuals' capacity to manage relationships and effectively cope with stressors. Moreover, ACEs have an impact on spiritual intelligence as well, hindering people's ability to transcend, create meaning, and find existential contentment. A person's sense of resilience, purpose, and connection can all be disrupted by childhood trauma, which can cause spiritual pain and existential angst. This dissertation sheds insight on the long-lasting effects of Adverse Childhood Experiences on Emotional Intelligence and Spiritual Intelligence. Through the clarification of these connections, it emphasizes the value of trauma-informed strategies for people who faced adverse effects in their childhood and the demand for interventions that foster recovery, growth, and resilience.

Keywords: Adverse childhood experiences, Emotional Intelligence, Spiritual Intelligence, Psychological Development, Coping mechanisms.

INTRODUCTION

The study of human development and maturation has expanded in recent decades to include the intricate interplay between genetics, upbringing, and the external environment. A person's short-term health and long-term mental and emotional development are both affected by the presence or absence of adverse childhood experiences (ACEs). This study primarily aims to examine the effects of adverse childhood experiences (ACEs) on spiritual intelligence (SI) and emotional intelligence (EI), two crucial components of human functioning.

Scholars like John Mayer and Peter Salovey popularized the term "emotional intelligence," which refers to the ability to recognize, understand, and control one's own and other people's emotions. Being self-aware, compassionate, and emotionally stable are all parts of it, and they're all important for handling social connections and being resilient when things go tough.

Spiritual intelligence, on the other hand, is a relatively new concept in psychology that delves into the capacity to transcend mundane experiences, generate meaning, and connect with greater existential truths. A deep understanding of life's purpose, interconnection, and existential fulfillment are all components of spiritual intelligence, which goes beyond just being able to control one's emotions. It is more than just emotional intelligence, albeit it has certain commonalities.

It is impossible to overstate the significance of emotional and spiritual intelligence in improving general health. According to studies, they significantly impact many facets of human existence, including mental health, interpersonal connections, and overall happiness. However, these crucial facets of human functioning have not been well investigated in the existing research in relation to the impacts of adverse childhood experiences.

Specifically, this study intends to bridge that gap by investigating the link between traumatic events in early life and EQ and SVH. This research aims to shed light on the complex ways in which ACEs may impair EQ and SSI development via conducting a thorough analysis. Furthermore, it aspires to explore potential avenues for fostering personal development and resilience when confronted with adversity.

1.2 Background of the study

Adverse childhood experiences (ACEs) are the result of a confluence of research in areas like psychology, neuroscience, and spirituality, and how they impact the development for emotional intelligence or spiritual intelligence. The CDC and Kaiser Permanente conducted seminal studies in the 90s that may be considered the genesis of this investigation. Findings from this study highlight the need of addressing early trauma to improve health in the long run.

Due to this seminal research, the concept called Adverse Childhood Experiences gained traction. Substance abuse, mental disease, and chronic sickness are just some of the physical and mental health problems that adults having a history of childhood hardship are more likely to suffer from as adults, according to the research. There is a rising interest in understanding the mechanisms that explain the relationship between Adverse Childhood Experiences (ACEs) and various human functions, since further research has confirmed the extensive and long-lasting effect of ACEs on these areas.

Emotional intelligence, spiritual intelligence, and this area of study have all been looked at by scientists because of its importance to human development and health. Psychologists Simon Salovey, John Mayer, et Daniel Goleman have shown that emotional intelligence is crucial for healthy relationships, resilience, and overall mental health. In addition, the idea of spirituality's acceptance has shifted attention to people's capacities to transcend mundane constraints, generate meaningful experiences, and find direction in life.

Each of these fields has done a lot of research on its own, but the connection between them is still very little understood. To successfully overcome the existential and emotional fallout of early life hardship, it is essential to understand how trauma in childhood affects spiritual and emotional intelligence.

Also, new insights from neurobiology have shed light on the neural mechanisms by which early life stresses may affect a person's emotional and spiritual development. Traumatic experiences in childhood are associated with alterations in brain structure and function, according to the research. This drives home the intricate web

of connections between formative events, the plasticity of the brain, and the impact on mental health in later years.

Considering this background, the purpose of this research is to further our knowledge of the complex relationships among ACEs, EQ, and suicidal ideation. By bringing together insights from several domains, this study aspires to deepen our understanding of how childhood trauma impacts psychological and spiritual health. Using an interdisciplinary perspective, the present study's results may also provide light on therapies and behaviors that might encourage healing, persistence, and development among those impacted by childhood stresses.

1.3 Emotional Intelligence and its components

A person's capacity to deftly and intelligently traverse the intricate domain of emotions is encompassed by the complicated notion of emotional intelligence (EI), which goes beyond mere intellect (Mayer & Salovey, 1997). To have emotional intelligence (EI), one must first and foremost have a deep understanding of their own emotions. This includes being able to detect small shifts in mood, identify their root causes, and assess their own strengths and shortcomings. Before acquiring other aspects of emotional intelligence, one must first build self-awareness.

The ability to manage and adapt one's emotional responses to different situations is known as self-regulation, and it is a crucial component of emotional intelligence. It calls for self-regulation as well as the capacity to channel negative emotions constructively, adapt to changing circumstances, and keep cool under pressure. People who are good at controlling their emotions are more resilient emotionally, meaning they can bounce back fast from setbacks and keep going even when things become tough.

