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The Influence of Childhood Experiences on Adult Interpersonal Issues: A Review of Effects and Interventions

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Abstract

This brief article investigated the impact of adult interpersonal issues caused by undesirable childhood experiences. While it is simple to raise strong-willed children, it is much more difficult to heal broken men as a result of childhood physical and emotional trauma, tragic events, the harsh effects of the Covid-19 pandemic, calamities, and others. The goal of this study was to assess childhood experiences in order to better understand the characteristics, occurrences, and effects on interpersonal relationship problems as the child grows into an adult. The researchers used a deliberate approach and assessment to investigate the links between childhood development, the effects of traumatic experience, and adult inter-personal issues. This included reviewing discussions and recommendations from a variety of academic and scientific articles relevant to the study. The findings of the justified review could help illuminate practical programs and psychological interventions for dealing with childhood trauma, as well as providing guidance for future actions by parents, educators, and others.

Keywords

Adolescent, Childhood Trauma, Childhood Development, Covid-19, Interpersonal Issue, Pandemic, PTSD

1. Introduction

God gives us children as a gift (Fenik, 2019). Caring for them can be challenging in the sense that parents must make ends meet in order to raise their children

despite the obstacles that life may bring. There are numerous challenges that parents may face, such as the source of income, which must be consistent and stable in order to support the family's needs. As seen from the perspective of a perfect family, children's upbringing should be holistic. This, however, is not always the case. Certain phenomena may have a significant impact on children during the course of parental responsibilities. Failure of parents to understand their children's behavior can lead to overly harsh disciplinary actions. According to Mudany et al. (2013), there is a fine line between child discipline and child abuse. Any physical punishment meted out to a child in response to perceived misbehavior is referred to as corporal punishment (Zolotor, 2014). And the consequences of abuse and other traumatic experiences can have a wide range of effects on children's physical, mental, and emotional development as they grow into adults with interpersonal relationship problems and challenges. The characteristics, occurrences, and effects on interpersonal relationship problems as the child grows into an adult have been underscored, allowing for a better understanding of childhood development. Because it is easier to raise strong-willed children than to fix broken men, a better understanding of childhood development could prevent the occasion of unnecessary punishment, ideal psychological intervention for the effects, and counselling for better solution and emotional healing from exposure and experience of tragic events. Daines et al. (2021) have emphasized that childhood experiences have a predictable effect on family health in adulthood. Even in the face of early adversity, positive childhood experiences can serve as the basis for better adult life.

1.1. Childhood Development

Childhood development encompasses the entire period from conception to adulthood and the transition from total dependence to complete independence. Physical development, academic success, language learning, personal expression, and social development are aspects of a child's development (Snyder et al., 1997). Although each of these factors is often considered separately, they all have an impact on the others. The interaction of social influences, natural growth, and a child's portrayals of the social domain results in childhood social and biological development. This link can be seen in connected arguments, shared arrangements, character development, and the child's social abilities. One of the most important roles for a child's health and development is that of social collaboration. Optimistic social teamwork has a wide range of physical and psychological benefits, including increased psychological capacity, relational capability, liberty, and improved health, especially in older people (Rennick et al., 2002). According to Rashid (2010), social skills are most often thought of as a set of skills that allow us to communicate, relate and socialize with others. The age of children influences their ability to learn essential skills that they will need in the future. Communicating with others in the nursery allows children to set boundaries, observe how others react to their activities, and devise strategies to pre-

