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### **Navigating the Shadows: Unraveling the Complex Threads of Childhood Adversity and Its Implications on Academic Achievement and Self-Efficacy**

Sydney Tucker

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HONORS THESIS



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EDITORIAL REVIEWER • Á ãææ Á^ , ææ

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\_Submitted in partial fulfillment of the requirements for graduation  
with honors in the Bryant University Honors Program  
Ô ã 2021

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**ABSTRACT**

Adverse childhood experiences (ACEs) are defined as traumatic events that occur between the ages of one and seventeen. These instances of neglect, abuse, and household dysfunction can contribute to poor outcomes in the realm of academics as children mature into adults and pursue higher education. In addition, the presence of ACEs can lead to a decline in an individual's belief in his or her capacity to attain academic success, also known as self-efficacy. This study aims to explore how the presence of ACEs within a Bryant University student's life impacts their academic achievement, as measured through GPA and attendance patterns, and their perceived self-efficacy. Data was collected through the usage of a Qualtrics survey. Measures within the survey included the original ACEs by Dr. Vincent Felitti and the PEARLS ACE screener to gather data regarding ACEs while the Academic Self-Concept Scale was used to assess confidence in academic capabilities. A bivariate analysis was conducted using SPSS to determine the correlations between presence of ACEs, GPA, and perceived self-efficacy. Results indicate individuals in the Bryant community who have experienced more ACEs have lower attendance patterns, lower self-efficacy, and a lower GPA. Through understanding how adverse childhood experiences impact academic performance and self-efficacy, educators can implement early identification strategies, improve trauma-informed practices, and provide holistic support services to target the enhancement of academic outcomes and self-efficacy.

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**INTRODUCTION**

Throughout history, childhood experiences have been recognized as vital components in shaping the development and well-being of an individual. Increasing research has highlighted the significant impact that these experiences, both positive and negative, may have on one's ability to adapt, thrive, and navigate various aspects of life as they mature into adulthood. While positive experiences are important to consider, negative experiences can truly impact the trajectory of an individual in life, whereby this can have lasting effects manifesting in the form of hardships, increased levels of anxiety and depression, and physical health impairments. Building upon this understanding, the groundbreaking work of Dr. Vincent Felitti in his Adverse Childhood Experiences (ACE) Study (1998) laid the foundation for examining the correlation between childhood adversities, such as abuse, neglect, and household dysfunction, and their negative implications on later-life outcomes. These childhood adversities can be further expanded into ten factors of childhood exposure including physical neglect, physical abuse, emotional neglect, emotional abuse, sexual abuse, incarceration of a parent, parental mental illness, parental divorce, domestic violence, and substance abuse (Felitti et. al, 1998). Felitti's initial study operationalized and served as a catalyst in the field of psychology, allowing for the further exploration of ACEs and their interconnectedness to other facets of life such as academic achievement and academic self-efficacy within educational attainment.

Academic achievement is defined as, "performance outcomes that indicate the extent to which a person has accomplished specific goals that were the focus of activities in instructional environments" (Steinmayr et. al, 2014). There are several methods of measuring academic achievement with the most common being grade point average (GPA) and grades, for these methods are the "most readily available assessments for institutions" (York et. al, 2019). Determinants of academic achievement serve as antecedents for the success of a student including sociodemographic characteristics such as race, sex, and family size along with socioeconomic characteristics such as income, parental occupations, and the education system surrounding the individual. In addition, individual factors such as study hours, English language proficiency, and self-devotion to academics all tie into the success of a student at the basic level (Tadese et. al, 2022). Aside from all of these determinants, parental involvement,

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or a lack thereof, has a profound impact on academic performance and will be the one of the primary investigations within the literature review. Adverse childhood experiences have gained significant attention for disrupting academic performance, as they create barriers to learning, prevent further cognitive development, and diminish one's motivation. In other words, the presence of negative parental behaviors exacerbates the detrimental effects of ACEs on academic outcomes. Academic success and obtaining high grades are among the main goals in all levels of education while having positive outcomes both for the learners and educational systems. With this said, identifying the factors influencing the students' academic success is one of the most important concerns of researchers and educational psychologists. In essence, it is important to operationally define academic achievement to further investigate how exactly ACEs impact this area of educational attainment, for understanding the complex interplay between ACEs and academic performance is critical for promoting educational success within vulnerable populations.

Self-efficacy is defined as, "an individual's belief in his or her capacity to execute behaviors necessary to produce specific performance attainments" (Bandura, 1977). Applied to an academic setting, self-efficacy refers to "the students' beliefs and attitudes toward their capabilities to achieve academic success, as well as belief in their ability to fulfill academic tasks and the successful learning of the materials" (Hayat et. al, 2020). As individuals experience higher levels of self-efficacy, this leads to greater feelings of joy and self-satisfaction, thus increasing their abilities of metacognitive learning. When ACEs are present in one's life, it is common for levels of self-efficacy to plummet and academic performance to be impacted negatively. Furthermore, ACEs can directly diminish self-efficacy through instilling self-doubt, stripping one of their senses of control, and eroding self-confidence in academic capability. There are also several cognitive and emotional effects that ACEs have on individuals, for problem-solving, critical-thinking, and communication skills can develop poorly, thus causing further decline in self-efficacy and academic hardships. Overall, it is important to operationally define academic self-efficacy to further investigate how exactly ACEs impact this area of educational attainment.

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The goals and objectives of this Honors Thesis include the exploration of how exactly adverse and positive childhood experiences shape the academic performance and self-efficacy of a Bryant student. Due to the limited research that currently exists on the topic, the formation of a well-developed thesis will add substance and useful knowledge, data, and conclusions to the psychological field. The review of literature aims to explore the impact of negative childhood experiences with a specific emphasis on the way in which these experiences may influence individuals within an academic setting. The literature review also seeks to provide insights into the compounded relationship between childhood experiences and academic achievement. Lastly, the literature review will delve into the impact that self-efficacy has on an individual's perception of their academic capabilities. Through investigating this topic, a clearer understanding of the relationship can be determined and ultimately, this can give insight into how exactly academic success can be promoted within younger years to lead to better outcomes in future years.

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**LITERATURE REVIEW**

Academic Performance: Trauma, Maltreatment, and ACEs

An individual's academic performance is heavily influenced by their childhood upbringing, whether that includes strictly positive, strictly negative, or a mix between these two categories of experiences. This topic is important to explore because whether one may experience trauma, unconditional love, or a mix of both within childhood upbringing, this will impact how they perform within an academic setting, therefore influencing their future success, occupation, relationship with others, and ability to rely on a support system. This topic also gives rise to the relationship between experiencing adversity within younger years of life and how this is affiliated with one's success within an academic setting. Acquiring an education is an essential part of a standard American life and aids one in attaining a highly successful job. Therefore, it is essential to investigate how maltreatment within childhood upbringing has a psychological impact on academic performance in the future. The field of physiology encompasses the varying factors, both environmental and societal, that impact the way in which people act, think, and feel. Through delving into the research that is currently available, as well as the conducting new research pertaining to academic performance and adversity, more can be added to this field to understand how exactly people act, think, and feel in regard to these factors.

The culmination of literature surrounding this topic leans towards the societal expectation that an increased exposure to childhood adversity has negative effects on academic performance. With a greater support system, the literature suggests that individuals are more likely to perform better academically opposed to those who lack these support systems. The literature emphasizes that the experience of childhood adversity, specifically trauma, is a large contributor to the development of poor academic habits. The literature also illuminates how increased support systems are important for increased efforts within the academic setting as well as a stronger relationship between academic performance and the yearn for academic success.

Trauma

This theme is centered around the idea that academic success is hindered by the maltreatment of younger individuals, especially those who are experiencing trauma or just general

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mistreatment within their childhood. Commonalities include negative learning experience and poor long-term effects on academic performance.

Childhood trauma impedes academic achievement and performance, thus impacting the learning experience of these individuals in the future. Findings have suggested that trauma causes individuals to have difficulties concentrating, problems with their memory, emotional distress, absenteeism, and destructive behaviors, all of which impact their ability to perform within the classroom setting. In a study conducted at Midwestern University (2016), researchers investigated the learning experiences of eleven higher education students that had suffered trauma by looking at how they described themselves. Those who have suffered trauma from this liberal arts school were questioned using interview methods to learn about their experiences. They were asked fourteen face-to-face questions with interviews lasting around an hour. Thoughts, actions, behaviors, relationships, perceptions, and insights were gathered. The overarching conclusion was that early childhood trauma has a profound impact on an individual's physical, mental, emotional, and psychological well-being as well as their academic performance. The findings elucidate how there is a need for new interventions to assist those who are impacted by childhood trauma, as represented by the quote, "All [participants] contributed to a consideration of a new approach to higher education students who suffered childhood trauma to help them be successful" (Washington, 2016, p.176). In addition, the conclusions suggest that "one out of every three students show up in higher education with this invisible disability", thus more educators should consider ways in which to help these victims (Washington, 2016, p.176).

In a similar study conducted by Artime et. al (2019), trauma exposure, mental health symptoms, service utilization, race, age, and gender were explored. The method included a  $6 \times 3$  chi-square goodness-of-fit test to examine group differences in mental health problems that interfere with academics. The data for this test was acquired from the Fall 2015 American College Health Association National College Health Assessment (ACHA-NCHA II). The results indicated that trauma-exposed students suffered from poorer mental health as indicated by a number of outcome measures. In fact, the research claims that "trauma-exposed students may also have more academic and adjustment-related difficulties in college relative to the

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general population of students.” Moreover, “trauma exposure and trauma-related distress has been found to be associated with higher likelihood of dropping out of college, academic difficulties, lower GPA, low educational self-efficacy, academic motivation, and campus alienation” (Artine, et. al, 2019, p.8). These are significant findings that enhance the literature surrounding this topic, as one must consider all elements of academic success including mental health and trauma.

