

THE RELATIONSHIP BETWEEN ADVERSE CHILDHOOD EXPERIENCES AND EMOTIONAL STABILITY AMONG ORPHANAGE-RESIDING COLLEGE STUDENTS: MEDIATING ROLE OF RESILIENCE

Muhammad Zaryab¹, Muhammad Zaman^{*2}

¹SZABIST University, Islamabad

^{*2}International Islamic University, Islamabad

Corresponding Author: *

Muhammad Zaman

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ABSTRACT

This study is aimed to investigate the relationship between adverse childhood experiences and emotional stability among orphanage residing college students while focusing in the resilience as a mediator variable. There were 50 participants who were residing in various branches of orphanage named "Anjuman Faizul Islam" and currently enrolled in college. The data was collected by using standardized tools where adverse childhood experiences were measured through Pediatrics Adverse Childhood Experiences and Related Life Events (PEARLS) consisting of 19 items while emotional stability was measured by Neuroticism (Big Five Inventory) and resilience was measured by Brief Resilience Scale (BRS). Descriptive analysis was conducted to analyze the demographic characteristics of the sample followed by psychometric analysis to assess psychometric properties of the measures. Various analysis (i.e., correlation, regression) was run to test the hypotheses. Results revealed the significant negative correlation between adverse childhood experiences and emotional stability proving the hypothesis that higher adverse childhood experiences will be negatively correlated with emotional stability. Furthermore, results also demonstrated the role of resilience as mediator where high resilience was associated with higher emotional stability. Moreover, longer duration of stay in orphanage was positively correlated with resilience. These findings highlight the role of adverse childhood experiences in shaping emotional stability and emphasizing the importance to provide psychological support to suffering individuals.

INTRODUCTION

A kid who lacks access to the care and support that parents would typically provide because of their unavailability owing to illness, death, or other circumstances is sometimes referred to as an orphan. Many international bodies and legal forums have created this concept, and it is widely acknowledged.

According to the UN Convention regarding the Rights of the Child, that went into force in 1989, a child who has lost one or both of their parents due to mortality or any other cause is considered an orphan. There is a distinction between children who are single orphans and those who

have experienced the loss of both parents. This assembly acts as a widely recognized framework for defending and advancing the rights of children and orphans. Moreover, the legal definition of orphan for the purpose of regulations and laws varies throughout nations. These categories often adhere to the UNCRC, however they could also have additional specifications, such as the cause of a parent's death or a minimum age. Note that the term "orphans" refers to a broad category of circumstances, including people who were adopted or accepted into a family and also people living in foster homes or safe havens. Globally,

social services and child welfare programs place a high priority on understanding and meeting the needs of orphans. (UNCRC, 1989).

When we talk about adverse childhood experiences, we are talking about a broad spectrum of challenging circumstances and traumatic events that people go through in their early years, which are normally from birth to when they reach the age of eighteen. These interactions often have a major and lasting impact on an individual's mental, emotional, and physical health for the duration of their lives. The study centers around college learners who were raised in orphanages, therefore it's critical to recognize that this cohort commonly had traumatic childhood experiences due to the circumstances that formed their early lives. (Hodges, Godbout, & Briere, 2013).

Negative childhood events have a significant impact on mental health, which is one of the key ways they influence an individual's later life. Adolescents who suffer trauma are often more vulnerable to mental health problems, including anxiety, despair, and symptoms of post-Traumatic Stress Disorder. Exposure to stress at an early age can disrupt normal brain development, particularly in areas related to coping strategies and emotion control. These alterations in brain chemistry that occur as a person approaches puberty and the early stages of adulthood may alter how people perceive stress in their daily lives, which could lead to persistent issues with their mental health. and how to see them (Masten, 2015).

Interpersonal interactions are also impacted by adverse childhood experiences. Childhood adversity might affect an individual's ability to form and maintain positive relationships with others. It can be difficult for people who have experienced trauma to express themselves, gain trust, or feel connected to others, making it tough to build and preserve meaningful relationships. Patterns formed in early relationships, such as familial bonds, can often influence future interactions with peers, intimate partners, and family members. Unfavorable childhood experiences can result in interpersonal problems that disrupt social support systems,

which are essential for preserving mental and emotional well-being and preventing social isolation (Kelly- Irving et al., 2013; Sachs-Ericsson et al., 2018).

Adverse experiences in early life also have a substantial impact on educational achievements. Children who have experienced a traumatic upbringing may find it difficult to concentrate and study in school due to the psychological and emotional repercussions of trauma.

An individual's early academic performance has a big influence on their future work prospects and financial stability. Decreased performance in the classroom and at employment may indicate a pattern of harm from traumatic childhood experiences that feeds socioeconomic issues that continue into future generations (Lahey, 2009).

Adversity during childhood has an impact on substance misuse as well. Individuals who have had negative childhood events in the past are more prone to take substances as a coping mechanism to ease the emotional pain these early experiences have produced. Substance misuse can exacerbate mental health issues and have a number of negative side effects, including relationship difficulties, unstable finances, and legal issues. People face a complicated web of challenges as they navigate life as a result of substance misuse and traumatic childhood experiences (J.A. Campbell et al., 2016).

Adversity in childhood has an impact on the legal framework as well because it might make people criminals and not law-abiding citizens. Unfavorable early experiences have been associated with an increased likelihood of engaging in criminal action, as per several studies. People with previous experience of trauma that has interfered with impulse control as well as decision-making processes may be more likely to commit crimes. The correlation between criminal behavior and trauma from childhood highlights the significance of addressing the root causes of behavior instead of concentrating exclusively on punitive measures (B.D. Kerker et al., 2015).