vent clashes between children. All of the important life skills they will need as adults are typically learned in childhood. Social skills also aid in the development of positive adult relationships with peers. Adolescents with strong social skills, particularly in the areas of conflict, emotional intimacy, and the use of pro-social behaviors, are more likely to be accepted by peers, form friendships, maintain strong relationships with parents and peers, be considered effective problem solvers, cultivate greater interest in school, and perform better academically (Hair, Jager, & Garret, 2002). Children's relational abilities require collaboration with other children; as mentioned above, children can learn how to express their emotions, interact with others, and improve their reasoning and comprehension skills. More interaction is usually encouraged when a large number of other children surround a child. Children's language development is aided by teachers who tell stories and ask interesting questions. Typically, being at a nursery is not the same as being at a child's home; however, being exposed to a different environment allows children to learn significant limits in their surroundings and recognize their interconnectedness. Nurseries also enable children to become more confident in their actions and decisions and show them how to interact with other children without being overbearing. Children learn to follow directions and instructions from their parents or guardians at home; however, a nursery effectively encourages a child to connect with other people, whether adults or not. A child's progress can be aided by good listening skills and the ability to follow directions from various adults. From the beginning of their integration into nursery schools, children may develop strong attachments. Regardless, going to nursery school encourages children to be self-sufficient and independent. Learning how to manage assignments on their own gives children a sense of independence. Simple tasks such as putting on their shoes or learning how to hold a paintbrush boost children's confidence and instill a sense of "I can do it". A nursery environment can support children without pressuring them to work too hard, providing them with the ideal safe environment in which to be nurtured. Child development is influenced by a variety of biological and social factors. Biological and social influences can play a crucial role in the early stages of a child's development. These influences may have a positive or negative impact on a child's behavior. Furthermore, behavioral improvement is frequently seen as the result of both biological and social influences resulting from previous experiences. Psychology, hormonal stages, nutrition, and gender all play a role in a child's development. Furthermore, a child's diet is also believed to have an impact on his or her development. Children learn what, when, and how much to eat through direct experiences with food and by observing the eating behaviors of others during their first years of life. The type of food available may influence the development of children's attitudes. As a result, nutrition has an impact on a child's overall well-being. A variety of factors influences children's eating habits in their families, schools, and communities. These influences, fortunately, can also help to promote healthy eating habits (Birch, Savage, & Ventura, 2007).

1.2. Childhood and Post-Traumatic-Stress-Disorder

Childhood trauma may result from an occasion, sequence of incidents, or situation caused by various events or life-threatening episodes culled from experiences. Such would merit unfavorable impact on the child's personal and psychological well-being (Cook & O'Donnell, 2005). De Bellis & Zisk (2014) defined childhood trauma as exposure to actual or threatened death, serious injury, or sexual violence. Any form of traumatic experience can affect learning, behavior, social, emotional, and psychological well-being of the child (Kuban & Steele, 2011). In the absence of counselling or appropriate psychological intervention this may result to a lifelong stigma of behavioral and interpersonal issues that can greatly affect performance. Children who have been victims of natural or man-made disasters, for example, will require very different types of intervention than those who have been victims of physical, emotional, or sexual abuse (Makwana, 2019). According to Ansara & Hindin (2009) emotional injury is the reduction in a person's ability to function within a normal range of performance and behavior. Children who have mild to severe traumatic backgrounds are timid, unwilling, or fragmented. Children were expected to be delicate among the most affluent Filipinos in the late 1800s. Assertive discipline and strict adherence to a set of rules were required during their childhood as effective and proper (Fehringer & Hindin, 2009). Any child raised in the late nineteenth and mid-twentieth centuries had this upbringing, in which a large portion of their actions was motivated by guilt (Loh et al., 2011). This kind of nurturing is indeed identified with culture in which there is a blend of care, love, bearing, and worry that all guardians have envisioned (Mandal & Hindin, 2013). According to Maschi et al. (2013) dominant interpersonal issues are linked to traumatic childhood experience. Children who have experienced or witnessed traumatic events such as a natural disaster, a serious accident, a terrorist act, war/combat, rape, or who have been threatened with death, sexual violence, or serious injury and any form of abuse may eventually develop PTSD. Moreover, the impact of information about dangerous situations on the child's attitude can also be traumatic (Nelson & Wampler, 2000). As a result of these unpleasant encounters, stress levels rise (Shonkoff, 2010). In any case, physical, sexual, and psychological abuse, have the most inescapable and extensive effects on children Landolt et al. (2013). These occurrences take place from time to time in the family where there is misconception of discipline turn to abuse and, on rare occasions, in public view (Felitti, 1993). Chronic interpersonal violence in children is widespread throughout the world (De Bellis & Zisk, 2014). Child-rearing may require adjustments in some cases as people move to cities and society changes and becomes more self-centered. There is a decreased reliance on other relatives, particularly grandparents, and interpersonal organization is more limited. Children are fervently ushered into better schools and classes in many societies. One fundamental belief is that parents must consistently enforce strict adherence to upbringing based on what society dictates (World Health Organization, 2006).