Moreover, individuals who are exposed to trauma have a larger risk of developing mental health impairments as well as a depletion in their academic successes. In another comprehensive study, U.S. pediatric populations were examined to see if their exposure to chronic trauma paired with treatment at school-based health centers (SBHC) influences their academic achievements. The method for this study included the investigation of existing empirical studies from 2003 through 2013 regarding US pediatric populations. SBHCs were also investigated to see if there is a relation to trauma and mental health care disparities based on the services that are provided, or if SBHC impacts academic achievement. A total of 296 articles were used in this analysis. The results and conclusions of this study indicate how exposure to chronic childhood trauma negatively impacts school achievement when mediated by mental health disorders. The results are as follows: “Eight studies showed a significant risk of mental health disorders and poor academic achievement when exposed to childhood trauma. Seven studies found significant disparities in pediatric mental health care in the US. Nine studies reviewed SBHC mental health service access, utilization, quality, funding, and impact on school achievement” (Larson et. al, 2017). The overall conclusions specify, “Poor academic achievement leads to lower levels of social capital and decreased ability to escape exposure from adverse events, chiefly poverty, and thus, the cycle of exposure to chronic trauma is transmitted from generation to generation,” thus giving rise to the statement that trauma has degrading effects on our societal achievement derived from academic performance (Larson et. al, 2017).

Furthermore, in a 2010 study by Majer et. al, researchers investigated the association of childhood trauma with impairments in cognitive function within healthy adults. This is significant to draw attention to because as mentioned, adversities in early childhood, such as

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trauma, can lead to issues with brain development, thus impeding academic performance. Within this study, researchers examined the age, sex, and gender of 47 adult-aged individuals and the degree to which they experienced emotional and physical neglect and abuse. They used participants from the general population of Wichita, KS and utilized several methodologies such as the Neuropsychological Test Automated Battery and the Wide-Range-Achievement-Test (WRAT-3) to examine cognitive function and individual achievement. The severity of trauma was explored using the Childhood Trauma Questionnaire. The results of this data were analyzed using several linear regressions and claimed that exposure to childhood trauma was significantly associated with impairment in cognition, especially in the hippocampus, and that childhood trauma is significantly associated with academic underachievement. The study quotes, “We found an association between level of exposure to sexual abuse or physical neglect and lower scores in the reading subtest of the WRAT-3, indicating less academic achievement in traumatized subject” (Majer et. al, 2010, p.14).

Lastly, a 2016 study by Boyraz et. al, investigated the potential mediating effects of effort regulation and academic achievement on the relationship between PTSD symptoms and continued enrollment in college among trauma-exposed college students. In addition, potential gender differences were looked at within these relationships. The study specifies that students who enter college with high PTSD symptomatology may experience difficulties in effort regulation, which in turn, may have deleterious effects on their academic performance and college persistence. Participants included 1103 1st-year students attending an unspecified public university located in the southern region of the United States that were recruited from university-seminar and data was collected at three time points in Fall of 2013, Spring of 2014, and Spring of 2015 (Boyraz et. al, 2014). The survey specifically looked at participation on campus, ACT assessment scores, PTSD symptomatology, effort regulation, and 1st year GPA. The results of the survey indicated that, “Entering college with posttraumatic stress disorder (PTSD) symptomatology has been linked to poor academic performance and increased risk for dropping out of college; however, little is known regarding the mechanisms by which PTSD symptoms have deleterious effects on college outcomes” (Boyraz et. al, 2014, et. al.).

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These studies share the commonality of giving rise to the effects of trauma exposure as well as how this leads to diminished academic performance. The first study looked into delving deep and getting specific data from college students while the second and third study had more of a general approach through its utilization of a large sample size. The third study also gave rise to new information such as the correlation between mental health disorders, childhood trauma, and academic performance, unlike the other two articles. The fourth study proves that a low level of cognition, resulted from trauma, can be detrimental to academic performance in totality. The fifth and final study contributes to the literature because it conveys the complex relationship between PTSD, effort regulation, and academic outcomes while also illuminating the need for targeted interventions that take into account the unique needs and experiences of college students who have experienced trauma.

#### Maltreatment

A 2007 study by Slade and Wissow looks at the overarching influence of childhood maltreatment through the investigation of family background, child endowments, frequency and quality of parent-child and parent-parent interaction, emotional and behavioral adjustment and problems, quality of formal and educational experiences, scholastic skills development, and how this influenced adherence to behavioral norms at school, completion of homework, and success in obtaining support from teachers and peers. The method included the creation of a heuristic model that links childhood maltreatment with later academic performance deficits. This model is based on the idea that childhood maltreatment can influence children's performance of competencies that are needed for optimal learning and achievement in school. Empirical analyses are then used to analyze data based on estimates from a multivariate cross-sectional regression model. This study concluded that childhood maltreatment may adversely impact adolescents' performance in school. More intensive forms of childhood maltreatment before the sixth grade were associated with low GPA and problems completing homework assignments. This is the first study to apply family fixed effects to this topic. Overarching conclusions suggest that "Maltreatment is connected with below average school performance during adolescence, even after controlling for observed and unobserved family and neighborhood effects...Maltreatment may negatively affect scholastic performance indirectly through effects on cognitive deficits" (Slade & Wissow, 2007, p. 4).

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### Adverse Childhood Experiences (ACEs)

It is more than just trauma that causes an individual's academic success to be impacted. While trauma encompasses a broader perspective regarding maltreatment, adversities, such as adverse childhood experiences (ACEs), have a hindering effect on academic achievement and performance. Adverse childhood experiences are an overarching term for the following: physical abuse, sexual abuse, emotional abuse, physical neglect, emotional neglect, mental illness of parent/guardian, incarcerated relative, violent treatment of mother, substance use, and divorce. These all contribute to lesser academic performance such as lower grades, decreased attendance, and lower academic drive. When considering early childhood and adversities that lead to diminished academic performance, it is essential to look into several factors that early education students are faced with within the classroom. In a 2022 study conducted by Oeri and Roebbers, vocabulary, executive functioning, peer problems, maternal education, and pre-academic outcome variables. Furthermore, researchers investigated the variables of maternal depression, poverty, single parenthood, substance use, harsh discipline, and high parental stress and its impact on academic skills. The method for this was to look at pre-academic cognitive and social-emotional skills using four deprivation variables and three threat variables. Results showed that infant deprivation, not threat, is negatively associated with math scores and language skills in kindergarten. In addition, infant threat and deprivation are associated with behavioral problems and emotion-regulation difficulties within kindergarten. Chronic exposure to adversity is strongly related with all cognitive and social-emotional outcomes. The study concluded that adverse experiences have lasting imprints on child development, such that adverse experiences in early childhood (e.g., poverty, neglect, or violence) are related to poorer health outcomes as well as to impaired cognitive and social-emotional development. In more detail, "The results suggest that compared to temporary adverse exposure, chronic adverse exposure poses a potential risk for later development - across domains of cognition and emotions" (Oeri & Roebbers, 2022, p. 8). Essentially, this study is highly insightful for understanding how adverse childhood experiences are affiliated with academic performance.

In another 2022 study pertaining to adverse childhood experiences, the role of adverse childhood experiences predicting academic problems among college students was researched.

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More specifically, the study looked to test the direct association between ACEs and multiple areas of academic problems assessed over four years. It also examined the contribution of ACEs on academic performance after accounting for other academic risk factors as well as the indirect association between ACEs and academic problems through risk factors for poor academic performance. The method for this study was participants reporting their ACEs, intrinsic motivation, psychological distress, and financial status as first-semester freshmen. Administrative records were collected over 4 years and structural equation modeling was used to test the research aims. The conclusion suggested that more ACEs predict more academic problems and that the association between ACEs and academic performance would be explained, in part, by other academic risk factors, such as financial status, first-generation status, psychological distress, and intrinsic motivation. The study also suggested that more research is needed to enrich the field through its claim that, “more investigation into the direct association between ACEs and academic performance, research targeting the complex mechanisms underlying these associations is necessary” (Gresham et. al., 2022).

These two studies are similar in the way that they look at adverse childhood experiences (ACEs) but are different in both their methodologies and what the research aims to address. The first study is more focused on how adversity in early childhood impacts academic skills in the future while the second study looks specifically at how ACEs presently impact academic problems among college students. Together, these studies provide insightful information about ACEs and how they impact academic performance and success.

#### Additional Variables Impacting Academic Performance:

Although one of the primary focuses of this thesis is to examine how ACEs are associated with academic performance, an increase or lack thereof of cognitive, emotional, and social support embedded within familial nurture allows an individual to succeed or fall short in attaining academic successes. This is important to consider because individuals may attain the grades that they do from parental structures themselves without experiencing trauma, maltreatment, or ACEs. Students are able to develop a higher level of self-concept, social cognition, and a better attitude towards school as a result of positive parental influence and motivation at the forefront of their home. On the contrary, these attributes can be diminished

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from a lack of parental support, and therefore must be investigated to determine whether or not there is a correlation between academic achievement and limited support from parental figures.

#### Social and Emotional Variables Predict Cognitive Competence

In a 2022 study conducted by Hachem et. al, the researchers investigated whether or not social and emotional variables impact a student's cognitive abilities as well as their academic performance. Social and emotional skills include those that are essential for student success such as engagement, collaboration, and motivation. Cognitive skills include those such as reasoning, attention, memory, problem solving, and language. The methodology included the usage of a structural equation model as well as the distribution of surveys to around 30,000 students in a school district in Alberta, Canada grades age kindergarten to twelfth grade. The results of this study indicated that there is a strong correlation between social cognition and academic performance, as supported through high emotional and cognitive variables that are acquired through familial nurture. There is a growing importance of social and emotional skills within a student's development and academic success, therefore it is important to draw attention to the positive impact that building cognitive, emotional, and social skills up has on one's academic performance. In fact this study concludes that, "Student's sense of belonging and agency are fostered within [academic] communities, and opportunities for nurturing motivational resources are provided" which is "essential for optimal learning and the development of cognitive, social, and emotional capacities" (Hachem et. al, 2022).

