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Research Article

The Investigation of Relationships between Childhood Traumatic Events and Self-Compassion among Adolescents

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Abstract

The aim of the study was to investigate the relationship between childhood traumatic events and self-compassion among adolescents. Participants of the research were 12th-grade high school students. Participants were made up of totally 457 adolescents 144 of whom were girls and 313 boys. In order to determine childhood traumatic events of the adolescents, Childhood Traumatic Events Scale, for the self-compassion. Self-compassion Scale for personal characteristics "Personal Information Form" prepared by researchers was used. For statistical analysis, Pearson Product-Moment Correlation Coefficient, one-way ANOVA, Tukey test and an Independent Samples t-test were used. According to the study, there were statistically significant negative relationships between childhood traumatic events and self-compassion among adolescents. It has been understood that self-compassion levels of adolescents differ significantly in statics according to their gender. Also, it has been found out that perceived physical and emotional abuse levels of adolescents who perceive themselves as having low economic conditions are significantly higher than perceived physical and emotional abuse levels of adolescents who perceive themselves as having medium or high economic conditions.

Key Words

Adolescents • Childhood traumatic events • Self-Compassion

* This research is based on the first author's master's thesis.

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Adolescence constitutes one of the most important parts of humankind's developmental period. %10 of our national population is made up of adolescents between the ages of 15-19 (Turkish Statistical Institute, 2018). According to Kulaksızoğlu (2004), adolescence is a stage of hormonal, sexual, social, emotional, personal and mental changes and developments along with size and height growth, which begins with puberty and is thought to end with the conclusion of growth. In order for the adolescent to have a healthy social, emotional, personal and mental development, it is important to have a safe place far from negligence and abuse. In recent years, however, either due to the replacement of children because of wars in our regions or due to the fact that it can be seen in most parts of our society, child negligence and abuse draws attention. All actions and behaviours which have present or potential damage to the child's health, development, and self-esteem, all things which affect the child's development negatively by actions that harm the child physically, emotionally or sexually form child abuse (World Health Organization, 1999). A lot of social factors, cultural structure, and ongoing poverty play a role in child abuse (Garbarino, 1976). Abuse in childhood period leads to a lot of social, emotional, behavioral, and mental problems in the following years (Post, Weiss, & Leverich, 1994). Adolescents who have been exposed to childhood traumas are more prone to psychopathological symptoms like anxiety disorders, bipolar disorder, depression, panic attack, phobia, and post-traumatic stress disorder in later years (Heim & Nemeroff, 2001). Despite the stated adverse conditions, it is important for adolescents, who are our future, to psychologically show a healthy development compatible with themselves and their environment.

A good many scientists have worked up on terms like self-esteem, self-sufficiency, and self-confidence in order for the individual to establish a healthy relationship with themselves (Neff, 2003a). One of these terms is self-compassion (Neff, 2003a ; Neff, 2003b). It expresses self-compassion that the individual is open to his/her own sadness and suffering, does not refrain from confronting these situations, accepts himself/herself with kindness and compassion, adopts deficiencies and regards them as part of life experience (Neff, 2003a). Self-compassion is showing a kind, compassionate and positive approach to the individual's self in the event of failure, flaw and inadequacy (Zessin, Dickhauser, & Garbade, 2015). Self-compassion is directly proportionate to psychological well-being, self-acceptance, life satisfaction, social connectedness, self-respect, consciousness, freedom, happiness and curiosity while it is in opposition to anxiety, depression, neurotic perfectionism, self-criticism, neuroticism and suppression of thoughts (Neff, 2003a; Neff, 2003b). Individuals displaying high self-compassion show positive emotions in their lives make close friendships, and their life satisfaction levels are higher (Jeon, Lee, & Kwon, 2016). Therefore, in order for individuals to get rid of negative emotional situations without harm and to continue their life in a more livable way, it is quite important to develop their self-compassion (Deniz, Kesici, & Sümer, 2008).

In accordance with the explanations above, this raises the curiosity of how self-compassion levels of the individuals who have been exposed to childhood traumas would be like during their adolescence. For this reason, the goal of the research is to determine if there is a relationship between childhood traumatic events and self-compassion levels, and if the level of self-compassion among adolescents differed significantly in terms of gender variation and perceived economic status of adolescents in their childhood traumatic events.

Method

Research Model

This study, which was carried out with the goal of illustrating the relationship between childhood traumatic events of adolescents and their self-compassion, and determining whether the levels of self-compassion among adolescents differed significantly in terms of gender variation and the perceived economic status of adolescents in their childhood traumatic events, was designed according to a survey model. Survey models are research approaches that aim to describe a past or present situation the way it exists. At the same time, what is important in this model is to observe the existing situation without trying to change (Karasar, 2011).

Working Group

The research was applied to 457 12th grade high-school students from different schools of İstanbul, Esenyurt district constitutes the study group of the research, which was executed in the first semester of the 2017-2018 academic year. Three hundred and thirteen (% 68.5) of the participants were boys and 144 (% 31.5) of them were girls.