1.3. Pandemic-Related Trauma and Anxiety

The global impact of the Corona virus pandemic on medical concerns, frameworks, economies, and people may be considered an unintended consequence. Children and families coped with pandemic-related trauma in a variety of ways. Many children had the opportunity to adapt appropriately and suffer long-term consequences. However, a sizable number of children did not adapt positively. As the epidemic spreads, health professionals and educators are focusing more on health education in order to help children and families. Schools should educate parents on how to practice health and safety protocols to lessen the impact of the disease in the community so that children can return to a proper school setting once the pandemic has passed, recognizing that children are powerless in the face of these events (Ford et al., 2009). The disparities faced by marginalized people have grown significantly. People from marginalized groups are especially vulnerable to health risks (Holbrook et al., 2007). The Covid-19 pandemic has brought about stress and unhealthy situation to children due to lockdowns, economic hardship, and isolation (Sharma et al., 2021). Children's pandemic experiences vary greatly; some may experience prolonged and intense trauma during the stay-at-home period, while others may encounter only minor stressors (Ashikkali, Carroll, & Johnson, 2020). Windarwati et al. (2020) emphasized that the pandemic could have physical, psychological, and social consequences for adults, particularly children whose parents lose their jobs or are isolated for possible virus infection. The government can help to reduce psychosocial problems by providing practical psychosocial management intervention and aid. Most notably, there has been a significant increase in the number of children who have experienced physical, emotional, or sexual abuse and neglect, as well as other traumatic incidents at home. The American Psychological Association, for example, warns that restricting one's ability to move and go to other places increases anxiety. Domestic violence and child abuse are also rising due to economic hardships and isolation (Sack et al., 1976). Isolation results in a lack of income, which can lead to desperation. Pandemic lockdowns isolate people from their usual social and economic involvement, and the setup itself is so strange that it heightens hopelessness in emotionally weak adults. This suggests that as families become more isolated at home; abuse may go unnoticed, leaving children in vulnerable situations they would not have been otherwise. Furthermore, because of the increased risk of infection, as well as the grief and fear caused by parental loss or separation, children may be more vulnerable to mental health problems. A child's normal psychological development and well-being require companionship. Separation from caregivers causes a crisis in children and may increase their risk of developing psychiatric disorders (Liu et al., 2020). According to the Johns Hopkins University tracker, which consolidates data from a range of sources, on June 17, 2020, there have been 8,204,947 confirmed cases of Covid-19 reported in 188 countries and regions. People have died from the coronavirus, implying that thousands of children have lost someone they know

and care about. Moreover, loss of income has affected millions of people worldwide who have filed for unemployment since the outbreak. More children and families have been exposed to a lack of food, homelessness, and stress. Economic difficulties can affect one's sense of security, ability to remain calm, interpersonal relationships, and belief that things will get better. Any childhood experience to a traumatic incident is classified as an adverse childhood experience (ACE). Repeated exposure to trauma has been shown to have a cumulative effect on children's well-being, and some children may have more difficulty coping with and recovering from trauma during this pandemic, according to Chi & Li (2013). Due to delays, if not inadequate, in the provision of government assistance, children and their families are currently at a higher risk of discrimination. Moreover, reports compiled by doctoral candidates at Harvard University show dozens of anti-Asian verbal and physical assaults have taken place. Furthermore, racial discrimination (the cumulative effects of racism on individuals' and communities' mental and physical health) has complex but real effects on children's physiological, psychological, and emotional development and their ability to cope with other life stressors. Even children and adolescents who do not experience traumatic incidents as a result of the pandemic face significant stressors that can have a negative impact on their emotional, mental, and physical health. A number of factors can contribute to high levels of stress and anxiety.

- Isolation and abrupt separation from friends and family members.
- Lack of freedom of movement, access to recreational facilities, and opportunity to practice developmentally appropriate skills (e.g., playing with other children, sharing toys).
- Media exposure, making children and adolescents vulnerable to vicarious stress.
- Frequent reminders about how the virus is transmitted could lead to anxiety and reluctance to return to normal activities once the pandemic has ended.
- Possible new surges of the corona virus, which could lead to schools and public spaces closing intermittently over the next year, as well as repeated stay-at-home advisories.