#### Parental Child-Rearing Strategies

As indicated previously, the role of parental nurture is crucial in the overall development of a human, for the more a child is developed, the better they are able to achieve within the academic setting. In a similar manner, a 2012 study in this subject area strived to determine the relationship between parental strategies, psychopathology, and socio-emotional adjustments. Researchers Baker and Hoerger utilized the Egna Minnen Beträffande Uppfostran (EMBU) questionnaire as well as the 25-item Academic Maladjustment scale from the Student Adaptation to College Questionnaire in a population of 286 undergraduate college students over the United States. The EMBU questionnaire is "a measure of retrospective accounts of parents' childbearing behaviors" and includes topics such as

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physical risky behavior, interpersonal problems, and academic maladjustment for participants. The 25-Item Academic Maladjustment scale asks questions to determine academic adjustment issues. The conclusion of this study offered the idea that parental support and good child-rearing practices are associated with improved interpersonal and academic adjustment as well as self-regulation. Conversely, the results also implied that parental rejection and overcontrol result in deficits in self-regulation and adjustments within the academic environment while also leading to an uprising of psychopathology. Examples of these psychopathological instances include increases in anxiety, depression, and psychoticism. In essence, as the type of environment that a parent surrounds their children within childhood has long-lasting effects on several future factors such as those mentioned in the study.

#### Cross-Cultural Analysis of Parenting Styles

It is extremely important to identify any cross-cultural discrepancies that arise among parenting styles and varying cultures in order to determine if this variable is relevant in the overarching academic success of an individual. This can be achieved by looking at literature that addresses the subject area. In a 1988 study by Leung et. al, the researchers analyzed four parenting styles and their relationship with academic achievement among school-aged children within Hong Kong, Australia, and the United States. The method for this study included recruitment of tenth and eleventh graders from the countries above and the distribution of a survey. The students were from middle- to middle-lower-class. A total of 107 Chinese students, 142 European American students, and 133 European Australian students were used as participants. The survey that was distributed included questions pertaining to parental styles such as general authoritarianism, academic authoritarianism, general authoritativeness, and academic authoritativeness. General authoritarianism is defined by strict obedience while academic authoritarianism is defined by fastidious, over demanding, and punitive. General authoritativeness includes egalitarian principles, openness, and an exploration of ideas, while academic authoritativeness includes support and help from the parent within the schooling process (Leung et. al, 1988, p. 160). The survey results for academic achievement were analyzed using a regression model. The results of this study concluded that Australian parents were lower in academic authoritarianism than those of Chinese and American descent. In addition, Chinese parents were much higher in general

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authoritarianism and lower in academic and general authoritativeness. Additionally, academic achievement was positively related to general authoritativeness for American and Australian parents. In contrast, academic achievement was negatively related to academic authoritarianism for all three countries. This study suggests that the environment in which children are raised and the way in which they are treated indicates how academic achievement will be altered either negatively or positively.

Additionally, in a non-fiction book titled “Transcultural Child Development: Psychological Assessment and Treatment” (1997), author Johnson Powel examines how cultural and social differences impact child development while proposing certain treatments and interventions. Investigations of cultural differences within the psychological realm were conducted on Puerto Rican, Central American, Middle Eastern, Asian Indian, Filipino, Native Hawaiian, Mexican, Micronesian, Soviets, Hmong, Korean American, Chinese American, African American, and West African children. Johnston-Powel provides guidance on how to adapt treatments to the emergence of psychopathological disorders in order to meet the needs of children from varying cultures, thus giving insight into fostering a better childhood development based on the culture and societal expectations of an environment. Cultural relationships may contribute to, alleviate, mask, or create a false impression of children’s psychological state, meaning this can give rise to how culture is shaping a child's academic performance within the classroom. Child psychologists, psychiatrists, school psychologists, and other professionals involved in the evaluation and treatment of culturally diverse children can gain vast insight into these areas within the book. The final conclusions of the book indicate that, “child-rearing practices, tolerance of behaviors, cultural differences in help-seeking behaviors, and the expression of the lack of well-being differ from one cultural group to another. Consequently, there is a great variation in symptom selection, the remission and exacerbation of symptoms, diagnosis, and prognosis” (Powel, 1997, p. 361).

These studies are similar in the way they explore social and emotional variables that directly impact one’s academic success. The first article focuses more on the actual implications of students having the cognitive, social, and emotional skills they need to succeed while the second studies more at the affiliation between parental nurture and academic adjustment. The

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third article brings a cross-cultural dimension into the research and suggests the differences between parenting styles, the benefits and drawbacks that each generates for the child, and how this impacts academic achievement. The book offers a differing perspective that adds more substance to the existing literature. Essentially, the researchers are proficient in their methods and offer vast contributions to the psychological field.

#### Positive Impact of Familial Nurture

Looking at the opposing side of the argument, familial nurture through the form of support throughout childhood is essential for the development of strong academic skills that can later foster stronger academic performance. With stronger parental support and improved quality of established relationships, this sets a child up for a better chance to succeed within an academic environment. Studies have proven that the variable of a supportive family environment can lead to better future success no matter the socioeconomic status or quality of the school system that the child is surrounded with. In essence, this theme will explore how there is an intersection between nurture and academic achievement within students.

#### Role Between Parental-Child Relationship

In a 2022 research article by Sengonul, he examined and synthesized 75 studies that were published between 2003 and 2017. The methodologies of these studies ranged from longitudinal surveys and experimental models. These studies pertained to existing literature regarding the relationship between parental involvement, academic achievement within children, and how socioeconomic status plays into this relationship. He elaborates how parental involvement is an important factor in education, learning, and academic achievement of children and adolescents. Parental involvement can be defined by home-based and school-based involvement. Home-based involvement “refers to what parents do at home to promote their children's learning” while school-based involvement is “defined by activities and behaviors parents engage in at school, such as attending parent-teacher conferences and attending school events” (Sengonul, 2022). The results of his synthesis concluded how individual parental involvement and engagement is positively correlated with academic achievement, as it increases literacy of a child, enriches the activities of the child, and increases school involvement of a child. This study is highly beneficial to the existing

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literature because it provides an extensive background of an abundance of research that already exists and draws its own conclusions based on this.

In an additional recent 2023 study, Stienstra and Karlson examine the nature-nurture facets of academic achievement and how this intersects with gender, family background, and school context. The methodologies for this included a longitudinal twin study design that examines 37,000 Danish twin and sibling pairs through looking at genetic and environmental factors and how this impacts academic achievement. According to the results of this study, there is clear evidence that genetic factors are important for determining academic achievements within the subject area of Mathematics as opposed to English. In addition, familial background appears to have a stronger influence on academic achievement more in females than males. The variables of class size and teacher quality also play an important role in academic achievement, especially for those students who come from a disadvantaged background, such as lower socioeconomic status. In essence, this study highlights how academic achievement can be shaped by a complex interplay of several unique connections between genetics and the environments that surround one at home and within an academic setting. This has important implications for replicating further research because it demonstrates the many factors that must be considered such as family socioeconomic status, relationships between parents and children, and genetic influences.

Together, these two studies show the importance of familial nurture and how this sets a student up for academic success within a classroom setting. The first study is a beneficial baseline for additional articles that work to provide vast substance to the existing field while the second study is helpful for laying the foundation for variables that must be considered when replicating research. In conclusion, research has proven that when a child has a supportive environment in both an academic setting and at home, this sets the foundation for success.

#### Self-Efficacy

Self-efficacy is defined as one's belief in their ability to succeed in a certain task or while achieving a goal. Self-efficacy plays an immense role in shaping a student's well-being and success in the classroom. The development and maintenance of this self-efficacy can be

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significantly impacted by trauma and adverse childhood experiences (ACEs), such as abuse, neglect, and family dysfunction. These traumatic experiences often have profound and lasting effects on a child's psychological health, which in turn can influence their academic motivation, engagement, and success. Understanding the intersection between self-efficacy and ACEs is an important topic to address in the review of literature, as it provides critical insights into how early life stressors can affect educational trajectories. The culmination of literature in this area focuses on ACEs and self-efficacy but falls short of conveying how this manifests itself in the population of college students. For these reasons, this Honors Thesis will delve deeper into this topic to investigate the correlations of these shortcomings. Research in this area can inform interventions and support mechanisms designed to enhance self-efficacy among students who have experienced instances like these.

#### Trauma and Self-Efficacy

Many studies have shown the relationship between trauma and the depletion of one's perception of their ability to succeed. In a study (2024) by Melamed et. al, researchers conducted a meta-analysis to examine the relationship between trauma, maltreatment, and its association with self-concept in children and adolescents. To collect data, PubMed, PILOTS, PsycINFO, and Web of science databases were used. Furthermore, this study utilized the DSM-5 to operationally define traumatic events. The results from 134 independent studies suggested that there is a "significant negative effect of the relationship between trauma exposure and self-concept" and "greater trauma exposure was associated with poorer self-concept" (Melamed et. al, 2024). In addition, this study provided insightful discussion of results whereby, "Early identification of those who are at an increased risk of exposure to trauma and maltreatment is important" (Melamed et. al, 2024). In essence, the findings of this meta-analysis give rise to how early interventions are crucial to mitigate the adverse effects of trauma on self-concept in young individuals. These conclusions underscore the importance of recognizing and addressing trauma exposure as a preventative measure to safeguard their self-concept.

Furthermore, in an additional scholarly article (2020), researchers discuss how post-traumatic stress disorder (PTSD) influences one's sense of self within their default mode network. A

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default mode network is the scale whereby “self-related thoughts and experiences are represented neurobiologically” (Lanius et. al, 2020). Those with PTSD have experienced or witnessed traumatic events, causing intrusive memories, avoidance behaviors, and negative changes in their thinking and mood which has lifelong consequences for their self-concept. In other words, “Individuals with PTSD describe frequently that their traumatic experiences have become intimately linked to their perceived sense of self” (Lanius et. al, 2020). Those with PTSD have DMN with a “substantially reduced resting-state functional connectivity as compared to healthy individuals”. This reduction in the DMN can significantly impact the way those with PTSD process information about themselves and their relationships to the world around them. This can lead to a fragmented or distorted self-concept, where the boundaries between the self and others become blurred. As a result, individuals may experience alienation and disconnection, not only from others but from their own identity. This diminishment of self-concept is very debilitating, as it can exacerbate the cycle of trauma, with the altered self-perception reinforcing traumatic memories and responses. Overall, understanding the interplay between trauma and the DMN's role is crucial for looking at the relationships of trauma as a whole and how this impacts self-concept.