As significant subject in psychological literature, it might be challenging for people who suffered trauma as kids to give their own kids a safe, supportive environment. This is particularly

significant when those whom they have raised employ parenting techniques that have been passed down through the generations (Bowlby, 1998). One common objective of programs and therapies intended to break this generational cycle is to give parents—who may have had challenging childhoods—the resources and support they require to provide a loving and supportive environment for their children (Smith et al., 2015).

Because of the compounding effect of adverse childhood experiences, managing the long-term repercussions of childhood adversity necessitate a comprehensive and multifaceted strategy. (Smith et al., 2020). Prevention and intervention techniques should prioritize breaking the cycle of adversity that may endure for generations, in addition to handling the immediate aftermath of trauma. When youth who are at risk are recognized early on and receive targeted treatments, such as trauma-informed therapy and support services, resilience is promoted and the long-term impacts of bad childhood experiences are alleviated (Jones & Brown, 2019).

Negative childhood experiences additionally have a significant impact on a person's later life in a number of ways. Early adversity has many complex and wide-ranging implications on relationships, education, mental and physical health, and other areas of life. Addressing the complicated relationships that are present between childhood events and adult outcomes is necessary to develop effective therapies and support systems that can assist people in overcoming obstacles brought about by past experiences of trauma. To improve individual well-being and foster healthy communities, it is critical to give priority to prevention, early intervention, and trauma-informed care due to the long-lasting effects of bad childhood experiences (Logan-Greene et al., 2014).

Childhood trauma can take many forms for individuals living in orphanages, such as parental death or departure, the threat of abandonment, physical or emotional abuse, confirmation that there was a sexual violence, or domestic violence, to name a few. suffering from substance or alcohol abuse issues. Abuse, mental illnesses, or

incarceration of caregivers. Unsafe relationships, mental well-being, and coping mechanisms can all be upset by such occurrences, and this can put people at risk for a number of psychological issues (Soleimanpour et. al., 2017).

The lack of the stable family context that characterizes many orphanage settings may compound the impact of traumatic childhood experiences. Children in medical facilities may go through protracted emotional withdrawal episodes, engage with others minimally, and have less opportunity for positive social interactions. Current events might impact adverse childhood experiences by introducing fresh stressors and risks (Luthar et al., 2000 and Werner 2005).

According to different researches, Negative early experiences have a significant and long-lasting effect on behavior, mental health, and physical health. The aftereffects of these experiences are linked to a higher chance of acquiring illnesses in adulthood, including abuse of drugs, depression, anxiety, and even persistent medical disorders (Richardson & Smith, 2017). In addition, the effects of bad childhood experiences carry over into the interpersonal sphere and hinder the formation and maintenance of positive connections. This can also make it harder to accomplish academically and jeopardize your general quality of life. The extensive impact of negative childhood experiences highlights how urgent it is to comprehend and treat their significant effects on people at all stages of life (Jones & Brown, 2019).

It is crucial to comprehend the prevalence and particulars of unfavorable childhood experiences in college learners who came from orphanages for a number of reasons. For those who are new to this community, it offers useful information on the distinct difficulties they may encounter and explains possible underlying causes that may have an impact on their psychological health. Additionally, figuring out how these unfavorable childhood experiences have affected them helps to concentrate on intervention and support programs that are specific to their needs. These therapies could focus on fostering healthy attachment bonds, strengthening coping mechanisms, and boosting resilience (Bethell C.

D. et al.,2014).

In context with the proposed study, adverse childhood conditions need to be explored in order to completely comprehend the complex emotional experience that college students living in various orphanages go through. These occurrences, which include trauma, abuse, and the death of a parent, have a profound effect on cognitive well-being and performance. Adverse childhood experiences in this population should be identified and addressed. This not only broadens our understanding of science but also affects how remedies are developed to preserve their academic success, social and emotional stability, and general sense of life fulfillment (Zeanah et al., 2003)

Research on adverse childhood experiences is crucial to understanding the long-term effects of early-life trauma on people's mental health and general development. Adverse childhood experiences encompass a range of unfavorable incidents, such as maltreatment, disregard, and dysfunctional families, that profoundly impact a person's emotional stability, or their capacity to manage and overcome bad emotions. This study investigates this intricate topic, concentrating on a demographic that is frequently disadvantaged by children who attend high school as well as college as orphans (Leung D.Y et al., 2022).

In the case of orphanage adolescents, emotional stability refers to the capacity to control and manage their feelings in a healthy, balanced way. It speaks to an individual's capacity to remain emotionally calm under pressure or in everyday situations. For this population, this aspect of mental health is especially crucial because early childhood experiences may have had a variety of effects on the way they developed their emotions (Poole et al., 2017).

Students from orphanages frequently struggle with a variety of emotional issues as a result of their unique upbringing. The development of safe attachment and emotional relationships might be impacted by the common deficiency of reliable, compassionate caregivers in institutional care Smith (2019). This suggests that these individuals may struggle with emotional expressiveness, confidence, and closeness in relationships. They

might also be more aware of emotions or find it harder to control intense emotions if they experienced trauma, damage, or abandonment as children (Ungar, 2013).

Emotional stability is important in many aspects of young people's lives, including academic success, interpersonal relationships, and overall well-being. This has a substantial impact on their ability to form and maintain healthy relationships in academic and wider social contexts. Moreover, psychological well-being is associated with psychological health because these factors impact an individual's ability to focus, stay motivated, and effectively manage stress-all of which are critical for succeeding academically (Neenan, 2017).