Measurement Tools

Childhood Traumatic Events Scale (CTES). Turkish adaptation of the scale, which was prepared by Bernstein, Fink, Handelsman, Foote, and Lovejoy (1994), for surveying traumatic events in childhood, was done by Arslan and Alparslan (1999). The Turkish adaptation of the scale surveying childhood and adolescence traumatic and negligence events retrospectively, is made up of 40 clauses starting with “When I was a child,” and graded in 5 Likert scale (1= Never, 5= Very Often) according to the frequency of that event. Higher grades mean that the abuse in that event was more common in childhood. After the sieved items are excluded according to principal components method, Cronbach alpha coefficient of the scale was found .96. Emotional abuse and emotional negligence subscale’s Cronbach alpha coefficient of CTES, which has a three factors structure, was found .95, whereas physical abuse and sexual abuse subscale’s Cronbach alpha coefficient was found .94.

Self-Compassion Scale (SCS). Self-compassion scale was developed by Neff (2003a). SCS is made up of 6 subscales, a total of 26 clauses. In the scale, participants are asked to grade the given situation according to how often they act so in a 5 Likert scale ranging from “1= Strongly disagree” and “5= Strongly agree”. Turkish reliability and validity study of the scale was done by Deniz, Kesici, and Sümer (2008). It has been determined that, unlike the original scale, Turkish Self-compassion Scale comprises a one dimensional and 24 clauses structure. It has been reported that the internal consistency coefficients of the scale’s Turkish format is .86 and test-retest correlation is .83. It has been understood that there are significant relationships between the criterion-related validity of the self-compassion scale and life satisfaction ($r = .45$), and between positive affect ($r = .41$) and negative affect ($r = -.48$).

Data Analysis

In order to determine if there is a significant relationship between childhood traumatic events and self-compassion levels, Pearson Product-Moment Correlation Coefficient has been calculated. On the other hand, the independent sample t-test has been used to determine if adolescents’ self-compassion levels differed significantly in terms of their gender. Also, it has been tested with one-way analysis of variance if the average score of

adolescents' childhood traumatic events differed significantly according to perceived economic condition, and Tukey test has been used to determine the source of this differentiation.

Findings

Pearson Product-Moment Correlation Coefficient was calculated in order to examine if there is a significant relationship between childhood traumatic events among adolescents, who make up the study group, and their self-compassion levels. Accordingly, self-compassion levels were added to the correlation analysis along with physical, emotional and sexual abuse experiences which are perceived as sub-dimensions of the childhood traumatic events. The correlation coefficient which shows the relationship between these variables appears in Table 1.

Table 1

Adolescents' Relationship Between Childhood Traumatic Experiences and Self-Compassion

Variable	Physical abuse	Emotional abuse	Sexual abuse
Self-compassion	-.201**	-.273**	-.112*

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

As seen in Table 1, there are significant negative relationships between perceived physical abuse levels of adolescents and their self-compassion levels ($r = -.201, p < .01$). Similarly, it is understood that there are significant negative relationships in perceived emotional abuse levels of adolescents and their self-compassion levels ($r = -.273, p < .01$). Lastly, it can be seen that there are significant negative relationships between perceived sexual abuse levels of adolescents and their self-compassion levels ($r = -.112, p < .05$). In consideration of all these results, one can say that there are significant negative relationships between childhood traumatic events among adolescents and their self-compassion levels.

Table 2

T Test Table for Adolescent Self-compassion with Regards to Gender

Variable	Gender	N	\bar{X}	ss	t	sd	p
Self-compassion	Male	313	76.12	14.00	2.97	455	.003
	Female	144	71.78	15.45			

The results in Table 2 is stated that the self-compassion levels of adolescents with regards to gender change significantly in statistics ($t_{0.05; 457} = 2.97, p < .01$). When these results are evaluated, it can be said that male adolescents ($\bar{X} = 76.12, ss = 14.00$) have much higher self-compassion levels than female adolescents ($\bar{X} = 71.78, ss = 15.45$).

Table 3

Analysis of Variance for Childhood Traumatic Events In Terms of Perceived Economic Condition and Tukey Test Results

		N	\bar{X}	Ss	F	Tukey Test Results
Physical Abuse	Low	126	29.68	10.30	10.995*	1-3, 1,2
	Medium	281	23.41	7.31		
	High	130	22.55	8.44		
Emotional Abuse	Low	126	44.03	17.43	11.131*	1-3, 1,2
	Medium	201	34.28	13.14		
	High	130	29.83	11.39		
Sexual Abuse	Low	126	6.88	3.80	1,010
	Medium	201	6.24	2.65		
	High	130	6.05	2.60		