The studies by Melamed et al. (2024) and Lanius et al. (2020) both explore the significant impact of trauma on self-concept, but they differ in their specific focus and methodological approach. Melamed et al. conducted a meta-analysis examining the relationship between trauma, including maltreatment and self-concept among children and adolescents. Their study emphasizes the importance of early intervention to mitigate these effects and protect the self-concept of young individuals. On the other hand, Lanius et al. focuses specifically on individuals with PTSD and investigates how trauma alters the neurobiological processes within the default mode network. Their research highlights how PTSD results in a lower self-concept due to impairments in the DMN, leading to feelings of alienation and identity disconnection. Together, these studies contribute to a layered understanding of the psychological and neurobiological dimensions of trauma's impact on the self.

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### ACEs and Self-Efficacy

When looking at ACEs and self-efficacy, many studies have shown the relationships between ACEs and the depletion of one's perception of their ability to succeed. In a study (2024) conducted by Belloir et. al, the relationship between general self-efficacy and ACEs was investigated. This study focused solely on gender minority individuals such as those who have gender identities that do not align with their biological sex. The methodology included collecting data from Project AFFIRM, a long-term study that focuses on gender minority health, while using the Risk Factor Surveillance System ACE Module and the Global Severity Index (GSI) to collect data. The sample consisted of 166 gender minority adults who were mostly non-Hispanic white and female at birth. The results of this study indicated that "Participants who reported experiencing more ACEs had greater psychological distress and lower general self-efficacy. In addition, lower general self-efficacy was associated with higher psychological distress" (Belloir et. al, 2024). The researchers then conclude that "Interventions that aim to improve general self-efficacy may be beneficial in alleviating psychological distress in gender minority adults" (Belloir et. al, 2024). By focusing on enhancing self-efficacy, these interventions can empower individuals to overcome the effects of past trauma and improve their mental health outcomes. The study adds a crucial dimension to our understanding of how intersectional identities, such as being a gender minority and having a history of ACEs, impact psychological resilience and stress. This research highlights the need for inclusive and specialized support systems that acknowledge and cater to the diverse experiences of all individuals, particularly those within marginalized communities.

Moreover, in an additional study conducted by Alshawhi and Lafta (2014), researchers looked at the effect that childhood experiences had on one's self-efficacy during adulthood through utilizing a sample from Baghdad city. Their methodology included a cross-sectional study during the time of January 2013 to January 2014. Within this study, individuals at primary healthcare centers and universities were screened for their adverse childhood experiences using the Adverse Childhood Experiences International Questionnaire (ACE-IQ). In addition, data was gathered regarding their self-efficacy through using the self-esteem scale of Rosenberg. The results from 1040 subjects indicated that, "Household dysfunction-abuse and violence exposure was found to have an inverse relationship with the subject's self-esteem

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indicating that exposure to high levels of violence during childhood erodes the positive sense about the self and world” (AlShawi & Lafta, 2014). The main takeaway from this study is that childhood experiences shape self-concept and how an individual adapts to their world, thus suggesting that ACEs only impede this self-concept. In conclusion, the evidence from AlShawi and Lafta (2014) reinforces the critical impact of adverse childhood experiences on self-esteem and overall self-efficacy in adulthood. This research further illuminates the long-term consequences of ACEs, demonstrating how early exposure to dysfunction and violence can significantly disrupt an individual's ability to develop a positive self-image. These findings also emphasize the necessity for early and effective intervention strategies that can mitigate the negative effects of such experiences and support individuals in fostering a healthier, more resilient self-concept.

The studies conducted by Belloir et al. (2024) and AlShawi & Lafta (2014) both examine the impact of adverse childhood experiences (ACEs) on self-efficacy, but they approach the topic differently based on their distinct population focuses and methodologies. Both studies highlight the negative correlation between ACEs and self-concept or self-efficacy, underscoring how greater exposure to childhood adversity is associated with lower self-esteem and general self-efficacy in adulthood. Methodologically, each study relies on survey-based data collection using previously established tools to measure ACEs and self-perceptions. In essence, both studies work in tandem with one another to provide an overview of the existing literature regarding ACEs and self-efficacy, providing a foundation for future research in this Honors Thesis.

### Conclusion

Ultimately, the contributions of this literature to the field of psychology are vast. There have been several studies that identify the negative association between the presence of ACEs and academic performance as well as the presence of ACEs and self-efficacy. Although many of these studies have large participant pools and significant data, the findings have several shortcomings. The majority of these studies did not look specifically at the population of college students and how academic performance and academic self-efficacy are influenced by ACEs. In addition, the current literature is mostly focused on trauma, and not ACEs

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specifically, as it is important to note that ACEs can be traumatic, but trauma does not always fall under the category of an ACE. The next steps for research include closing these gaps and solidifying the overarching argument. To correct the weaknesses within the literature, the aim of this study is to look at the relationship between ACEs and academic performance, as measured by GPA and attendance, and academic self-efficacy within the population of Bryant University students. Due to the relationships within the literature, it can be predicted that the presence of ACEs will lead to poorer academic performance and lower academic self-efficacy.

## **RESEARCH QUESTIONS AND HYPOTHESES**

In correspondence to the existing findings within the research previously highlighted as well as its shortcomings, the following research questions and hypotheses were developed for this empirical study:

1. Within the population of Bryant University, how does the presence of adverse childhood experiences (ACEs) influence academic achievement measures such as GPA and attendance patterns?
  - a. The researcher hypothesizes that Bryant students with the presence of ACEs will have a lower GPA and poor attendance patterns.
2. Within the population of Bryant University, how does the presence of adverse childhood experiences (ACEs) influence perceived self-efficacy?
  - a. The researcher hypothesizes that Bryant students with the presence of ACEs will have a lower perceived self-efficacy.

## **METHODOLOGY**

### Study Type

The goal of this study is to determine how the presence of ACEs in a Bryant student's life correlates to academic performance and perceived self-efficacy. In addition, this study seeks to close the research gap and uncover the link between adverse early life experiences, academic outcomes, and perceived self-efficacy, as there is no existing study that addresses these three constructs. This research was conducted via the distribution of a Qualtrics survey through the utilization of three previously developed measures: the ACEs questionnaire from the original Felitti ACE Study (Felitti et. al, 1998), The Pediatric ACEs and Related Life-Events (PEARLS Screener), and the Academic Self-Concept Scale. In addition, questions pertaining to social support systems and inquiries about GPA and class attendance patterns were asked. Data was then analyzed and broken up by gender using the Statistical Package for Social Sciences (SPSS) to determine correlations between ACEs, academic performance, and self-efficacy.

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### Participants:

The participants of this study are college students at Bryant University over the age of 18 and present on the Bryant University campus. Prior to distribution of this survey, measures were taken to achieve Institutional Review Board (IRB) approval to address ethical concerns. After IRB approval, participants were recruited through a variety of methods such as the distribution of surveys from professors and Bryant staff. In addition, the survey link was sent to friends within the Bryant community of the primary investigator via text message. At the beginning of the Qualtrics survey, participants were asked to agree to a consent form to take part in the study. Those who did not consent to the form were required to terminate their study and for those who continued without consenting, their data was omitted. Only the primary investigator, thesis advisor, and editorial reviewer had access to these results. A copy of the consent form along with the IRB approval can be viewed in Appendix A.

### Measures

**The Original Ten ACEs: Felitti Ace Questionnaire:** This measure will be used to determine the presence of ACEs within the Bryant community. It stems from the original research of Vincent Felitti, as mentioned in the introduction (See Appendix B). Participants were asked to answer questions regarding exposure to ACEs prior to the age of 18 including physical abuse, emotional or psychological neglect, neglect of any kind, household substance abuse, mental illness of a caregiver, parental separation or divorce, incarceration of a family member, and witnessing domestic violence within their household (Felitti et. al, 1998). Although the original ACE research involves a question regarding sexual abuse, I chose to omit this, as sexual abuse has been proven to “refer not only to harm suffered within the family, but also to abuse suffered outside of the family” (Olah et. al, 2023). Overall, this measure is considered as viable and valid for retrospective assessment of childhood adversity. It has been proven to have an adequate internal consistency and reliability as well ( $\alpha = 0.70$ ), making it an appropriate measure for the purpose of this study.

**The Pediatric ACEs and Related Life-Events Screener (PEARLS) Screener:** This measure will be used to further determine the presence of ACEs within the Bryant community. The PEARLS measure asks more in-depth questions pertaining to ACEs and provides participants with an opportunity to express potential risk factors that can increase

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their risk for negative outcomes (See Appendix C). This screener was developed in 2018 by the Bay Area Research Consortium on Toxic Stress and Health (BARC) to identify children's exposure to childhood adversity. The exposures identified in this measure include the ACEs of abuse (physical, emotional, sexual), neglect (physical and emotional), and dysfunction in household among parents (caregiver separation/divorce, domestic violence, substance misuse, incarceration, mental illness). These factors were chosen not only due to being ACEs, but they are linked with "poor physical, developmental, and behavioral health outcomes in childhood and throughout life" (California Department of Healthcare Services, n.d.). This screener has high face validity, meaning that the items on the tool are measuring actual exposure to ACEs along with related life events.

**Academic Self-Concept Scale:** The Academic Self-Concept scale will be used to measure self-efficacy within the Bryant community to draw conclusions about their confidence in academic capabilities. This 40-item scale was developed by Reynolds in 1988 in his original study that tested the scale as "a measure of an academic facet of general self-concept in college students" (Reynolds et. al, 1988). This measure uses a 4-point scale to assess an individual's "perception about their academic aptitude in a particular academic field" (Flowers et. al, 2013). Responses on this scale range from one to four, one indicating strongly disagreeing with a component and four indicating strongly agreeing with a component. The items are then averaged, and higher scores reflect a more positive academic self-concept while lower scores denote a negative self-concept. College students are the target population for this scale, as it was developed for this age demographic, but it has also been validated for individuals ages ten and older (Flowers et. al, 2013). This scale has a high reliability and internal consistency ( $\alpha = .91$ ). Refer to Appendix D for the entire 40-point scale.