The third component of emotional intelligence (EI), social awareness, is being more attuned to the emotions and needs of those around you than just being self-aware and managing your own emotions. Having empathy allows people to connect with others on a profound and meaningful level, read nonverbal cues, and comprehend and respond appropriately to social cues. People who are socially aware show genuine interest in learning about other people's lives, building trust, and encouraging others to feel included in their social groups.

Expertly managing social connections, resolving disagreements, and participating in collaborative problem-solving comprise relationship management, the ultimate aspect of emotional intelligence (EI). It encompasses the abilities to communicate clearly, stand up for oneself, and form and maintain positive relationships. Others who are good at managing their relationships may inspire and uplift others around them, resolve conflicts amicably, and create cohesive teams.

We can't stress enough how important Emotional Intelligence (EI) is in our personal and professional interactions. According to research, Emotional IQ (EI) is a better predictor of success in life than traditional IQ tests (Goleman, 1998). People with high Emotional Intelligence (EI) are more skilled at handling stressful situations, navigating complex social relationships, and succeeding in many areas of life. Relationships characterized by empathy, mutual respect, and effective communication tend to be healthier and more fulfilling within people's particular circumstances. In professional settings, people often shine when given leadership roles; this is when they get to show off their skills in motivating and inspiring others, settling problems amicably, and thriving in an ever-evolving work environment. Individual well-being, career success, and overall life satisfaction all depend on a person's capacity to develop emotional intelligence.

1.4 Spiritual Intelligence and its components

Spiritual intelligence is an intricate and diverse concept that includes an individual's ability to go beyond ordinary experiences, create meaning, and have knowledge of their existence (Emmons, 2000). SI, or spiritual intelligence, encompasses the capacity to access and effectively employ spiritual resources in order to confront and overcome the difficulties of life, discover purpose and significance, and establish a connection with a higher power or entity beyond oneself (Emmons, 2000; Zohar & Marshall, 2000).

The dimensions of SI comprise multiple aspects that contribute to people's spirituality and worldview. Religious rituals, meditation, or encounters that evoke a sense of awe and amazement can achieve transcendence, which is the capacity to transcend ordinary concerns and establish a connection with superior realities (Emmons, 2000). Existential awareness is a heightened sensitivity to the fundamental problems of existence, including the nature of being, the significance of suffering, and the search for the ultimate truth (Emmons, 2000). Meaning-making is the act of attributing meaning and creating a sense of structure for one's lived experiences, beliefs, and values. It serves as a guide for dealing with the difficulties and uncertainties of life (Emmons, 2000). Connectedness refers to an individual's perception of belonging and interdependence with people, nature, and the universe. It promotes feelings of harmony, kindness, and empathy (Emmons, 2000).

The convergence of spirituality, psychology, and well-being highlights the significant impact of religious and spiritual beliefs on individuals' emotional and mental health (Koenig, 2009). Research links spiritual engagement and religious activities to several beneficial effects, including increased resilience, reduced stress and depression, and enhanced general health (Koenig, 2009; Emmons, 2000). In addition, spirituality offers a structure for comprehending and finding meaning in difficult situations, discovering purpose in pain, and developing internal capabilities for managing and adjusting (Pargament, 1997). Integrating spiritual ideas into psychological interventions might improve their effectiveness and satisfy individuals' overall needs, leading to growth, healing, and development (Pargament, 1997; Emmons, 2000).

To put it simply, spiritual intelligence refers to an individual's ability to transcend, be aware of existential matters, create meaning, and establish connections. It serves as a framework for addressing life's existential concerns and difficulties (Emmons, 2000). Comprehending the point where spirituality, the field of psychology, and well-being converge is essential for fostering comprehensive health and attending to individuals' spiritual requirements in therapeutic settings (Koenig, 2009; Pargament, 1997). Psychologists and clinicians can enhance their understanding of clients' spiritual concerns and incorporate spiritual aspects into their interventions, promoting resilience, healing, and flourishing. Research from Emmons (2000), Koenig (2009), and Pargament (1997) supports this recognition of the importance of spiritual aspects in human experience.

1.5 Impact of Adverse Childhood Effects on Emotional Intelligence

Research repeatedly shows that adverse childhood experiences have a significant effect on the growth of emotional intelligence, which in turn affects individuals' psychological health and ability to interact with others. Research has demonstrated that being exposed to adverse childhood experiences is linked to impairments in many aspects of emotional intelligence, such as self-awareness, self-control, social awareness, and managing relationships (McLaughlin et al., 2010; Cloitre et al., 2009).

The ways in which early childhood stressors impact certain aspects of emotional intelligence are complex and interwoven. Children who undergo prolonged stress or trauma might acquire a lack of self-awareness due to psychological numbing or dissociation, which impairs their ability to appropriately identify and categorize their own feelings (Cloitre et al., 2009). It can interfere with the formation of self-regulation abilities by disrupting stress response systems, resulting in challenges in controlling impulses and feelings (McLaughlin et al., 2010).