2. Some Effects of PTSD on Children

Because of their limited coping skills and reliance on social supports, children are especially vulnerable. In the aftermath of an outbreak or tragedy, we can expect significant consequences for children's fitness and success in school and society. Some events are almost certain to occur:

2.1. Increased Mental Health Concerns

Children experience a variety of psychiatric disorders after episodes of mass trauma. A study conducted six months after the terrorist attacks of 9/11 describe the consequences of the attacks' psychological fitness. Among the 8000 students, the 412 who were surveyed six months after 15% were reported to have agora-

phobia (or fear of going outside or taking public transportation), and 12% were reported with separation anxiety disorder, 11% had PTSD, and another 8% suffered from depression (Neria, DiGrande, & Adams, 2011). Children may be more vulnerable to mental health problems due to their increased risk of infection, as well as the grief and fear caused by parental loss or separation. Companionship is necessary for a child's normal psychological development and well-being. Separation from caregivers causes children to experience a crisis and may increase their risk of developing psychiatric disorders (Liu et al., 2020).

2.2. Increased Behavioral Issues

Stress and trauma can cause inappropriate behavior in the classroom and complications in developing relationships in some children. Classroom disruptions, suspensions, and expulsions are more likely if schools and child care facilities do not take appropriate measures to assist children in coping. Furthermore, there is a strong correlation between young impartiality involvement and psychological fitness issues (Frieze, 2015).

2.3. Poor Academic Performance

According Sitler (2009) stress and trauma reduce learning engagement. Indeed, evidence suggests that trauma and chronic anxiety can impair children's attention, recollection, organizational, and language abilities, all of which are necessary for academic success. Students who have experienced trauma perform poorly academically overall, as well as have low attendance and reading levels. Researchers studying classroom behavior discovered that students who have been exposed to traumatic events may exhibit behaviors such as passivity, inability to concentrate, and so on, as well as physical and verbal outbursts, frequent absences, and spacing out.

3. Some Interventions for Preventing or Treating Traumatic Stress and/or Post-Traumatic Stress Disorder among Children

Children's family and community support systems are critical to their recovery. While some children have strong support systems and/or have previously benefited from behavioral health services, others may be affected by their own family's struggle to cope with the pandemic and/or have no existing relationships with mental health providers.

1) **Cognitive Behavioral Therapy (CBT)** is a type of psychotherapy that is used to treat a wide range of psychiatric issues, including depression, anxiety, and post-traumatic stress disorder (PTSD). CBT combines elements of cognitive and behavioral therapy. CBT for anxiety disorders, somatoform disorders, bulimia, anger control issues, and general stress has the most support (Hofmann et al., 2012).

2) **Trauma-Focused CBT (TF-CBT)** is a psychotherapeutic technique that

has specifically adapted CBT for use with traumatized children and those exhibiting traumatic stress symptoms. Children and parents learn skills in TF-CBT to help process thoughts and feelings associated with traumatic life events, as well as to manage and resolve distressing thoughts, feelings, and behaviors associated with those same events (Cohen, Berliner, & Mannarino, 2010).

3) **Child-Parent Psychotherapy (CPP)** is a relationship-centered treatment that combines modalities from psychodynamic, attachment, trauma, cognitive-behavioral, and social learning theories. The child-parent relationship is used to improve the child's emotional, cognitive, and social functioning (Alto et al., 2021).

4) **Skills Training in Affective and Interpersonal Regulation/Narrative Story-Telling (STAIR/NST)** is a two-module treatment aimed at reducing PTSD and other trauma-related symptoms (such as depression and dissociation) as well as building and enhancing specific social and emotional competencies that are frequently disturbed in youths who have experienced multiple traumas and/or sustained trauma (Ortigo, Bauer, & Cloitre, 2020). In addition, McLeod (2004) stressed story-telling is an essential way in which individuals make sense of their experience.

5) **Trauma and Grief Component Therapy (TGCT)** is a group treatment program for older school-aged children and adolescents who have been bereaved traumatically. Youths affected by community violence, school violence, gang violence, war/ethnic cleansing, and natural and man-made disasters are among those targeted (Herres et al., 2016).