It is necessary for college students living in orphanages to combine personal coping strategies with external support systems in order to achieve mental stability. Gaining knowledge on how to control stress, independence, and emotions can help to promote emotional well-being. Another excellent method to channel and express emotions is with the support of uplifting peers, mentors, or counselors (Cohen et al., 2019).

The importance of appropriate interventions and support networks is highlighted by acknowledging the particular emotional difficulties faced by college students who are orphans. There are several opportunities for support and advice from peers, emotional control training, and counseling services available. Their overall welfare and performance can also be significantly improved by creating a warm, inviting, and easily accessible environment for learning that recognizes and meets the emotional requirements of the population (Fletcher & Sarkar, 2013).

The emotional stability of students in orphanages is particularly crucial. In spite of possible challenges in early childhood, this entails the capacity to navigate and control emotions in an emotionally healthy and adaptive manner. For this population's total life satisfaction, social-emotional well-being, and emotional intelligence, it is imperative to recognize and address emotional complexity. In order to help people, achieve their educational goals, we must look into

these problems and give them more authority by fostering a learning environment and offering the proper solutions (Richardson et al., 2012).

Resilience is the capacity to adapt, heal, and grow in the face of hardship, trauma, or other major life challenges. This includes preserving and enhancing mental health, overcoming difficulties to continue with daily activities, and recovering from setbacks. An individual's ability to overcome adversity is influenced by a variety of emotional, mental, and cognitive skills that are a component of the flexible resilience process (Fonte et al., 2017).

Put another way, resilience is the ability to overcome adversity, and it is an essential trait for college students who are orphans. These students encounter particular challenges in their pursuit of higher education because of the challenges they endured as children in an unstable household. This study explores the concept of resilience, concentrating on the elements that support orphaned college students in overcoming adversity and achieving both academic and personal success (Lenkens et al., 2019).

College-age orphans come from a variety of backgrounds and have a wide range of experiences. The anguish that results from being abused or abandoned is exacerbated by the reality that some people have lost both or just one parent. Despite these challenges, a large number of orphaned college students exhibit incredible fortitude, achieve academic success, and develop into well-adjusted individuals (Liberati et al., 2009).

For college students who are orphaned to become resilient, they must first come to terms with their own value and significance. The importance of identity building in childhood and the early stages of adulthood is highlighted by Erikson's theory. You can discover more about yourself and cultivate a positive self-image by attending college. Students can lay a solid basis for resilience by utilizing the chances offered by the school setting to develop personally, explore hobbies, and pick up new skills (Erikson, 1959).

For college students who were raised in orphanages, resilience is essential because it improves overall welfare and mitigates the

potential harm that early life adversity may bring. These experiences may include overcoming various hurdles and relinquishing parental guidance. These individuals often find themselves in challenging developmental circumstances. To encourage positive outcomes in both their professional and personal lives, the people in question must understand resilience and be able to apply it (Humphreys et al., 2015).

Resilience played an important part in improving the students' general welfare and mitigating any potential detrimental impacts of childhood trauma. These individuals typically face greater challenges as parents, such as the potential for various forms of adversity and the lack of parental guidance. It is critical that members of this group comprehend and make the most of resilience if they are to experience extraordinary results in both their personal and professional lives (Masten and Obradovi, 2006).

It has been discovered that people that are resilient and cheerful also typically have better psychological health and are happier and more satisfied with life. Resilience has been associated with positive adjustment in kids exposed to significant stressors. Research has found a comparable protective impact of resilience on psychological well-being in those going through hardship (Rutter, 2012).

Resilience is a tool that can be used to promote peace. First of all, the person's ability to handle pressures is improved. Resilient people are more likely to use structural coping techniques, such as problem-solving, asking for social assistance, and applying positive methods of coping in a composed way. This decreases the likelihood that they may experience unfavorable emotional effects and enables them to overcome challenges with greater impact (Lind et al., 2018).

Resilience can serve as a facilitator in a variety of ways. It first enhances one's ability to cope with stress. People with more resilience use adaptive coping mechanisms include asking for support from others, confronting challenges head-on, and keeping a stable and positive outlook. This indicates that because they can overcome obstacles more successfully, people are more unlikely to have negative psychological impacts

(Costa & McCrae, 1987).

Furthermore, resilience promotes the development of strong interpersonal bonds in individuals. Because of their strong foundation in mental health, these long-lasting relationships can enhance the benefits of adversity. For college students who live in orphanages, resilience serves as a useful bridge in their daily lives. It gives them the tool they need to deal with the challenges brought on by their unique situation, enabling them to succeed in a range of spheres of their lives. By implementing specific resilience building tactics and fostering a learning environment, we can enhance the educational achievement and overall well-being of this population (Kessler et al., 2010).

In the end, College-age orphans' capacity for adaptation is a dynamic, multifaceted phenomena that is constantly changing. In this process, a feeling of purpose, adaptable coping strategies, social networks, and personal characteristics all interact. For these kids, moving to a college can be a transformative experience that presents opportunities for personal development, developing resilience, and self-discovery. The tenacity of orphan college learners deserves recognition and encouragement (Choo & Marszalek, 2018).

The unique psychological background of the orphanage victims who are currently enrolled in college has been influenced by their early childhood experiences, resilience, and mental health. Negative childhood experiences are any number of distressing and traumatic experiences that happen to children throughout their early years and have a significant and lasting impact on their psychological well-being. In institutional settings, these people might endure abuse, the loss of a parent, and problems with attachment development. In this context, having a thorough understanding of adverse childhood experiences is essential to creating customized support and assistance networks that cater to their unique needs (Felitti et al., 2008).