#### Additional Measures

While the ACE Questionnaire, PEARLS Screener, and Academic Self-Concept Scale work to provide information regarding ACEs and self-efficacy, individuals were asked additional questions. To gather important demographic information, participants were asked to provide their gender, age, ethnicity, sociodemographic, household income, and class year. Aside from this, participants were asked if they have been diagnosed with any mental health related

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illnesses such as anxiety or depression. Learning disabilities were also inquired about to factor in any external factors that impact GPA or attendance patterns. Following this, individuals were asked what their current GPA is and how often they attend classes. Lastly, participants were asked if the experience of parental abuse has affected their motivation to attend classes and engage in academic activities along with the extent to which they feel supported by friends and family within their academic pursuits. These questions were answered on a five-point scale ranging from not at all to extremely. These additional questions were important for the researcher to consider all areas surrounding the research question and hypothesis and can be found in Appendix E.

Potential Research Issues & Ethical Considerations

Ethical concerns may arise within this project due to the impactful subject area of addressing adversity within childhood, experience of trauma, onset of psychopathology from childhood experiences, and so on. In attempts to address this concern initially, a disclaimer will be given to the participants to determine whether or not they are comfortable with aiding in the data collection. Participants will also be provided with resources such as Bryant University Counseling Services, the Crisis Text Line, and the National Helpline should this survey be triggering to them. Additional issues that may arise include the potential that many individuals may not feel comfortable sharing their adverse childhood experiences, which will impact the data and its accuracy. The entirety of the research aspect of this project, including the surveys, was proposed to the Bryant University Institutional Review Board to receive necessary approval and considerations for ethical concern.

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**RESULTS**

Sample Description

Participants (N=212) were recruited through the distribution of the Qualtrics survey throughout the Bryant community. Of the 212 respondents 57% were female, 42% were male, and 1% identified as other or preferred not to specify. Additionally, 85% of participants reported White as their race with 6% reporting Black/African American, 6% Asian, and 4% other. Regarding the socioeconomic background of participants, the majority (48%) were of middle-class background, 38% of upper-middle class, 10% of lower-middle class, 5% of upper class, and 2% of lower class. Furthermore, 24% were freshmen, 27% sophomores, 18% juniors, and 28% seniors. In addition, 40% of participants reported being diagnosed with a mental health related illness while 62% reported not being diagnosed or preferred not to specify. Lastly 9% of participants reported having any learning disabilities while 89% reported not having any learning disabilities. Around 2% preferred not to specify.

Presence of ACEs, Academic Performance, and Academic Self-Concept

When investigating the presence of ACEs on the Bryant campus, women reported more events on the PEARLS screener ( $\mu=1.10$ ) compared to men ( $\mu=.70$ ). On this screener, the most reported events included living with a parent who had a problem with drinking or drugs (23.21%), living with a parent who swore at you, insulted you, or put you down (22.36%), living with a parent with mental illness or depression (13.08%), and losing a parent due to divorce, abandonment, or death (11.81%). Additionally, women also reported more events on the Felitti ACE Questionnaire ( $\mu=1.12$ ) compared to men ( $\mu=0.54$ ). In this questionnaire, the most reported events included emotional abuse (26.60%), parental separation (21.18%), household substance abuse (17.24%), and household mental illness (16.26%). Due to women reporting more events on both of these ACE questionnaires, the sample was additionally investigated based on gender to determine differences in correlations between ACEs, academic performance, and self-efficacy. See Appendix F for data regarding ACEs.

Regarding academic performance, the average GPA of the sample was 3.352 and 85% of students reported going to class every day. In addition, 13% of participants reported going to class several days (4 days a week) while 2% of participants reported going only some days (2-3 days a week). The majority of participants reported that their presence of ACEs slightly

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impacted their academic performance (19%) while 18% reported that their presence of ACEs did not impact their academic performance. Moreover, 9% answered moderately, 6% answered significantly, and 4% answered significantly. The rest of the participants reported that they did not have any of these experiences (45%).

Regarding self-efficacy, individuals on the Academic Self-Concept Scale reported mostly positive events. Examples include “Being a student is rewarding” with a mean score of 3.17 in the scale, meaning most participants agreed moderately. Other statements that were moderately to strongly agreed with included “If I try hard enough, I will be able to get good grades” ( $\mu=3.51$ ), “I consider myself a good student” ( $\mu=3.10$ ), and “I have a fairly clear sense of my academic goals” ( $\mu=3.14$ ). Moreover, a lower self-concept was reflected in the questions “Most of my classmates do better in school than I do” ( $\mu=2.20$ ), “I feel like I do not study enough before a test” ( $\mu=2.49$ ), “I have doubts of doing well in my major” ( $\mu=2.25$ ), and “I would like to be a much better student than I am now” ( $\mu=2.68$ ). In essence, the Academic Self-Concept Scale highlights a multifaceted perspective on student self-efficacy, demonstrating that students' academic self-perceptions are not uniformly positive or negative but are instead characterized by a mix of confidence and self-criticism. See Appendix G for results regarding self-efficacy.

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### Results of Research Questions

**R1: Within the population of Bryant University, how does the presence of adverse childhood experiences (ACEs) influence academic achievement measures such as GPA and attendance patterns?**

#### ACEs and GPA

Through the utilization of the software SPSS, the correlation between ACEs and GPA was investigated. The sample was investigated as a whole and then broken up into gender for males and females to determine if the results were replicated. Results supported the hypothesis that Bryant students with the presence of ACEs will have a lower GPA for the whole sample and females, but not for males. A bivariate analysis revealed that there is a significant negative correlation between ACEs and GPA for the whole sample, meaning that the presence of ACEs is indicative of a lower GPA. To elaborate using data, the PEARLS screener showed a significant negative correlation to GPA ( $r = -.19$ ) at when  $p < .01$ . For the Felitti ACE Questionnaire, there was a lower correlation to GPA ( $r = -.15$ ), but findings were still statistically significant when  $p < .05$ . Although these correlations are small, they still satisfy the requirements of being statistically significant at these p-values. When breaking this up further by gender, there was a larger correlation for females for ACEs vs. GPA, as both the Felitti ACE Questionnaire and PEARLS screener were negatively correlated ( $r = -.34$ ) with GPA when  $p < .01$ . Lastly, there was no statistically significant data at the  $p < .01$  and  $p < .05$  values for males, therefore signifying there is no correlation between ACEs and GPA for this gender. Refer to Appendix H for correlation models for the whole sample, men, and women and Appendix I for correlation data.

#### ACEs and Class Attendance

Results of the bivariate analysis supported the hypothesis that Bryant students with the presence of ACEs will have poor attendance patterns for the whole sample, females, and males. The data revealed that for the whole sample, the PEARLS Screener has a stronger statistically significant negative correlation to attendance ( $r = -.34$  when  $p < .01$ ) compared to the Felitti ACE Questionnaire ( $r = -.24$  when  $p < 0.01$ ). The correlation between the PEARLS Screener and attendance was even stronger for females ( $r = -.36$  when  $p < .01$ ). For males, the data was statistically significant when  $p < .05$  with both r values being  $r = -.23$ . This indicates

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that the strongest correlation between ACEs and poor attendance patterns lies in the female population. Refer to Appendix H for correlation models for the whole sample, men, and women and Appendix I for correlation data.

**R2: Within the population of Bryant University, how does the presence of adverse childhood experiences (ACEs) influence perceived self-efficacy?**

ACEs and Self-Efficacy

Through the utilization of the software SPSS, the correlation between ACEs and self-efficacy was investigated. Once again, the sample was investigated as a whole and then broken up into gender for males and females to determine if the results were replicated. Results of the bivariate analysis supported the hypothesis that Bryant students with the presence of ACEs will have lower self-efficacy for the whole sample and females, but not for males. For the whole sample, both the Felitti ACE Questionnaire and PEARLS screener were negatively correlated ( $r = -.26$ ) with self-efficacy when  $p < .01$ . For females, the Felitti ACE Questionnaire showed a stronger significant negative correlation ( $r = -.37$  when  $p < .01$ ) compared to the PEARLS Screener ( $r = -.33$  when  $p < .01$ ). Lastly, there was no statistically significant data at the  $p < .01$  and  $p < .05$  values for males, therefore signifying there is no correlation between ACEs and self-efficacy for this gender. Refer to Appendix H for correlation models for the whole sample, men, and women and Appendix I for correlation data.

## **CONCLUSION/DISCUSSION**

The results of this study indicate that ACEs are highly prevalent on the Bryant University campus. It is crucial to recognize that the data elucidates how these students have lower GPAs, lower attendance patterns, and a diminished self-efficacy. In other words, the results highlight the profound impact that adverse childhood experiences (ACEs) have on various aspects of life among college students. The findings reveal a significant negative correlation between ACEs and academic achievement, specifically reflected in GPA scores and class attendance, across the general student population, with a notably stronger impact among female students. In addition, students reporting higher numbers of ACEs exhibited a consistent pattern of diminished self-efficacy in their academic abilities and goals, again with a more pronounced effect observed in female students. This aligns with previous research suggesting that ACEs can lead to a wide range of emotional and psychological challenges that extend into young adulthood, affecting educational outcomes.

While the overall trends point to negative consequences of ACEs in the realm of class attendance and self-efficacy, the gender-specific analysis provides additional layers of complexity. Females reported significantly lower GPAs and self-efficacy when ACEs were present, whereas these correlations were not statistically significant among males. This gender difference may highlight the need for gender-targeted interventions that address the unique ways in which males and females process and respond to childhood adversities. Moreover, the high prevalence of ACEs reported in this study—such as living with a parent with mental health issues or substance abuse—calls for an increased focus on supportive services on campus. Colleges, including Bryant University, could benefit from implementing more mental health services and educational support programs specifically designed to address the needs of students affected by ACEs.