6) **Cognitive Behavioral Intervention for Trauma in Schools (CBITS)** is a skills-based, group intervention for traumatized children aged 10 to 15 years; it may be appropriate not only for intervening early after exposure to a traumatic event, but also for treating traumatic stress symptoms. These abilities are acquired through the use of drawings and conversation in both individual and group settings. Children complete assignments and participate in activities that reinforce the skills they have learned between sessions. There will also be parent and teacher education sessions. According to Jaycox et al. (2012) the Cognitive-Behavioral Intervention for Trauma in Schools Program is a targeted intervention for schoolchildren who have witnessed a traumatic or violent event and are suffering from posttraumatic stress disorder symptoms.

4. A Proposed Psychosocial Intervention Program (Roallos, 2019)

4.1. Introduction to School-Based Psychosocial Intervention Program

This session covers the fundamentals and general principles of understanding the goals and importance of a psychosocial intervention program in the school setting for disaster trauma and other critical incidents, with children and adolescents as the primary recipients. It also outlines general guidelines for schools

during disaster preparedness, response, and recovery.

4.2. Psychosocial Intervention through Psychological First Aid and Stress Debriefing

This session will teach participants how to administer Psychological First Aid (PFA) as a psychosocial response to a disaster or other critical incident. It also includes guidelines and protocols for assisting survivors with PFA.

4.3. Trauma Intervention through Expressive Techniques

This session covers the fundamental concepts and knowledge needed to comprehend traumatized children's feelings and the necessary intervention through expressive techniques for children and adolescents following disasters and other critical incidents. It includes instructions on using basic expressive techniques to help children externalize their feelings, emotions, and experiences.

4.4. Coping with Loss, Bereavement, and Grief through Stress Management

This session provides an overview of the major issues surrounding loss, bereavement, and grief resulting from the loss of a loved one in the aftermath of a disaster or other critical incident. It also covers the fundamentals of grief, including the stages and phases of grief, grief management, and how to help children and adolescents cope with loss and grief.

4.5. Enhancing Resilience through Mindfulness and Positive Psychology

This session focuses on the fundamental concept and knowledge of resilience, as well as how to help children and adolescents develop the ability to cope with the psychological effects of disasters by identifying the factors and resources that contribute to resilience, as well as the role that thinking plays in overcoming life's inevitable stress and adversity.

4.6. Closure and Moving Forward

This session covers the fundamentals of closing group sessions in counseling by incorporating activities that will assist participants in refocusing their life goals and making decisions to move forward in their lives after experiencing and learning from them and overcoming life's inevitable stress and adversities.

5. Conclusion

Every society is made up of various social manifestations. It is subject to drastic change. Each has its own set of customs, traditions, and family structures. The concept of filial piety is still widely held in East Asian cultures. Filial piety, also known as the attitude of obedience, devotion, and care toward one's parents, family members, and, in particular, children, is a fundamental and central Confucian virtue in social ethics (Liu, 2004). Raising children is akin to holding a de-

licate and priceless object. Our children are much more valuable and important, because they become the exact pattern of the environment in which they are raised, as well as having been exposed to positive or negative experiences that may affect their personality as they grow older. According to Nelson and Wampler (2000), children are vulnerable to the negative effects of society, including the rising case of the pandemic, which has been affecting children's well-being in general due to social restrictions imposed by the government's health and safety protocols. Also, tragedies, physical abuse, and other traumatic encounters may cause varying degrees of stress and behavior in children, which may lead to post-traumatic stress disorder, and if not treated properly and in a timely manner, may be carried into adulthood, affecting their social, interpersonal, and intrapersonal skills. The factors that determine whether or not a person is holistically healthy include determinants of well-being such as general health, sexual orientation, nutrition, and past experiences, as well as the way a person adapts to societal changes. Several studies have highlighted some critical effects of PTSD and others on children; therefore, manifestations should be addressed as soon as possible through proposed relative psychological interventions. The discussion and recommendations in this review may help parents, educators, and authorities develop effective trauma intervention programs.

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Conflicts of Interest

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