Research suggests that negative events during childhood might have a significant negative effect on a person's mental well-being. a dose-response relationship linking the severity of childhood

trauma to several negative consequences, including mental health disorders, substance abuse, and problems with physical and mental health. This includes the crucial requirement to talk about childhood trauma from the perspective of college students who were raised in foster homes (Anda et al. 2006).

More recent studies have demonstrated the significance of emotional stability for both mental health and academic success. Academic success in college students is positively associated with their emotional stability. Emotional stability has generally been associated with higher levels of psychological well-being and life satisfaction. Their actions in social settings, academic goals, and general well-being are all significantly influenced by how stable their emotions are. It has an impact on one's drive, ability to focus, and ability to manage stress related to advanced learning (Diener & Diener, 2016).

Resilience is the dynamic process of an individual's capacity to adjust, recover, and flourish in the face of extreme adversity (Masten & Obradovi, 2006). Recognizing and harnessing this group's resilience is critical to promoting great results in their lives-at home and at school. Resilient people typically experience improved psychological effects, greater life pleasure, and superior academic achievement. College-age students living in orphanages can benefit from improved well-being and academic accomplishment if resilience can be fostered through targeted interventions and a supportive learning environment (Rutter, 2012).

In the end, this study will focus on challenging childhood circumstances, resilience, and mental well-being in order to examine the complicated psychological atmosphere of college students who were raised in orphanages. We would like to carry out a thorough inquiry to learn more about the particular challenges this group experiences and to help direct the creation of focused support and intervention plans. Along with its theoretical contributions, this work has implications for improving people's academic achievement, emotional and social development, health, and general sense of well-being.

1.1 OBJECTIVES

- To investigate the relationship between Adverse Childhood Experiences and emotional stability in college students who were brought-up in orphanage.
- To investigate the mediating role of resilience between Adverse Childhood Experiences and emotional instability among orphanage residing college student.
- To Investigate the impact of duration of stay in orphanage on level of resilience.
- To investigate the relationship between resilience and emotional stability.

1.2 RESEARCH QUESTIONS

- To what extent do adverse childhood experiences predict levels of emotional stability among orphanage-residing college students?
- Is there a significant difference in college students living in orphanages and having high and low adverse childhood experiences in terms of emotional stability scores?
- What is the direction of the relationship between resilience and emotional stability among orphanage-residing college students?

LITERATURE REVIEW

Emotional stability something which is an important part of psychological well-being and a key factor in assessing an individual's overall mental health. Among the things that can affect the psychological health of students living in boarding facilities are the lack of supportive family members, the impact of early childhood events, and the amount of care provided within the orphanage (TerLaak, & Rijk, 2004).

A complex network of interrelated factors frequently characterizes the emotional well-being of students living in orphanages. One important factor is the lack of a safe place to live at home. Emotional development may be negatively impacted for a long time by early experiences with unhealthy relationships with parents, caregivers, and other influential figures. As to Bowlby's theory of attachment, the formation of a robust connection and relationship with

caregivers is crucial for the development of mental health and the capacity to establish healthy relationships in later life (Bowlby, 1969). The psychological health of children residing in institutions, such as orphanages, has been extensively studied. Children living in institutions frequently struggle with a variety of behavioral and emotional issues, such as increased anxiety and sadness. The researchers came to the conclusion that an absence of individualized attention, unwelcoming and inadequate caregiver surroundings, and insufficient opportunities for healthy attachment growth were the root causes of these issues (Zeanah et al., 2003).

The level of care that residents in orphanages receive has a big influence on how stable their emotions are. Providing early adversity with high-quality treatment is necessary to lessen its detrimental effects. The study found that compared to children in institutional care, children in better foster care settings exhibited improved behavioral and emotional results. It has been demonstrated that giving orphanage residents a caring, supportive, and affectionate atmosphere has a favorable impact on their emotional stability and improves their ability to handle challenges (Smyke et al., 2017).

Students residing in orphanages may encounter emotional instability when they move through foster care to adopt or other familial care options. According to a study, it is important to understand how early experiences affect adopted children's development in the long run. Children may experience additional challenges during the transition phase as they adapt to new expectations and connections with their families, even though adoptive families can offer a stable, supportive, and long-lasting home setting that can aid in psychological well-being (Grotevant and Carlson, 2018).

Students residing in institutions such as orphanages may face scholastic and social challenges in addition to the lack of parental guidance, perhaps resulting in emotional instability. Feelings of isolation and low feelings of worth can develop due to unfavorable preconceptions connected with becoming orphan and also possible difficulty establishing friends

and establishing peer relationships. In certain orphanage settings, the lack of customized attention, educational tools, and facilities can also have an impact on educational attainment and perhaps impair on the growth of brain function and mental health (Juffer, Bakermans-Kranenburg, & van IJzendoorn, 2008).

Notwithstanding the difficulties, it's important to remember that not every student living in an orphanage experiences the same degree of emotional instability. An essential quality that differs widely among individuals is the capacity to rise above adversity and make things better. Understanding resilience in a setting of adversity is crucial, according to academic studies, as it offers insights into the elements that enable positive adjustment when handling difficult circumstances. Acknowledging and promoting resilience can lead to lasting changes in the emotional development and general well-being of students living in orphanages (Masten, 2014).