Moreover, adverse childhood experiences frequently undermine individuals' social awareness as well as empathy by hindering their capacity to effectively identify and understand the feelings and viewpoints of others (McLaughlin et al., 2010). Children raised in neglectful, abusive, or violent homes may face difficulties in developing empathy and sensitivity towards others' emotional signals, which can negatively affect their social relationships and interactions.

The ramifications of adverse childhood experiences for interventions and assistance for those who have experienced childhood trauma are substantial. Understanding the influence of adverse childhood experiences on emotional intelligence emphasizes the significance of trauma-informed strategies that target the fundamental emotional and relational injuries that arise from childhood hardships (Felitti et al., 1998). Interventions focused on fostering emotional regulation, fostering the development of social skills, and

developing resilience can help reduce the impact of adverse childhood experiences on emotional intelligence (EI) and improve individuals' ability to cope effectively (Cloitre et al., 2009).

Furthermore, it is crucial to create a supportive and loving atmosphere to promote healing and recovery in people who have experienced adverse childhood experiences. Developing a culture that is knowledgeable about trauma and its effects and that places importance on safety, trust, and empowerment can help promote the recovery of emotional well-being and the development of healthy relationships (Felitti et al., 1998). Through acknowledging the influence of adverse childhood experiences on emotional intelligence and adopting focused interventions, healthcare professionals and experts can enable individuals to overcome the lasting effects of childhood trauma and cultivate a more positive future marked by emotional strength and overall wellness.

1.6 Impact of Adverse Childhood Effects on Spiritual Intelligence

Research on the effects of adverse childhood experiences on spiritual intelligence has shown an intricate connection between traumatic experiences in childhood, an individual's existential orientation, and their spiritual stability. Studies investigating the correlation between adverse childhood experiences and suicidal ideation indicate that childhood trauma can have a profound effect on individuals' fundamental views about existence, their sense of purpose, and their connection to something larger than themselves (Braga et al., 2018).

Children who encounter Adverse Childhood Experiences, including abuse, neglect, or dysfunctional families, may form existential views influenced by their negative encounters. For instance, being consistently exposed to long-term stress or traumatic experiences during childhood might result in a deeper sense of existential anxiety or a loss of belief in the kindness of the world (Cicchetti & Toth, 1995). In addition, Adverse Childhood Experiences can disturb individuals' sense of significance and purpose as they grapple with reconciling their difficult pasts with their views about the essence of existence and the quest for purpose (Braga et al., 2018). Moreover, childhood trauma might affect individuals' perceptions of their own connection and their connection with others. Children who encounter adverse childhood experiences may develop emotions of isolation, detachment, or estrangement from their own emotions, bodies, or identities. In addition, Adverse Childhood Experiences can erode an individual's capacity to have faith in others and establish significant connections, resulting in a feeling of relational detachment and solitude.

Combining trauma-informed strategies with spiritual interventions shows potential for promoting healing and personal development in those affected by adverse childhood experiences. Clinicians & practitioners can help clients integrate their traumatic experiences into their spiritual narratives and develop a sense of coherence and meaning by acknowledging the spiritual aspects underlying trauma and addressing existential issues. In addition, spiritual interventions that prioritize activities that involve meditation, mindfulness, and prayer can equip individuals with techniques for managing emotions, developing resilience, and nurturing a feeling of connection to oneself and others.

To summarize, the impact of childhood trauma on spiritual intelligence highlights the significance of resolving individuals' existential anxieties and combining trauma-informed strategies with spiritual therapies for the purpose of healing and personal development. By acknowledging the significant influence of childhood trauma upon existential views, a sense of purpose, & belonging, professionals can offer comprehensive assistance that attends to individuals' emotional, intellectual, and spiritual requirements.

REVIEW OF LITERATURE

(Merrick, 2017) analysed Childhood Adversity has a substantial influence on the mental well-being of adults, elevating the likelihood of experiencing depression and suicidal tendencies. This study utilized data from Wave II of the CDC-Kaiser ACE Study, which had 7465 adult individuals who were part of Kaiser Permanente in southern California. The findings demonstrated a clear and incremental correlation between the increased ACE score and the probability of engaging in moderate to heavy alcohol use, drug abuse, experiencing depressive symptoms, and making suicide attempts during adulthood. Moreover, there was a strong correlation between receiving corporal punishment throughout childhood and experiencing various

mental health issues, as stated by the individuals themselves. The study emphasized the significance of analysing both aggregate ACE ratings and individual ACEs to gain a better understanding of both risk and protective variables for future prevention efforts, as more than 80% of the sample reported being exposed to at least one ACE.

(Webster, 2022) has emphasized the widespread occurrence and harmful consequences linked to Adverse Childhood Experiences (ACEs) in children. Nevertheless, there is still a lack of comprehension of the consequences of ACE exposure in early infancy. This study aims to evaluate the prevalence of Adverse Childhood Experiences (ACEs) among children aged six and below, as well as their influence on health and developmental outcomes, using data from the 2016 National Survey of Children's Health. This study highlighted the significance of interventions focused on fostering stable attachments in families with young children, as well as the necessity of parental education to reduce the impact of adverse childhood experiences (ACEs) in the future. This research enhances our understanding of the influence of Adverse Childhood Experiences (ACEs) on early childhood development by analysing the connection among individual ACEs and aggregate ACE scores that are associated with health and developmental concerns.