In addition, this study calls for the detailed analysis of women in higher education in order to prevent college attrition. Knowing that the presence of ACEs leads to lower self-efficacy, lower GPA, and poorer attendance suggests that having trauma-informed higher-education is critical. In addition to this, early identification and intervention strategies should be implemented for students so that professors and faculty can provide additional support in

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efforts to boost GPA, attendance, and self-efficacy and mitigate the struggles these students face. Trauma-informed practices such as fostering supportive and understanding environments should also be adopted through training faculty and staff to recognize the signs of trauma and respond with empathy and sensitivity. Aside from this, holistic support services are important to provide a comprehensive approach to address the academic, social, emotional, and mental health needs of students. This may include a higher presence of counseling services, peer support groups, and access to resources for coping with stress and trauma. Lastly, building resilience and coping skills is a must for empowering students to overcome the challenges associated with their academic ability and self-efficacy.

In summary, this study not only adds to the growing body of literature demonstrating the negative impact of ACEs on educational outcomes, but also calls for a tailored approach to support systems in educational institutions. The implications of these findings highlight the critical need for early identification and support for students with ACEs, potentially through enhanced counseling services and programming that can mitigate the impact of these experiences on academic performance. Secondly, the findings advocate for the development of gender-specific interventions that recognize and address the distinct ways in which ACEs affect male and female students differently.

By acknowledging and addressing the effects of childhood adversity, universities can enhance educational equity and foster an environment where all students have the opportunity to succeed academically and foster a higher self-efficacy.

## **LIMITATIONS AND FUTURE RESEARCH**

A significant limitation in this project was that other than the consent form, questions were not mandatory to answer due to the sensitive nature of the topic. This means that several questions within the survey did not have a full response rate, therefore the researcher had to filter out this data, thus decreasing the amount of valid participants. Another limitation includes the demographics of the data, as they do not accurately reflect the current Bryant community. For instance, the majority of respondents were female (57%) while Bryant is a predominantly male school, therefore there was not an accurate representation of gender. In addition, a limitation includes the number of participants, as only 212 responses were gathered due to the time frame for research within this thesis. Lastly, another limitation based on the research method includes how truthful respondents were when answering the survey questions. This survey was distributed by several professors as extra credit, therefore when students were incentivized to complete the survey, they could have rushed and lacked honesty in their answers.

Future research for this Honors Thesis aims to replicate the study using a larger sample. This will allow for the researcher to determine if the results are reliable and reveal significant findings. In addition, the methodology of the survey could be changed to interviews, as this can reveal more detailed information that uncovers the link between ACEs, academic performance, and self-efficacy. Moreover, for this study, the researcher specifically focused on splitting the sample up by gender, but the sample can also be investigated based on different variables such as race or socioeconomic status to determine their correlations to ACEs, academic achievement, and perceived self-efficacy.

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### **APPENDICES**

#### **Appendix A– Consent Form and IRB Approval**

You are invited to participate in our research study that explores the relation between childhood adversity and academic achievement within college. This survey is being conducted by Sydney Tucker, a Bryant University student, as a part of her Honors Thesis Project.

From the CDC: "Adverse childhood experiences, or ACEs, are potentially traumatic events that occur in childhood (0-17 years). For example: experiencing violence, abuse, or neglect witnessing violence in the home or community having a family member attempt or die by suicide Also included are aspects of the child's environment that can undermine their sense of safety, stability, and bonding, such as growing up in a household with: substance use problems mental health problems instability due to parental separation or household members being in jail or prison."

From Oxford Bibliographies: Academic Achievement can be defined as "performance outcomes that indicate the extent to which a person has accomplished specific goals that were the focus of activities in instructional environments, specifically in school, college, and university"

We hope to learn about the correlations between childhood adversity and academic achievement/success based on your performance within college. You were selected as a possible participant in this study because you are a current member of the Bryant community.

Any information obtained in connection with this study will remain confidential and will not be disclosed to the general public in a way that can be traced to you. In any written reports or publications, no participant other than the researchers will be identified, and only anonymous data will be presented. This consent form, with your signature, will be stored separately and independently from the data collected so that your responses will not be identifiable.

Your participation is totally voluntary, and your decision whether or not to participate will not affect your future relations with Bryant University or its employees in any way. If you decide to participate, you are also free to discontinue participation at any time without affecting such relationships. However, it is requested that you notify the investigator of this.

Please indicate below if you have decided to participate. Your indication specifies that you are at least 18 years of age and have read the information provided above. Your indication does not obligate you to participate, and you may withdraw from the study at any time without any consequences.

TRIGGER WARNING: This survey includes questions about potentially distressing topics such as substance abuse by a parent, physical abuse, death of a parent, child neglect, parental suicide, witnessed domestic violence, and parental incarceration. In the case that this survey causes any psychological threats, please feel free to terminate the survey. In addition, here are some resources that may be useful upon completion of this survey:

Bryant Counseling Services: (401) 232-6045  
Childhelp National Child Abuse Hotline: (800) 422-4453  
Crisis Text Line: Text HOME to 741741  
National Suicide and Crisis Lifeline: 988 Substance Abuse and Mental Health Services Administration National Helpline: (800)-662-4357

Thank you for your considerations for participation,  
Sydney Tucker

I agree to participate in this study:

- ☐ Yes  
☐ No

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March 2024

Sydney Tucker:

RE: IRB Proposal #2024-0305

TITLE: Navigating the Shadows: Unraveling the Complex Threads of Childhood Adversity and its Implications on Academic Achievement

Dear Sydney:

Your proposal, entitled “Navigating the Shadows: Unraveling the Complex Threads of Childhood Adversity and its Implications on Academic Achievement” was considered under IRB Guidelines for expedited review. The IRB Committee of Bryant University approved the proposal on March 5, 2024.

Bryant University is strongly committed to adhering to the basic ethical principles related to the conduct of research involving human subjects as set forth in *The Belmont Report: Ethical Principles and Guidelines for the Protection of Human Subjects of Research*. The submission of your proposal to the IRB Committee supports the goals of Bryant University and the IRB Committee and ensures that research involving any members of the Bryant community is in strict accordance with these ethical principles and guidelines.

Thank you for your submission, and good luck with your research.

Very truly yours,

Sukki Yoon  
Chair, IRB Committee

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Appendix B – Felitti ACE Questionnaire

<p><b>Category of childhood exposure<sup>a</sup></b></p> <hr/> <p><b>Abuse by category</b></p> <p><b>Psychological</b> <i>(Did a parent or other adult in the household . . .)</i> Often or very often swear at, insult, or put you down? Often or very often act in a way that made you afraid that you would be physically hurt?</p> <p><b>Physical</b> <i>(Did a parent or other adult in the household . . .)</i> Often or very often push, grab, shove, or slap you? Often or very often hit you so hard that you had marks or were injured?</p> <p><b>Sexual</b> <i>(Did an adult or person at least 5 years older ever . . .)</i> Touch or fondle you in a sexual way? Have you touch their body in a sexual way? Attempt oral, anal, or vaginal intercourse with you? Actually have oral, anal, or vaginal intercourse with you?</p> <p><b>Household dysfunction by category</b></p> <p><b>Substance abuse</b> Live with anyone who was a problem drinker or alcoholic? Live with anyone who used street drugs?</p> <p><b>Mental illness</b> Was a household member depressed or mentally ill? Did a household member attempt suicide?</p> <p><b>Mother treated violently</b> <i>Was your mother (or stepmother)</i> Sometimes, often, or very often pushed, grabbed, slapped, or had something thrown at her? Sometimes, often, or very often kicked, bitten, hit with a fist, or hit with something hard? Ever repeatedly hit over at least a few minutes? Ever threatened with, or hurt by, a knife or gun?</p> <p><b>Criminal behavior in household</b> Did a household member go to prison?</p>
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Appendix C – PEARLS ACE Screener

- |  |
|--|
| 1. Have you ever lived with a parent/caregiver who went to jail/prison?  |
| 2. Have you ever felt unsupported, unloved and/or unprotected?   |
| 3. Have you ever lived with a parent/caregiver who had mental health issues?<br><i>(for example, depression, schizophrenia, bipolar disorder, PTSD, or an anxiety disorder)</i>  |
| 4. Has a parent/caregiver ever insulted, humiliated, or put you down?  |
| 5. Has your biological parent or any caregiver ever had, or currently has a problem with too much alcohol, street drugs or prescription medications use?   |
| 6. Have you ever lacked appropriate care by any caregiver?<br><i>(for example, not being protected from unsafe situations, or not being cared for when sick or injured even when the resources were available)</i>   |
| 7. Have you ever seen or heard a parent/caregiver being screamed at, sworn at, insulted or humiliated by another adult?<br><br><u>Or</u> have you ever seen or heard a parent/caregiver being slapped, kicked, punched beaten up or hurt with a weapon?  |
| 8. Has any adult in the household often or very often pushed, grabbed, slapped or thrown something at you?<br><br><u>Or</u> has any adult in the household ever hit you so hard that you had marks or were injured?<br><br><u>Or</u> has any adult in the household ever threatened you or acted in a way that made you afraid that you might be hurt? |
| 9. Have you ever experienced sexual abuse?<br><i>(for example, has anyone touched you or asked you to touch that person in a way that was unwanted, or made you feel uncomfortable, or anyone ever attempted or actually had oral, anal, or vaginal sex with you)</i>  |
| 10. Have there ever been significant changes in the relationship status of your caregiver(s)?<br><i>(for example, a parent/caregiver got a divorce or separated, or a romantic partner moved in or out)</i>  |

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Appendix D– Academic Self-Concept Scale Questions

1. Being a student is a very rewarding experience.
2. If I try hard enough, I will be able to get good grades.
3. Most of the time my efforts in school are rewarded.
4. No matter how hard I try, I do not do well in school.
5. I often expect to do poorly on exams.
6. All in all, I feel I am a capable student.
7. I do well in my courses given the amount of time I dedicate to studying.
8. My parents are not satisfied with my grades in college.
9. Others view me as intelligent.
10. Most courses are very easy for me.
11. I sometimes feel like dropping out of school.
12. Most of my classmates do better in school than I do.
13. Most of my instructors think that I am a good student.
14. At times I feel college is too difficult for me.
15. All in all, I am proud of my grades in college.
16. Most of the time while taking a test I feel confident.
17. I feel capable of helping others with their class work.
18. I feel teachers' standards are too high for me.
19. It is hard for me to keep up with my class work.
20. I am satisfied with the class assignments that I turn in.
21. At times I feel like a failure.
22. I feel I do not study enough before a test.
23. Most exams are easy for me.
24. I have doubts that I will do well in my major.
25. For me, studying hard pays off.
26. I have a hard time getting through school.
27. I am good at scheduling my study time.
28. I have a fairly clear sense of my academic goals.
29. I would like to be a much better student than I am now.
30. I often get discouraged about school.
31. I enjoy doing my homework.
32. I consider myself a very good student.
33. I usually get the grades I deserve in my courses.
34. I do not study as much as I should.
35. I usually feel on top of my work by finals week.
36. Others consider me a good student.
37. I feel that I am better than the average college student.
38. In most of the courses, I feel that my classmates are better prepared than I am.
39. I feel that I do not have the necessary abilities for certain courses in my major.
40. I have poor study habits.