Interventions intended to improve the mental health of students living in orphanages must include comprehensive strategies. Providing counseling and mental health services can assist in addressing the emotional difficulties resulting from early life events. Moreover, educational interventions that prioritize improving academic performance, emotion management, and social skills may promote a more stable and adaptable emotional state (Masten & Motti-Stefanidi, 2020). Additionally, a number of factors that affect the mental stability of students living in orphanages include the lack of parental support, the standard of care provided in these institutions, and the difficulties related to social and academic integration. The research highlights the importance of comprehending the ways in which early experiences influence mental well-being and resilience's capacity to facilitate positive adaptive transformation. In-depth therapies are necessary to meet the mental health needs of students living in foster homes. Building resilience, teaching strategies, and mental health assistance should all be a part of these approaches. Scholars and clinicians can design effective treatments that enhance the psychological health as well as general well-being of adolescents who reside in

orphanage situations by recognizing and addressing these challenges (Klika & Herrenkohl, 2013).

The effects of childhood trauma, both acute and chronic, on people's psychological well-being have attracted the attention of many psychology researchers. Early-life adversity can come in many different ways, including unstable households and emotional, sexual, or psychological abuse. Negative childhood experiences have been linked to increased psychological pain, particularly emotional discomfort, and a higher risk of mental health issues, according to a substantial body of research. Emotional stability-which is characterized as a decreased inclination to experience negative emotions-emerges as an important component of personality that needs careful consideration in the occurrence of childhood trauma (Felitti et al., 1998; Anda et al., 2016). Students from orphanages who are in college or high school constitute a distinct category because of their upbringing. These environments are designed to be caring and encouraging, but they also have the potential to exacerbate other issues, such as issues with compassion and attachment. To completely understand how these particular components, relate to adverse childhood events and how they could impact emotional stability, more research would be required. Therefore, it is essential to perform a focused investigation into the connection between adverse childhood experiences and mental health in order to develop effective interventions that cater to the unique needs of this population (Bakermans-Kranenburg et al., 2011; Juffer et al., 2011)

This main idea of the study is resilience, an evolving phenomenon that represents people's capacity to overcome hardship and adapt to it. It is believed that emotional stability can be less negatively impacted by early trauma if resilience is present. According to the study, resilience plays a critical role in promoting wellness in individuals who have experienced traumatic events as children (Masten, 2012).

When resilience plays the vital role of a critical facilitator, strengthening psychological capacities and boosting coping strategies, early life traumas

might have less of an impact on emotional stability. Having support networks is very beneficial to students in college who are orphans because they tend to be more resilient. Despite the possibility that they lack the conventional support system of friends, family, and significant others, these children usually discover other networks in the form of classmates, teachers, educators, and support staff at the schools they attend. A sense of belonging and community is fostered while receiving academic and psychological support from enduring interactions with professors and fellow students. Having caring individuals in their circles who can empathize with and comprehend their circumstances is really beneficial for college students who have become orphans. They grow more robust (Ungar, 2011).

Resilience is defined in a different study as the capacity to adapt to changing circumstances. Orphan college students often have to acclimate to new circumstances, such as relocating, living alone, and juggling other obligations like studying. One has to acquire adaptable coping strategies in order to overcome each of these difficulties. Resilient people typically see obstacles as chances to devise workable solutions, learn from mistakes, and fortify themselves. Orphans in college are more likely to grow and overcome challenges if they can adapt and take lessons from their experiences (Luthar, Cicchetti, & Becker, 2000).

Emotional and mental control are fundamental to resilience. It is beneficial for orphan college students to develop self-control over their emotions, thoughts, and perspective on life, even though they could still be traumatized from their past experiences. These students, who are now orphans, have acquired social skills and coping strategies that have improved their ability to manage the emotional strains of tertiary education and protect them from both academic and personal setbacks (Garmezy, Masten, & Tellegen, 2018).

Orphans attending college may find that learning is an effective means of fostering personal development. Education is not just a means of acquiring knowledge and skills but also a

powerful instrument for increasing confidence and self-efficacy. College-age resilient orphans often view school as a way to break free from the cycle of suffering and pave the way for better futures. This viewpoint strengthens their ability to endure in an environment with rigorous academic expectations by fostering a strong sense of purpose (Benard, 2004).

It is important to acknowledge that orphan college students face a challenging journey ahead of them. Stressors that negatively impact mental health include lack of assistance from family networks, transitioning to life in college, and financial challenges. Resilience is the ability to confront and overcome adversity, not the lack of struggle. In order to help orphan college students, overcome these challenges and maintain their mental health and resiliency, educational institutions need to offer psychotherapy and psychological support (Fergus & Zimmerman, 2005).

To support orphan college students in developing resilience, a thorough and collaborative effort is required. Academic institutions can implement projects and programs that are customized to meet the needs of this particular demographic. Assistance with finances, counseling, coaching, and mentorship programs can all contribute to the development of a supportive environment that fosters resilience. Moreover, creating a sense of belonging and community in the college setting can be essential for orphan students in developing a network of support (Masten & Powell, 2003). Some studies have examined the ways in which resilience interacts with adverse childhood experiences and affects mental health in this particular setting, even though studies on resilience in orphanage individuals highlights its critical role in reducing the negative impact of institutionalization on their psychological health. This study investigates the complex relationships among early childhood trauma, adaptability, and psychological well-being in colleges and universities and students in higher education who were raised in boarding schools in an effort to fill the research gap. The goal of the study is to clarify potential mechanisms by which early experiences may impact the

psychological well-being of those who are most at risk. The findings may have an effect on strategies and supports that are specifically designed to meet the needs of students residing in foster homes, which could ultimately result in better mental health and academic achievements (Bakermans-Kranenburg et al., 2011).