(Loudermilk, 2018) have shown that people with adverse childhood experiences (ACEs) and risky alcohol consumption practices can suffer from long-term negative physical and mental health problems due to insufficient interventions. The objective of this study was to determine the likelihood of engaging in alcohol consumption behaviours, specifically binge drinking (BD) and any drinking (AD), among people who have experienced adverse childhood experiences (ACEs). An analysis was undertaken using the Behavioural Risk Factor Surveillance System (BRFSS) 2011-2012 data. Descriptive statistics, as well as simple and multiple logistic regression analyses, were performed. These findings emphasize the significance of targeted treatments for individuals with Adverse Childhood Experiences (ACEs) to reduce alcohol use behaviors.

(Eshaghi, 2023) aimed to determine the impact of emotional intelligence, personality traits, and spiritual intelligence on life satisfaction was carried out. The study used a retrospective descriptive approach, focusing on post-graduate students aged 23-40. The sample includes both male and female participants, and 274 individuals were selected using convenience sampling. The research used standardized questionnaires, Baron's emotional intelligence instrument, Eysenck's personality questionnaire, and King's spiritual intelligence instrument. Pearson's correlation coefficient and regression tests were used to analyze the data. The findings showed that emotional intelligence accounts for 9% of the variability in life satisfaction scores, while personality traits and spiritual intelligence score account for 11% and 15% of the variance, respectively. The concept of life satisfaction gained significant interest since the late 1970s, with a significant increase in published literature since the mid-1960s. The study suggested that life satisfaction has evolved over the past thirty years, with a hierarchy of dimensions, starting with physical and material well-being, followed by rights, social inclusion, interpersonal relationships, self-determination, personal growth, and emotional well-being.

(Dewi, 2022) study investigated the correlation between Emotional intelligence and attachment styles of those who have had Adverse Childhood Experiences (ACE). This study utilized quantitative methodologies and selective sampling procedures to choose participants from the adult population, aged 19-45 years, who had ACE scores ranging from 1 to 10. The findings indicated that there was a correlation between the Five Domains of Attachment measures and the levels of Total EI ($r = -.121 - .576$) and Composite EI ($r = -.17 - .74$) in individuals with ACE, with the exception of Confidence with Interpersonal & Stress Management as well as Discomfort with Intrapersonal and Adaptability. The study also discovered that individuals with ACE exhibited comparable levels of EI competence across the five scales, but demonstrated lower levels of flexibility and stress management competence. Previous research has found a continuous correlation between attachment style and emotional intelligence (EI)

(Priyam, 2021) has researched to assess how medical interns' emotional intelligence is affected by their parents' perceptions and by traumatic events they had as children. At least one negative incident occurred to 66.66 percent of the study's participants while they were children at a teaching hospital in eastern India. Emotional intelligence was measured in four domains: self-awareness, emotional regulation, social-emotional regulation, and relationship management using the Quick Mental Intelligence Self-Assessment. Using overall Adverse Childhood experiences Questionnaire, we assessed the impact of traumatic experiences on children. In order to gauge how the participants saw their parents, we used the Perceptions on Parent Scale. Researchers found that those who had traumatic experiences as children were less likely to be able to control their emotions and relationships as adults. Emotional intelligence is negatively affected by traumatic experiences in

childhood, but it is positively affected by more parental involvement, warmth, autonomy, and support, as well as by better social understanding of emotions & relationship management.

(Tolliver, 2020) Resilience can exhibit variability based on the specific nature of the stress encountered, which can be categorized into three distinct types: positive, manageable, and toxic. Positive stress is inevitable and has advantages for the individual undergoing the stressor, but toxic stress can result in reduced coping skills. This research investigates the influence of negative childhood experiences (ACES) and characteristics that promote resilience and protection during childhood (CPFs) on the emotional intelligence (EI) of leaders in the workplace. The study employed the Adverse Childhood Experiences Questionnaire, the Resilience Questionnaire, and the Workgroup Emotional Intelligence Profile-short version evaluation to examine a total of 93 participants. The findings indicated that resilience/protective factors were a substantial predictor of emotional intelligence, whereas adverse childhood experiences did not have a significant impact. Resilience is a crucial quality for leaders as it enables them to mitigate the impact of adverse childhood experiences (ACEs) and reduce their occurrence in the future.

(Hart, 2014) thesis explored gender-specific pathways from adverse childhood experiences (ACEs) to negative outcomes, particularly focusing on psychological distress and offending among women. Overall, the study supported the use of an attachment framework in understanding the impact of ACEs and highlighted the significance of emotion coping interventions for women ex-offenders with ACEs. The findings contributed to recommendations for future research and interventions in the field of ACEs, psychological distress, and offending among women.

(Romero, 2022) The majority of people in the United States, over 60%, had experienced at least one adverse childhood event (ACE). The effects of Adverse Nevertheless, researchers discovered a significant statistical correlation between psychological discomfort and high exposure to ACEs. This suggested that participants who reported higher levels of psychological distress also reported experiencing a greater number of ACEs. The project aimed to increase awareness of the importance of emotional intelligence and its correlation with psychological discomfort in individuals who had experienced adverse childhood experiences (ACEs).