* $p < .01$

When Table 3 is examined, variance analysis concerning the difference between point average for perceived physical abuse, emotional abuse and sexual abuse sub-dimensions of adolescents whose perceived economic conditions are different, can be seen. According to the results, it is seen that there is a statistically significant difference between perceived physical abuse ($F_{457} = 10.995$, $p < .01$) and emotional abuse ($F_{457} = 11.131$, $p < .01$) point averages of adolescents whose perceived economic conditions are different. As a result of the multiple comparison test Tukey which was implemented with the intent of determining from which economic conditions this difference arises, it is understood that the difference arises from the point average of perceived physical abuse of adolescents who consider their economic condition as low ($\bar{X} = 29.68$, $ss = 10.30$), and medium ($\bar{X} = 23.41$, $ss = 7.31$), and high ($\bar{X} = 22.55$, $ss = 8.44$). Similarly, it is understood that the difference in perceived emotional abuse arises from the point average of perceived emotional abuse of adolescents who consider their economic condition as low ($\bar{X} = 44.03$, $ss = 17.43$), and medium ($\bar{X} = 34.28$, $ss = 13.14$), and high ($\bar{X} = 29.83$, $ss = 11.39$).

On the other side, it was found out that there are no statistically significant relationships between perceived sexual abuse point averages of adolescents whose perceived economic conditions are different ($F_{457} = 1.010$, $p > .05$).

Discussion

When the research results are evaluated, it can be seen that there are negative relationships between childhood traumatic events among adolescents (physical, emotional and sexual abuse) and their self-compassion levels. This situation can be interpreted as low levels of patience, compassion, and unconditional acceptance of adolescents who have been exposed to childhood neglect and abuse, towards themselves. Similar to this research, a research that was conducted with adolescents by Tanaka, Wekerle, Schmuck, and Paglia-Boak (2011) has shown that adolescents who have high physical, emotional, and sexual abuse point averages have low levels of self-compassion point averages. The research finding is thought to show that childhood traumatic events have negative effects on the adolescent.

Similarly, parental divorce has negative effects on children. These negative effects can be for long-term as well as short-term. It has been determined that how much effect the divorce process has on children and adolescents before and after divorce, is related to the attitudes of the parents in this process (Taş, 2017). In long-

term negativity, it is seen in other studies that marriage notions of individuals who have gone through parental divorces in childhood and adolescence are more negative in comparison to individuals who have grown up in a full family (Taş & Balay, 2017; Taş, 2018).

Individuals who were traumatized in their childhood and were exposed to events that caused intense stress and anxiety in their development process, find it hard and insincere to show self-compassion. Most individuals who have gone through sad psychological and physical events think that they don't deserve to feel good or they do not make a real effort to feel good. Besides, it could be hard for them to experience emotional pain even on a safe level. Emotions that give pain replace the previous emotions. While they can show other people and especially animals and children compassion and understanding, individuals who have experienced sad psychological and physical events fail to be compassionate towards themselves (Germer, 2009).

According to the research results, it has been determined that male adolescents have significantly higher levels of self-compassion than female adolescents. In a study done by Neff (2003b), which is consistent with the findings of the research, it is seen that self-compassion levels of men are relatively higher than women. Nevertheless, in a study conducted by Dilmaç, Deniz, and Deniz (2009) with university students, it has been understood that there is no significant difference between self-compassion levels in terms of gender variance. As stated by Germer (2009), as they are more empathetic and compassionate in comparison to men, women are expected to have more self-compassion, but, our research findings are in contradiction to this notion.

In accordance with the research results, perceived physical and emotional abuse levels of the adolescents who perceive themselves as having low economic conditions are found to be significantly higher than perceived physical and emotional abuse levels of the adolescents who perceive themselves as having medium and high economic conditions. However, it has been seen that low, medium, or high economic conditions make no significant difference in perceived sexual abuse levels. Similarly, there are studies which illustrate that in terms of emotional abuse, childhood abuse in adolescents of low-income family environments are relatively higher than medium and high-income family environments (Bekçi, 2006; Can-Özcan, 2010; Er, 2010; Kristensen & Lau, 2007). It could be said that level of economic income has a lot of effects on people, from basic needs like nutritional requirements and need for shelter to having an education, having a job, and to life quality. With the decrease of the level of economic income, individuals who are responsible for the child's care are said to have difficulties in providing the basic needs of the child. With regards to the experienced stress and anxiety conditions, individuals who are responsible for the child's care may not be able to provide for the social and emotional needs of the child adequately. The statement of Pillado, Kim, and Dierkhising (2010) that poverty is one of the most important risk factors in child negligence and abuse supports our research finding.

The main restriction of this research is that it was -conducted solely in Esenyurt district of Istanbul, whose habitants are from similar socio-economic groups. In order to increase the generalizability of the research, the relationship between adolescent's childhood abuse and self-compassion levels can be made clearer by making similar studies on samples from more different socio-economic groups. Students at risk should be determined by applying survey practices at schools on negligence and abuse; prevention practices should be carried out for these students and their families in terms of social support and briefing. Besides, the experts working in the field can carry out group guidance or psychological counselling practices with the group to increase self-compassion levels of adolescents.

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