These relationships involve a number of problems, including as abuse, neglect, and dysfunctional families. Numerous research has shown an important relationship between unpleasant childhood experiences and a higher likelihood of mental health issues as well as increased emotional discomfort. Resilience is the capacity to adjust to one's environment and endure hardship, it is an evolving process that is necessary to mitigate the detrimental effects of traumatic childhood events on mental health. Traumas experienced early in life may not have as big of an effect since they build coping strategies and psychological resources (Luthar et al., 2000; Werner, 2005).

Because they have lived in orphanages, students who attend high school or college together constitute a distinct group because of their past experiences receiving care in an institution. These surroundings can have a unique array of difficulties, including disturbances in attachment and caring, despite everything they do to offer support and care. These specific conditions could compound with early-life trauma, which could have complex implications on mental stability (Bakermans-Kranenburg et al., 2011; Juffer et al., 2011).

Another study found that adaptive coping and competence are essential elements of resilience, especially when dealing with extremely stressful situations. When assessing a person's capacity to handle hardship and traumatic life events, it is important to take into account the long-term interconnections between different components. The idea of resilience is therefore dynamic (Cicchetti & Rogosch, 2009; Garmezy & Masten, 2013).

We need to have a deep grasp of the intricate relationship between resilience-a product of enduring childhood experiences and mental health in order to particularly construct

interventions that cater to the requirements of students in college and high school who were raised in orphanages. (Rutter, 2012). Furthermore, research findings have indicated the importance of resilience in reducing the adverse impacts of institutionalization on mental health. However, very few research has specifically examined the ways in which resilience in this particular setting and unfavorable early events impact emotional stability (Bakermans-Kranenburg et al., 2011).

It is important to take specific personality features into account in this case. Examining the relationship between neuroticism, physical symptoms, and sickness, personality traits may influence the course of physical health. Furthermore, a study highlighted the importance of psychological wellbeing in people's overall well-being and discovered that most people report feeling satisfied (Costa and McCrae 2017; Dinner and Diener, 2019).

Furthermore, in the setting of traumatic childhood events, emotional stability-a personality feature marked by a diminished capacity for unpleasant emotions-emerges as a critical component deserving of close examination. A study that looked at the connection between high school academic achievement and conscientiousness aimed to highlight the possible impacts of psychological stability on several spheres of life (Lahey, 2009).

In summary, given the literature, further study is needed to determine the relationship between unfavorable childhood experiences, resilience, and emotional stability-particularly among students in college and high school who have experienced orphanage living. The additional sources emphasized the importance of considering types of personality and mental health when studying the consequences of early events, as well as the complexity of resilience. This research could lead to targeted treatments and policies that are supportive and tailored to the needs of the most vulnerable individuals, ultimately resulting in enhanced emotional stability and overall mental health. RATIONALE

The proposed research fills a critical knowledge gap about the complex interaction between

unfavorable childhood experiences, resilience, mental health, and higher education learners living in orphanages. Owing to their involvement in residential environments, these individuals face unique challenges. (Bakermans-Kranenburg et al., 2011; Juffer et al., 2011). Resilience, the capacity to bounce back from setbacks-has been found to be important in lessening the effects of traumatic childhood events. But little research has particularly looked at how, in this context, resilience interacts with bad childhood experiences. (Masten, 2001; Luthar et al., 2000). The significance of this research is further underscored by the enduring impacts of traumatic childhood experiences on the health and well-being of adults. (Anda et al., 2006; Anda et al., 2009). Focusing on the target population enables the research to offer targeted solutions that address the unique needs and hurdles faced by college students residing in orphanages. The findings may also contribute to broader conversations regarding resilience's role in reducing the negative consequences of early adversity (Rutter, 2012; Werner, 2005). The study was aimed to improve our knowledge of the psychological health and general state of college students residing in orphanages, as well as provide suggestions for policies and practices that could significantly improve their quality of life. The primary goal of this research is to support individuals who experienced challenging upbringings in developing resilience and happiness.

2.1 HYPOTHESES

- Higher Adverse Childhood Experiences will be negatively correlated with emotional stability.
- Resilience will mediate the relationship between Adverse Childhood Experiences and emotional stability.
- Higher level of resilience will be positively associated with emotional stability.
- Residing more in orphanage will be positively correlated with levels of resilience among orphanage residing college students.

2.2 THEORETICAL FRAMEWORK

2.2.1 Attachment Theory

John Bowlby developed attachment theory in the middle of the 20th century, which offers a thorough framework for comprehending the bonds that form between infants and those who are closest to them. This theoretical approach offers an in-depth knowledge of the social and emotional growth of the individual by emphasizing the critical role early childhood relationships play in the development of emotional stability as well as resilience throughout life.

According to the theory of attachment, children are predisposed to form attachments as a means to ensure their survival. A child's perception of danger or distress sets off the attachment behavioral system. The primary caregiver-usually the mother-offers a secure foundation from which a child may explore the outside world and seek comfort when necessary. John Bowlby further argues that the emotional and psychological well-being of the child is greatly influenced by the level of this attachment.

Based on behaviors observed during the "strange situation" procedure, Bowlby's colleague Mary Ainsworth developed a variety of attachment patterns, including disorganized attachment, anxious-ambivalent attachment, anxious-avoidant feelings of attachment, and secure attachment. A child forms a secure attachment when they feel secure and have confidence in their caregiver, and when their needs are consistently met. Conversely, insufficient caregiving-which is defined as being overly disruptive or emotionally unavailable-is the primary cause of insecure attachment styles.