(Zhao, 2021) Childhood maltreatment had a pervasive detrimental effect on both physical and mental well-being. Specifically, it could result in two common psychological symptoms: depression and anxiety. A random recruitment of 811 Chinese college students was conducted to participate in the study. They were requested to take three assessments: the Childhood Trauma Questionnaire (CTQ), the Symptom Checklist 90 Scale (SCL-90), and the Wong and Law Emotional Intelligence Scale (WLEIS). The findings demonstrated that emotional intelligence served as a crucial mediator in the relationship between childhood maltreatment and the development of depression and anxiety. This provided a theoretical basis for enhancing the mental well-being of individuals who had experienced childhood maltreatment by improving their emotional intelligence.

(Curtis, 2018) Faith-based organizations and non-profit groups that prioritize family support may have failed to consider the long-term effects of childhood hardship on multiple generations within families. This study utilized a combination of qualitative and quantitative approaches to investigate the correlation between adverse childhood experiences (ACEs) and inner protective elements such as hope, resilience, faith, and attachment. The study approached this investigation from the perspective of attachment and resiliency theories. The findings indicated that those with higher ACEs scores exhibited elevated levels of attachment anxiety, as well as significant associations with hope, spirituality, and various attachment subscales. The qualitative data identified themes that focused on strengths and themes that focused on adversity, offering significant insights for counseling programs. The results emphasized the significance of strengthening elements such as attachment stability and resilience, in addition to trauma-informed understanding and parenting techniques, to provide assistance for families affected by childhood tragedy.

(Tekin & Halil, 2022) A study was conducted to investigate the correlations between spiritual intelligence, well-being, and attitudes towards violence among Turkish teenagers. The sample consisted of 466 high school students, ranging in age from 14 to 19, who were recruited by convenience sampling. significant correlation between attitudes towards violence and spiritual intelligence. Furthermore, a modest positive and statistically significant correlation was observed between well-being and levels of spiritual intelligence. The conducted multiple regression analysis revealed that the combination of well-being and spiritual intelligence accounted for 34% of the total variation in attitude scores towards violence. Specifically, well-being accounted for 32% of the variation, while spiritual intelligence contributed

an additional 2%. These findings indicate that fluctuations in well-being and spiritual intelligence scores are indicative of fluctuations in attitudes towards violence.

(Purdhani & Saxena, 2020) Parents, who are typically the primary caretakers, play a crucial role in the lives of their children. Being a caregiver for their children is an unforeseen "occupation" that involves unexpected challenges and changes. Parents with children with disabilities may face numerous challenges, including health issues, financial burdens, time constraints, and limitations on social engagement, such as pursuing a career. The Spiritual Intelligence scale (Mishra) and Emotional Competence Scale (Bharadwaj) were utilized to assess the participants' levels. The T test was employed to quantify the scores. Health care professionals will prioritize the mental health of parents, particularly those who have limited social support and originate from low-income families, due to the growing recognition of the significance of mental health disorders. Additional investigations should be conducted to assess the child's ailment and impairment, the utilization of healthcare services, and the extent and caliber of societal assistance, on a national scale, to remedy the framework for delivering support services to children with disabilities and their caregivers.

(Priskillaa,2020) Intelligence plays an important role in students' overall achievement and wellbeing. A study was conducted to observe effects of Intellectual Intelligence, emotional intelligence, and Spiritual Intelligence on students' comprehension level. The research was conducted from March to May 2020, lasting for a period of three months. The results demonstrated that each variable had a substantial impact, demonstrating a collectively significant association between Intellectual Intelligence, Emotional Intelligence, Spiritual Intelligence, and students' study behavior. This implies that the three categories of intelligence play a substantial role in students' comprehension, emphasizing the need to take into account various aspects of intelligence in educational environments.

(Qatek, 2022) Adverse childhood experiences (ACEs) are widespread and have substantial consequences for both physical and mental well-being. Nevertheless, there is limited understanding regarding the extent to which positive childhood experiences (PCEs) can alleviate the effects of adverse childhood experiences (ACEs) on the mental health of adolescents. This study conducted a cross-sectional survey on a sample of 6363 Chinese elementary and high school children. The results of logistic regression analysis showed a significant positive association between adverse childhood experiences (ACEs) and the likelihood of experiencing depression and anxiety. Furthermore, the study found that the risk of anxiety and depression increased in a dose-response manner with higher cumulative exposure to ACEs. Specifically, there were adverse additive interaction found for depression and comorbidity with anxiety. These findings emphasize the significance of early promotion of positive childhood experiences (PCEs) to reduce the negative impact of adverse childhood experiences (ACEs) on the mental health of adolescents. This highlights the possibility for proactive measures to improve well-being in this group.

(Bethell, 2014) The ongoing longitudinal study on Adverse Childhood Experiences in adults has discovered notable connections between chronic illnesses, the overall quality of life as well as life expectancy in adulthood, and the trauma and stress linked to adverse childhood experiences. These experiences include emotional or physical abuse as well as neglect, impoverishment, or exposure to violence. There is limited information available regarding the population-centered epidemiology of negative early experiences among children in the United States. We utilized the 2011–12 National Survey of Children's Health to evaluate the frequency of negative childhood experiences and the connections between these experiences and characteristics that impact children's development and long-term health. We suggest a synchronized endeavor to address gaps in knowledge and convert current understanding regarding adverse childhood events and resilience into policy at the national, state, and local levels. This effort should prioritize the management of childhood trauma in healthcare systems as they undergo continual transformation.