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Appendix E– Additional Questions From Qualtrics Survey

1. What is your gender?
  - a. Female
  - b. Male
  - c. Other/Prefer not to specify
2. What is your age?
  - a. 18-25
  - b. 25-40
  - c. 40-65
  - d. 65+
3. Are you of Spanish, Hispanic, or Latino origin?
  - a. Yes
  - b. No
4. Choose one or more races that you consider yourself to be:
  - a. White or Caucasian
  - b. Black or African American
  - c. American Indian/Native American or Alaska Native
  - d. Asian
  - e. Native Hawaiian or Other Pacific Islander
  - f. Other
  - g. Prefer not to say
5. What is your current class year?
  - a. Freshman
  - b. Sophomore
  - c. Junior
  - d. Senior
6. Have you been diagnosed with any mental health related illnesses such as anxiety or depression?
  - a. Yes
  - b. No
  - c. Prefer not to answer
7. Do you have any learning disabilities?
  - a. Yes
  - b. No
  - c. Prefer not to answer
8. What is your current GPA?

Questions Regarding ACEs:

1. Do you feel as though these experiences have impacted your current academic performance (GPA and attendance records)?
  - a. Not at all
  - b. Slightly
  - c. Moderately
  - d. Significantly
  - e. Extremely

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- f. I did not have any of these experiences
- 2. How has the experience of parental abuse affected your motivation to attend classes and engage in academic activities?
  - a. Not at all
  - b. Slightly
  - c. Moderately
  - d. Significantly
  - e. Extremely
  - f. I did not have any of these experiences
- 3. To what extent do you feel supported by family and friends in your academic pursuits?
  - a. Not at all
  - b. Slightly
  - c. Moderately
  - d. Significantly
  - e. Extremely

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### Appendix F– Results of ACE Screeners

#### **Felitti ACE Questionnaire**

**Q14 - Have you experienced any of the following adverse childhood experiences before the age of 18?**

Physical abuse	8.87%
Emotional abuse	26.60%
Neglect	4.93%
Household substance abuse	17.24%
Household mental illness	16.26%
Parental Separation or divorce	21.18%
Incarceration of a household member	1.48%
Witnessing domestic violence within your household	3.45%

#### **PEARLS Screener**

Q8 - The following list of questions is a screening for Adverse Childhood Experiences titled PEARLS. Our relationships and experiences—even those in childhood—can affect our health and well-being. Difficult childhood experiences are very common. Select from the list below if you have experienced any of the following during childhood:

Felt like you did not have enough to eat, had to wear dirty clothes, or had no one to protect or take care of you	3.80%
Lost a parent due to divorce, abandonment, death, or another reason	11.81%
Lived with a parent/guardian who was depressed, mentally ill, or attempted suicide	13.08%
Lived with anyone who had a problem with drinking or using drugs	23.21%
Lived with parents who hit, punched, beat, or threatened to harm one another	4.22%
Lived with anyone who went to jail or prison	3.80%
Lived with a parent/adult who swore at you, insulted you, or put you down	22.36%
Felt like no one in your family loved you or thought you were special	8.44%
Lived with a parent who ever hit, beat, kick, physically hurt you in any way	9.28%

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### Appendix G– Academic Self-Concept Scale Results

#	Field	Minimum	Maximum	Mean
1	Being a student is a very rewarding experience.	1.00	4.00	3.17
2	If I try hard enough, I will be able to get good grades.	1.00	4.00	3.51
3	Most of the time, my efforts in school are rewarded.	1.00	4.00	2.98
4	No matter how hard I try, I do not do well in school.	1.00	4.00	1.72
5	I often expect to do poorly on exams.	1.00	4.00	2.03
6	All in all, I feel like I am a capable student.	1.00	4.00	3.33
7	I do well in my courses given the amount of time I dedicate to studying.	2.00	4.00	3.18
8	My parents are not satisfied with my grades in college.	1.00	4.00	1.68
9	Others view me as intelligent.	1.00	4.00	2.92
10	Most courses are very easy for me.	1.00	4.00	2.37
11	I sometimes feel like dropping out of school.	1.00	4.00	1.86
12	Most of my classmates do better in school than I do.	1.00	4.00	2.20
13	Most of my instructors think that I am a good student.	1.00	4.00	3.13
14	At times, I feel like college is too difficult for me.	1.00	4.00	2.06
15	All in all, I am proud of my grades in college.	1.00	4.00	2.97
16	Most of the time while taking a test, I feel confident.	1.00	4.00	2.52
17	I feel capable of helping others with their class work.	1.00	4.00	2.82
18	I feel like teachers' standards are too high for me.	1.00	4.00	1.92
19	It is hard for me to keep up with my class work.	1.00	4.00	2.04
20	I am satisfied with the class assignments that I turn in.	1.00	4.00	2.96

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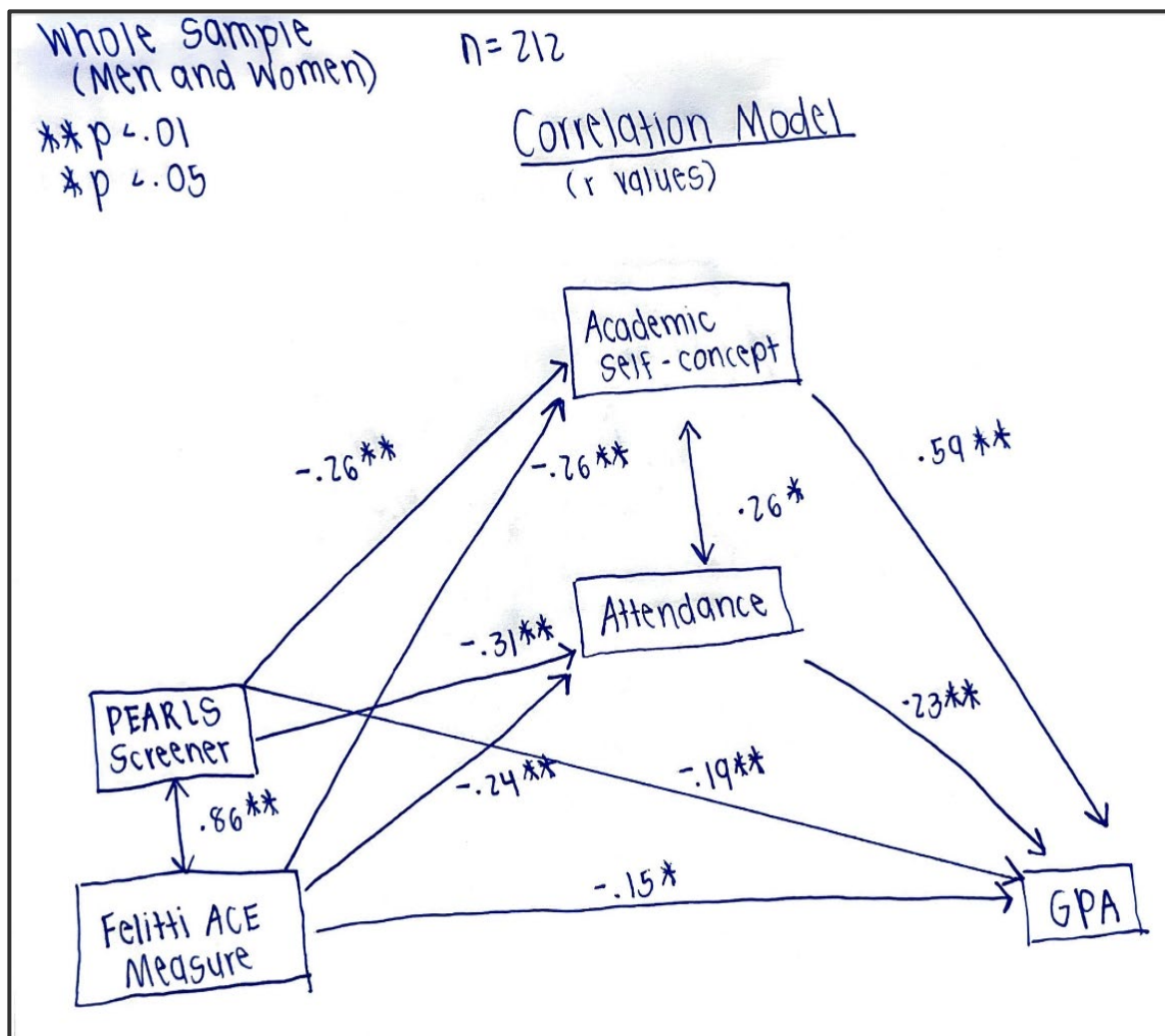
21	At times, I feel like a failure.	1.00	4.00	2.08
22	I feel like I do not study enough before a test.	1.00	4.00	2.49
23	Most exams are easy for me.	1.00	4.00	2.11
24	I have doubts of doing well in my major.	1.00	4.00	2.25
25	I have a hard time getting through school.	1.00	4.00	1.95
26	For me, studying hard pays off.	1.00	4.00	2.92
27	I am good at scheduling my study time.	1.00	4.00	2.65
28	I have a fairly clear sense of my academic goals.	1.00	4.00	3.14
29	I would like to be a much better student than I am now.	1.00	4.00	2.68
30	I often get discouraged about school.	1.00	4.00	2.23
31	I enjoy doing my homework.	1.00	4.00	2.04
32	I consider myself a good student.	1.00	4.00	3.10
33	I usually get the grades I deserve in my courses.	1.00	4.00	3.03
34	I do not study as much as I should.	1.00	4.00	2.60
35	I usually feel on top of my work.	1.00	4.00	2.84
36	Others consider me a good student.	1.00	4.00	3.04
37	I feel that I am better than the average college student.	1.00	4.00	2.72
38	In most of the courses, I feel that my classmates are better prepared than I am.	1.00	4.00	2.25
39	I feel that I do not have the necessary abilities for certain courses in my major.	1.00	4.00	1.91
40	I have poor study habits.	1.00	4.00	2.25