The proposed study on the relationship between early trauma and emotional stability in college students raised in orphanages must be understood in light of attachment theory. It's likely that the environment in orphanages lacking the continuous and careful supervision required for the development of solid and long-lasting connections. The likelihood of developing insecure attachment styles is increased in individuals living in orphanages due to the

difficulties they had in their early relationships with caregivers.

Adverse childhood experiences, including a range of misfortunes like abuse, neglect, and a disorganized home life, can upset the normal course of the process of attachment. Exposure to the possibility of trauma and the absence of a secure home atmosphere in the family can have a significant impact on the ability of students in college who reside in orphanages to form safe attachments. According to studies, those who have experienced traumatic events as children are more likely to exhibit insecure attachment patterns and struggle to establish trustworthy relationships. (Zeanah et al., 2003).

Resilience plays a mediating role within the attachment theory framework, and understanding this relationship between negative events in childhood and emotional stability in college students who live in orphanages is important. Resilience is defined here as the ability to change unfavorable situations for the better. Individuals in secure attachments are often better equipped to develop resilience because they are able to build on the basis of trust and security that developed in their early providing care relationship (Masten, 2001).

Building resilience is an essential protective factor for students in college who were brought up in orphanages and could have experienced difficulties with attachment as a result of painful events in the early years of their lives. Adversity's harmful effects are mitigated by resilience, which protects emotional stability. When stable attachments are absent, resilience is essential for forming long-lasting relationships, controlling emotions, and navigating difficult college experiences.

Research has indicated that individuals who are resilient can counteract the negative impacts of early adversity by utilizing both internal and external resources. College students who reside in orphanages may find external resources in their college atmosphere and educational support systems. Positive interactions with peers, instructors, and staff members help build resilience, which supports emotional stability even in the face of a history of traumatic

childhood events. (Ungar, 2011).

College students raised in orphanages have unique developmental patterns that are strongly influenced by attachment theory concepts because of how their upbringing and transfer to higher education have shaped them. By using attachment theory, one can learn how early caregivers' relationship disruptions-such as those that occur in orphanage settings-can affect mentally stable children. Furthermore, highlighted by the theory are the difficulties that people with insecure attachment styles brought on by traumatic childhood experiences may encounter.

By applying the attachment theory theoretical framework, we can understand how adverse childhood experiences affect college students who are adopted and their capacity to establish safe and healthy relationships. Despite the impacts of early life traumas, these people developed emotional stability, which can be explained by the facilitating function of resilience. In the college context, fostering relationships and providing support systems can aid in the dynamic process of resilience building.

An important framework for comprehending the connection between childhood experiences, mental health, and resilience is provided by the use of the theory of attachment to the investigation of students in college reared in orphanages. More studies on the differences in patterns of attachment and their long-term impacts on mental health can help develop tailored interventions and support networks that are suitable for the unique requirements of this population once the results of these studies become evident.

2.2.2 Resilience Theory

Resilience is a constantly changing and multidimensional construct in psychological concepts and studies which is especially significant in determining how people cope with and adapt to adverse experiences. A solid understanding of the intricate relationship between negative childhood experiences, mental wellness, and the well-being of students in college living in orphanages can be attained through a thorough examination of

resilience theory.

The ability to constructively adapt to adversity, trauma, tragedy, or extended stress is the essence of resilience. It is a process as opposed to a fixed characteristic that involves individuals and their environments interacting dynamically. Developmental psychology is the field that gave rise to resilience theory. Early researchers there looked at children who demonstrated adaptive behavior in the face of significant life challenges. (Norman Garmezy, 1971).

The core tenet of resilience theory is that people are born with resources and skills that can support adaptive change. This is an alternative perspective to deficit-based models, which only consider psychopathology and risk factors. However, compared to other theories, resilience theory places more emphasis on strategies and protective factors for living in situations of adversity.

A renowned theoretical framework in the field of resilience research, the model of ecology considers a range of contextual factors, such as personality characteristics as well as influences from family, community, and society. This framework supports the concept that resilience is not merely an individual trait but rather arises from the ever-changing relationship between an individual's characteristics and their environment. (Ungar, 2011).

For those students who are in college who have lived in orphanages, it is particularly important to apply the idea of resilience in order to comprehend the diverse range of their experiences. Numerous individuals in this group have undergone traumatic childhood experiences, which may have included challenges such as living in an institution, experiencing grief, and potential damage to attachment and relationships with caregivers. Resilience theory holds that regardless of facing all of these challenges, people can acquire adaptable skills that result in positive outcomes.

One important area of research is how resilience functions as a liaison in the association between emotional stability and childhood trauma in adoptive college students. Resilience functions as an extra layer of defense against the detrimental

effects of trauma on mental health. People can manage stressors and keep their emotional stability by putting resilience-related protective variables and coping strategies to use.

Research usually identifies specific protective factors that enable constructive adjustment within the resilience framework. These qualities include feeling confident in oneself, having a solid support network, getting along well with mentors, peers, or caregivers, having the capacity to solve problems well, and having an optimistic outlook on life. When these requirements are met, they may lessen the negative impacts of traumatic childhood experiences and encourage emotional stability in the face of obstacles in life (Masten, 2001).

According to resilience theory, college students who were raised in orphanages can benefit from the accumulation of protective factors that promote emotional stability. For instance, the growth of encouraging relationships in a college setting is one significant protective factor. Having positive relationships with peers, teachers, and mentors creates a supportive community that helps to mitigate the impact of past trauma.