(Kalmakis & Chandler, 2015) The association between adverse childhood experiences (ACEs) and detrimental health outcomes has been established, but, their implementation in primary care practice is still restricted. An extensive analysis of studies on Adverse Childhood Experiences (ACEs) and their impact on adult health outcomes revealed that ACEs have the potential to cause both physical and psychological ailments, as well as risk-taking behaviors, developmental disturbances, and heightened consumption of healthcare services. Most studies assessed childhood adversity by self-report measures. Nurse practitioners

should integrate the evaluation of childhood medical history into regular primary care and take into account the available data on Adverse Childhood Experiences (ACEs) and its influence on health results.

RESEARCH METHODOLOGY

Aim of the study

The purpose of this study was to look at the impact of adverse childhood experiences on emotional and spiritual intelligence among young individuals.

Variable of the study

Independent Variable

Adverse Childhood Experiences (ACEs): Adverse childhood experiences (be they physical, emotional, or sexual), neglect, disruption in the home (due to parents' drug misuse or mental illness, for example), and exposure to violence are all part of this variable. The study's independent variable is adverse childhood experiences (ACEs), which stand for any negative events that young people may have faced when they were growing up.

Dependent Variable

Emotional Intelligence: Emotional intelligence is defined as an individual's ability to notice, analyze, control, and successfully express emotions. Competence in social situations, self-control, empathy, and knowledge of one's own emotions are all part of it. The purpose of this study is to examine how traumatic events in childhood affect young people's emotional intelligence, coping skills, and capacity to form healthy relationships by looking at emotional intelligence as a dependent variable.

Spiritual Intelligence: Spiritual intelligence is the ability to transcend oneself and connect with life's higher meanings, values, and goals. It involves the ability to develop and change spiritually, as well as attributes like knowledge, compassion, and inner calm. This study uses spiritual intelligence as its dependent variable to investigate the potential effects of traumatic childhood events on the spiritual beliefs, values, and existential health of young people

Objectives

- To examine the impact of adverse childhood experiences on spiritual intelligence among young individuals.
- To examine the impact of adverse childhood experiences on emotional intelligence among young individuals.

Hypothesis

- There is significant impact of adverse childhood experiences on emotional intelligence among young individuals.
- There is significant impact of adverse childhood experiences on spiritual intelligence among young individuals.

Population and Sample

The study had 150 participants in all, including men and women. A diverse sample population was achieved via the use of sampling approaches such as random and purposeful selection. The individuals that took part were between the ages of 18 and 25.

Data collection procedure

Three standardized questionnaires were distributed in order to collect data for this study: the “**Adverse Childhood Experience Questionnaire for Adults, Schutte Self-Report Emotional Intelligence Test, and 29-item questionnaire that focused on spiritual intelligence**”. Careful consideration was given to each question type in order to select those most relevant to the study aims. After being informed about the goals of the study, participants were given a questionnaire along with instructions, facts about the study, information about privacy, and the contact information for the researchers. The surveys were explained to the participants in a ten-minute session.

Research design

The cross sectional as well as quantitative design has been used in this study.

Tools

A battery of instruments, including demographic surveys, “**Adverse Childhood Experience Questionnaire for Adults, Schutte Self-Report Emotional Intelligence Test, and 29-item spiritual intelligence questionnaire**” were used to gather data.

Adverse childhood experience questionnaire for adults

The Adverse Childhood Experiences Questionnaire (ACE-Q) was developed in 1998 by medical experts at Kaiser Permanente and consists of ten brief items. As such, it is a trustworthy tool for assessing ACEs and the contexts in which they occurred. Included in this category are incidents of emotional, verbal, sexual, physical, and psychological abuse. Add together all the "Yes" answers for each question to get the ACE-Q score. A score of 0 is associated with a "No" response, but 1 point is earned for every "Yes" response.

A Cronbach's alpha coefficient of 0.70 indicates strong reliability and internal consistency for the 10-item ACE questionnaire.

A satisfactory degree of internal validity is demonstrated by the correlations between the ACE cumulative scores and each adverse event. At least modest connections have been discovered. The existence of an imprisoned family member was associated with the weakest of these associations. On the flip side, emotional abuse and neglect were most strongly correlated with the cumulative ACE score.

The Schutte Self Report Emotional Intelligence Test

The 33 items on the Schutte Self-Report Emotional Intelligence Test (SSEIT) are intended to measure emotional intelligence. Based on the Emotional Intelligence model developed by Salovey and Mayer (1990), the SSEIT closely follows the Emotional Intelligence (EQ)-I paradigm. In order to express their opinions, participants used a 5-point scale, where 1 represented a severe disagreement and 5 a strong agreement. After adding together, the participant's ratings on each subtest, we get their total score.

The emotional intelligence assessment has a high reliability value of 0.90. Furthermore, it has shown good internal consistency with Cronbach's scores ranging from 0.87 to 0.90.