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Appendix H– Correlation Models for Whole Sample, Men, and Women With R-Values Depicted

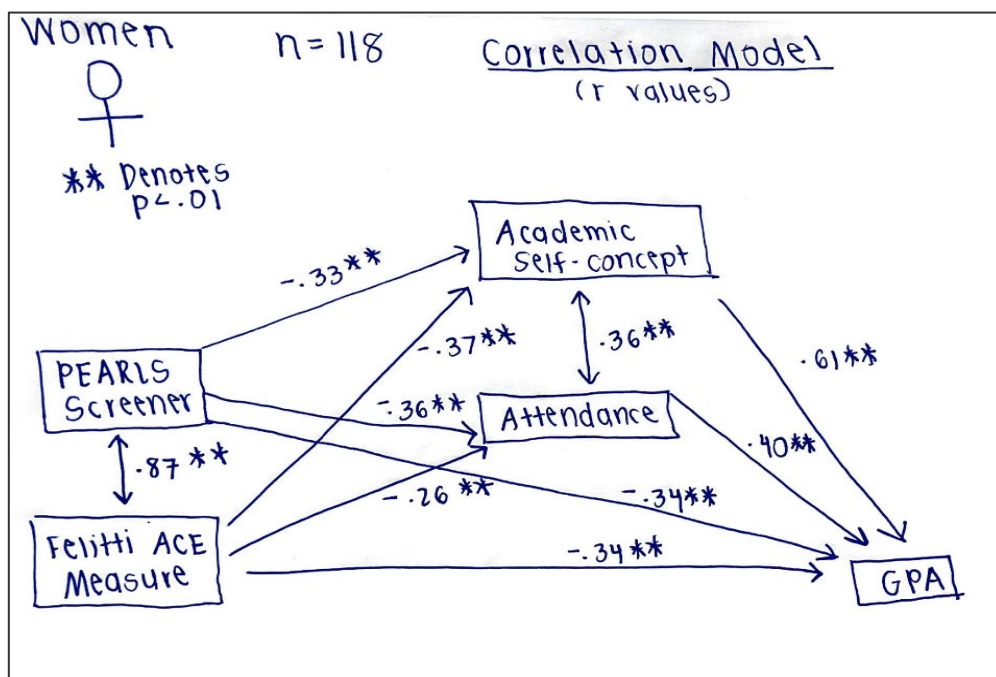
**Correlation Model for Whole Sample**



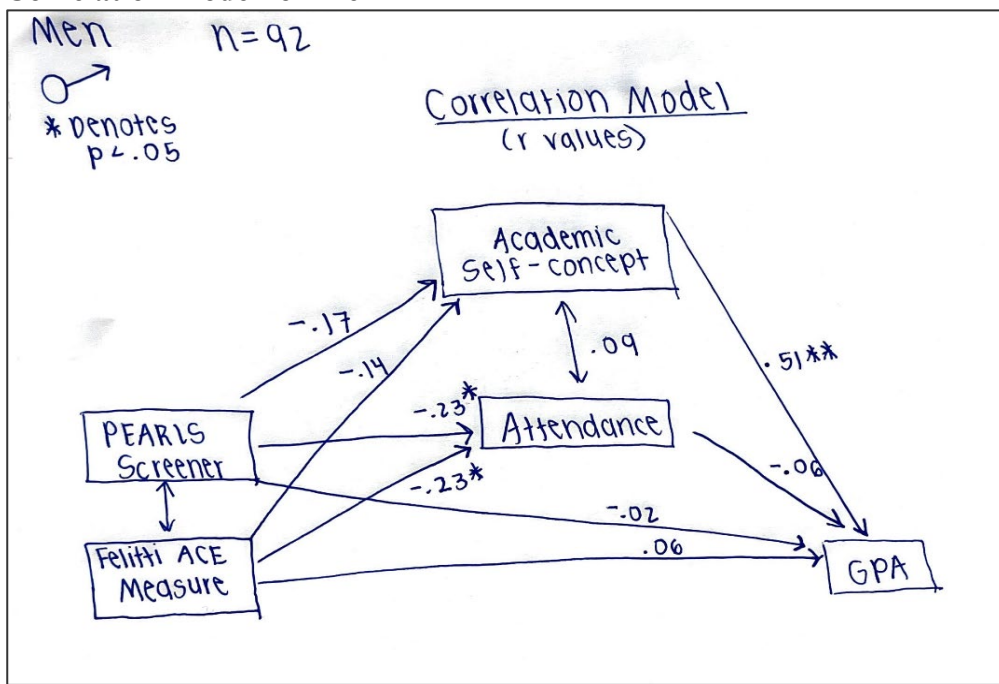
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**Correlation Model for Women**



**Correlation Model for Men**



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### Appendix I – Correlation Data for Whole Sample, Women, and Men

Correlations for WHOLE SAMPLE						
		Q8 – PEARLS Screener	Q14 – Felitti ACE Questionnaire	Academic Self- Concept Scale	Attendance Records	What is your current GPA?
Q8 – PEARLS Screener	Pearson Correlation	1	.858**	-.263**	-.308**	-.194**
	Sig. (2-tailed)		.000	.000	.000	.006
	N	212	212	203	202	203
Q14 – Felitti ACE Questionnaire	Pearson Correlation	.858**	1	-.256**	-.236**	-.145*
	Sig. (2-tailed)	.000		.000	.001	.040
	N	212	212	203	202	203
Academic Self-Concept Scale	Pearson Correlation	-.263**	-.256**	1	.260**	.588**
	Sig. (2-tailed)	.000	.000		.000	.000
	N	203	203	203	202	196
Attendance Records	Pearson Correlation	-.308**	-.236**	.260**	1	.230**
	Sig. (2-tailed)	.000	.001	.000		.001
	N	202	202	202	202	195
What is your current GPA?	Pearson Correlation	-.194**	-.145*	.588**	.230**	1
	Sig. (2-tailed)	.006	.040	.000	.001	
	N	203	203	196	195	203

\*\* Correlation is significant at the 0.01 level (2-tailed).

\* Correlation is significant at the 0.05 level (2-tailed).

Correlations for FEMALES						
		Q8- PEARLS Screener	Q14- Felitti ACE Questionnaire	Academic Self- Concept Scale	Attendance Records	What is your current GPA?
Q8- PEARLS Screener	Pearson Correlation	1	.870**	-.331**	-.357**	-.337**
	Sig. (2-tailed)		.000	.000	.000	.000
	N	118	118	110	110	115
Q14- Felitti ACE Questionnaire	Pearson Correlation	.870**	1	-.372**	-.264**	-.343**
	Sig. (2-tailed)	.000		.000	.005	.000
	N	118	118	110	110	115
Academic Self-Concept Scale	Pearson Correlation	-.331**	-.372**	1	.360**	.607**
	Sig. (2-tailed)	.000	.000		.000	.000
	N	110	110	110	110	109
Attendance Records	Pearson Correlation	-.357**	-.264**	.360**	1	.400**
	Sig. (2-tailed)	.000	.005	.000		.000
	N	110	110	110	110	109
What is your current GPA?	Pearson Correlation	-.337**	-.343**	.607**	.400**	1
	Sig. (2-tailed)	.000	.000	.000	.000	
	N	115	115	109	109	115

\*\* Correlation is significant at the 0.01 level (2-tailed).

a. What is your gender? = Female

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Correlations for MALES						
		Q8-PEARLS Screener	Q14- Felitti ACE Questionnaire	Academic Self- Concept Scale	Attendance Records	What is your current GPA?
Q8—PEARLS Screener	Pearson Correlation	1	.842**	-.173	-.225*	-.017
	Sig. (2-tailed)		.000	.101	.033	.878
	N	92	92	91	90	86
Q14- Felitti ACE Questionnaire	Pearson Correlation	.842**	1	-.136	-.226*	.055
	Sig. (2-tailed)	.000		.197	.032	.612
	N	92	92	91	90	86
Academic Self-Concept Scale	Pearson Correlation	-.173	-.136	1	.093	.510**
	Sig. (2-tailed)	.101	.197		.382	.000
	N	91	91	91	90	85
Attendance Records	Pearson Correlation	-.225*	-.226*	.093	1	-.062
	Sig. (2-tailed)	.033	.032	.382		.573
	N	90	90	90	90	84
What is your current GPA?	Pearson Correlation	-.017	.055	.510**	-.062	1
	Sig. (2-tailed)	.878	.612	.000	.573	
	N	86	86	85	84	86

\*\* . Correlation is significant at the 0.01 level (2-tailed).

\* . Correlation is significant at the 0.05 level (2-tailed).

a. What is your gender? = Male

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