29-item Spiritual Intelligence Questionnaire

The purpose of the questionnaire used in this study is to measure spiritual intelligence, which includes an individual's knowledge of themselves and their connections to God, other people, and all forms of life. The text explores the importance of being able to see beyond one's own viewpoint while highlighting the interconnected nature of perception, faith, and actions. Based on the scoring procedure, replies are assigned numerical values: "I totally disagree" receives 5, "I disagree" receives 2, "I almost disagree" receives 3, "I agree" receives 4, and "I completely disagree" receives 5. The overall values obtained from this scoring system, which range from 29 to 145, provide information on the participants' assessed levels of spiritual intelligence.

The reliability coefficient of the spiritual intelligence questionnaire is 0.89, which means that its measuring qualities are quite consistent. This consistency highlights the instrument's credibility and dependability in assessing spiritual intelligence in different settings and with different people.

Statistical analysis

Using SPSS software made it easier to conduct the study's regression analysis and descriptive statistics procedures.

RESULT & DISCUSSION

This chapter aims to provide light on the complex ways in which childhood trauma affects psychological development by investigating the effects of adverse childhood experiences (ACE) on spiritual and emotional intelligence in young people. It seeks to provide light on the ways in which early adversity affects emotional awareness, empathy, interpersonal skills, and existential meaning-making by using questionnaire survey analysis. In addition, it delves into the consequences for intervention, resilience-building, and holistic healing methods that respect the interdependence of mental, emotional, and spiritual health.

Table 1: Descriptive statistics of all variables

	Adverse Childhood Experiences	Emotional Intelligence	Spiritual Intelligence
Mean	5.153333	124.0667	89.58667
Standard Deviation	1.587437	13.50599	9.293995
N	150	150	150

The above table shows the descriptive statistics for three variables measured by a 150-person sample: emotional intelligence, spiritual intelligence, and adverse childhood experiences (ACEs). Approximately 5.15 unfavorable childhood experiences were reported by individuals on average, with a standard deviation of 1.59, suggesting that there was some diversity in the sample when it came to childhood adversity. Participants had a moderate level of emotional awareness and management, as indicated by an average Emotional Intelligence score of 124.07 with a standard deviation of 13.51. Similarly, the sample's Spiritual Intelligence was moderate, with an average score of 89.59 and a standard deviation of 9.29. These statistics are great for understanding the variables' distribution and variability, which helps to set the stage for studying their interactions with each other.

Table 2: Impact of adverse childhood experiences on emotional intelligence among young individuals.

Regression Statistics	
Multiple R	0.093743
R Square	0.008788
Adjusted R Square	0.00209
Standard Error	13.49186
Observations	150

ANOVA	df	SS	MS	F	Significance F
Regression	1	238.8459	238.8459	1.312122	0.025386
Residual	148	26940.49	182.0303		
Total	149	27179.33			

Hypothesis: There is significant impact of adverse childhood experiences on emotional intelligence among young individuals.

The F-statistic (0.025386) has a p-value that is less than 0.05. Thus, we accept the **Hypothesis** that there is a significant impact of adverse childhood experiences on emotional intelligence among young individuals.

The interpretation suggests that adverse childhood experiences have a statistically significant impact on emotional intelligence among young individuals, based on the provided data and regression analysis.

Table 3: Impact of adverse childhood experiences on spiritual intelligence among young individuals.

Regression Statistics	
Multiple R	0.000224
R Square	5.04E-08
Adjusted R Square	-0.00676
Standard Error	9.325341
Observations	150

ANOVA					
	df	SS	MS	F	Significance F
Regression	1	0.000648	0.000648	7.45E-06	0.997825
Residual	148	12870.37	86.96198		
Total	149	12870.37			

Hypothesis: There is significant impact of adverse childhood experiences on spiritual intelligence among young individuals.

The regression coefficient has a p-value of 0.997825, which is far more than the standard threshold of 0.05, indicating statistical significance. The lack of statistical significance in the coefficient for adverse childhood experiences suggests that these events do not significantly affect spiritual intelligence in young people.

Given these results, it is possible to accept the null hypothesis (H1), which posits that traumatic experiences do not have a substantial effect on spiritual intelligence in youth. The absence of statistical evidence forces the rejection of the alternative hypothesis (H0), which proposes a substantial influence.

DISCUSSION

The complex interplay of adolescent trauma, emotional intelligence, and spiritual intelligence is the subject in-depth investigation. The study seeks to illuminate the intricate ways in which early adversity influences psychological development by studying the effects of adverse childhood experiences (ACEs) on emotional and spiritual intelligence. There are a lot of similarities and differences between the results of this study and those in the literature review by Tekin and Halil (2022).

First, both studies look at what it's like to be a teenager and how that affects mental health, though they do so in different ways. The current study looks at how bad events in childhood (ACEs) affect emotional and spiritual intelligence. Tekin and Halil's study from 2022 looks at the links among spiritual intelligence, well-being, and the way Turkish teens feel about violence. Even though the factors that were studied were different, both studies help us learn more about how early life events affect and are affected by mental health during adolescence.

This study shows that ACEs have a big effect on young people's emotional intelligence by making them less aware of and less able to handle their feelings. This result fits with earlier studies that showed how early trauma can make it harder to control your emotions and get along with others. On the other hand, Tekin and Halil's study from 2022 did not directly test emotional intelligence, but it did look at how people felt about violence and well-being, which is related to emotional well-being. Their study found a positive link between well-being and spiritual intelligence. This suggests that mental well-being may be linked to spiritual aspects, even if this isn't directly measured.

The results of the two tests are different when it comes to spiritual understanding. The present research did not find a significant link within ACEs and spiritual intelligence. However, Tekin and Halil (2022) found a link within spiritual intelligence and well-being and views toward violence. Although teens may have had bad experiences, this shows that spiritual aspects may affect how they feel and their general mental health. The different results could be due to changes in culture, the makeup of the samples, or the testing tools that were used.

Putting these studies next to each other shows how complicated teenage mental development is and how important it is to look at all of the factors that affect a person's development from a young age. Childhood stress seems to have a big effect on emotional intelligence, but the link among spiritual intelligence and bad events may be more complicated and depend on the situation. Further study into how emotional, spiritual, and various other types of intelligence interact with hardship could lead to useful insights for developing prevention and support programs that aim to improve the health and happiness of teens.

CONCLUSION

The examination carried out to determine how adverse childhood experiences (ACEs) affect young people's emotional and spiritual intelligence provides enlightening results. The results show that adverse childhood experiences (ACEs) are significantly associated with lower EQ. Regression research shows that those with a history of traumatic events in childhood are more likely to display unique patterns of emotional intelligence and regulation. It is crucial to address childhood adversity in programs that aim to enhance emotional well-being, since this indicates that early trauma might alter emotional intelligence levels in young individuals.

In contrast, there is little evidence that traumatic experiences in childhood have a substantial effect on spiritual intelligence in young people. There has been no statistical evidence to support the claim that adverse childhood experiences (ACEs) have a significant impact on spiritual intelligence, despite attempts to investigate the possibility. Based on the characteristics examined in this study, it appears that spiritual intelligence may be relatively unaffected by early traumatic events.

Finally, it is clear that traumatic experiences in childhood affect a person's emotional intelligence, but this is not the case for their spiritual intelligence. These results demonstrate the complex ways in which traumatic experiences in childhood can affect different parts of a person's psychological maturation. In order to help young people heal holistically, it is crucial to develop intervention tactics that are appropriate to their needs after experiencing childhood trauma. This includes attending to their emotional, spiritual, and physical health.

LIMITATIONS OF THE STUDY

- **Sampling Bias:** Sampling bias could potentially impact the study in the event that the participants fail to accurately represent the larger demographic of youthful individuals. For instance, results could not apply to other groups if they are only enrolled from a certain region or have a certain socioeconomic status.
- **Retrospective Reporting:** The dependability of the data might be compromised if participants have difficulty properly recalling and reporting their early experiences. This is known as recall bias. Adverse childhood experiences (ACEs) are especially vulnerable to memory distortion because of the potential harm they cause.
- **Self-report Measures:** Participants may give socially acceptable replies or misunderstand the questions when using self-report assessments to gauge emotional and spiritual intelligence, which might lead to response bias. Furthermore, the dimensions under study may not be captured entirely by self-reported emotional and spiritual intelligence.
- **Cross-sectional Design:** The correlation between ACEs and emotional/spiritual intelligence may only be shown at a single instant in time if the research uses a cross-sectional approach. If we want to know how these characteristics change over time, we need to conduct longitudinal research.
- **Confounding Variables:** Potential confounding variables that may have affected the association between ACEs and emotional/spiritual intelligence were not taken into consideration in the study. These results might be affected by factors including present socioeconomic situation, availability of mental health resources, or the presence of supporting connections.

RECOMMENDATIONS

1. **Implement Comprehensive Education Programs:** Create and execute all-encompassing educational initiatives to raise consciousness on the possible effects of adverse childhood experiences (ACEs) on emotional and spiritual intelligence among youth, their parents, guardians, teachers, and other adults in their lives. Early intervention and assistance are crucial in reducing the impact of adverse childhood experiences (ACEs), and these programs should highlight this.
2. **Promote Mental Health Services:** Enhance the availability of mental health services, especially those that are designed to help young people overcome trauma and develop resilience, after they have encountered adverse childhood experiences (ACEs). To achieve this goal, it may be necessary to enhance financing for mental health clinics in the community, expand counseling services in schools, and educate mental health professionals on trauma-informed treatment methods.
3. **Strengthen Support Networks:** Promote collaborations among educational institutions, community groups, and mental health professionals to strengthen support systems for youth who have had adverse childhood experiences. To further facilitate access to counsel and assistance, it is recommended that mentoring programs and peer support groups be established.
4. **Integrate Emotional Intelligence Training:** Incorporate emotional intelligence (EI) education into youth development initiatives and school curriculum to provide young people the tools they need to properly identify and manage their emotions. To foster emotional resilience and self-awareness, incorporate mindfulness practices, social-emotional learning activities, and skills for conflict resolution.
5. **Foster Spiritual Growth Opportunities:** Provide opportunity for young people to explore and develop their spiritual identities in safe and supportive surroundings. Providing religious or spiritual programs geared toward kids, leading conversations about values and beliefs, and advocating for activities like prayer, meditation, or contemplation that foster spiritual development and connection are all ways to accomplish this goal.
6. **Offer Trauma-Informed Care Training:** A trauma-informed care strategy should be taught to educators, medical professionals, social workers, and other professionals who work with youth. Train them to see the symptoms of trauma, react compassionately, and point people in the direction of helpful resources.

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