Furthermore, the act of attending college itself begins to build resilience. Education can improve an individual's belief of purpose, problem-solving skills, and opportunities for personal growth. College students who were raised in orphanages may discover that their college experience transforms them and makes them more emotionally stable when seen through an understanding of resilience theory (Benard, 2004).

Emotional stability and adverse childhood experiences are mediated by resilience in a dynamic instead of a linear way. Resilience influences people's perceptions of, responses to, and comprehension of stressors through a range of adaptive processes. Emotional stability requires the development of coping strategies, emotional control methods, and an optimistic outlook.

In conclusion, resilience theory offers a comprehensive framework for comprehending the connection between unfavorable childhood events, psychological well-being, and the welfare of adopted college students. The theory draws

attention to the dynamic nature of resilience by highlighting the interplay between personal strengths and outside influences. These students need resilience to get through obstacles brought on by their preschool years and seek achievement in college or university. Examining resilience's mediating role offers a more thorough understanding of how people develop as individuals by illuminating the intricate mechanisms by which people overcome adversity and achieve emotional stability.

METHODOLOGY

3.1 METHOD

The study employed a quantitative research approach to investigate the correlation between emotional stability and adverse childhood experiences, as well as the mediation function of resilience, among college learners who were residents of orphanage. In order to assess the correlations between the variables in question and look into any mediating effects, cross-sectional data collection was used at a single moment in time for the study. Validated tools including the Pediatric Adverse Childhood Experiences Questionnaire (PEARLS), the Big Five Inventory (BFI), the Neuroticism Sub-Scale, and the Brief Resilience Scale (BRS), which measures resilience, were used to collect data. Before any data is collected, participants was provided with comprehensive guidance on how to respond to the surveys, and the informed consent is going to be asked for. Furthermore, demographic data was collected in order to account for potential confounding variables.

3.2 PARTICIPANTS

Participants of the study was those who have been living in the orphanage from at least four years and were currently studying in college as regular students. Furthermore, participants of various branches of orphanage named "Anjuman Faizul Islam" was participant of this study.

3.3 SAMPLING TECHNIQUE

Purposive sampling technique was used in this research because the purposive sampling is a non-probability sampling technique that is selected on

the bases of their characteristics of a population and the objective of the study. This technique is being used because such a technique is used for a very special sample and orphanage residing college students is also a special sample which is not easily available.

3.4 SAMPLE SIZE

There was 50 orphanage students which were included in the sample with the inclusion criteria was; those who have been in an orphanage for a minimum of four years, have lost their both or anyone of both parental figures, whose parents are also separated/divorced, were enrolled in college right now, and were willing to engage in the study were make up the participant population for the proposed research. Conversely, the survey did not include people who reside in orphanages but have not yet enrolled in college. In a same vein, anybody with any medical or psychiatric issues were not allowed. Furthermore, someone who has both of his parents alive and living together was also be excluded.

3.5 DATA COLLECTION

For this study, structured self-report questionnaires were used to collect data on Adverse Childhood Experiences, emotional stability and resilience. In order to investigate the connections between traumatic childhood events, psychological wellbeing, and resilience, statistical analyses- including correlation analysis were carried out while accounting for pertinent demographic variables. This study was aimed to shed light on the mental health of college students residing in orphanages in order to guide the development of customized interventions that cater to their particular need. Research utilizing regression models and correlations was done to investigate the relationships among emotional stability, resilience, and adverse childhood events while accounting for pertinent demographic variables.

3.6 OPERATIONAL DEFINITION

3.6.1 Adverse Childhood Experiences

Adverse Childhood Experiences are a variety of potentially traumatic incidents or circumstances that people may have encountered prior to the age of 18. Physical, sentimental, or sexual abuse, neglect, as well as household dysfunction are examples of these experiences. The Pediatric adverse childhood experiences and Related Life Events Screener (PEARLS) is a tool developed by Dr. R.J. Gillespie in 2013 to assess adverse childhood experiences in pediatric populations. It identifies traumatic events like abuse and household dysfunction.

3.6.2 Resilience

Resilience is the ability to adapt, heal, and preserve one's mental well-being in the face of adversity and to overcome challenging circumstances. A standardized six-item self-report tool is the Short Term Resilience Scale. Participants rate the extent to which they agree with various claims about their ability to bounce back from setbacks and deal with stress. A higher rating given by the Brief Resilience Scale is indicative of an individual's capacity to overcome challenges while retaining mental stability (Smith et al., 2008).

3.6.3 Emotional Stability

The ability to maintain a steady and even state of emotions in the face of external forces or challenging circumstances is known as emotional equilibrium. The Big Five Inventory, or BFI, uses the neuroticism subscale to measure mental wellbeing in this study. This subscale measures the degree to which individuals feel depressive, anxious, or irritated. Greater emotional stability is indicated by a lower neuroticism subscale score, which suggests a decreased tendency toward strong or frequent upsetting emotions (John et al., 1991; Benet-Martinez & John, 1998).

3.7 INSTRUMENTS

3.7.1 Brief Resilience Scale (BRS)

An assessment instrument known as the Brief Resilience Scale is used to gauge a person's capacity to overcome or bounce back from

difficult or traumatic circumstances. An easy and quick way to measure psychological resiliency, or the ability to overcome adversity, is to use the Brief Resilience Scale, according to research (Smith et al., 2008).

The scale consists of six items, making it a brief yet effective measure. Respondents rate their agreement with statements on a scale from 1 (strongly disagree) to 5 (strongly agree). The items capture aspects of resilience such as the ability to bounce back quickly from difficulties and to see challenges as opportunities for growth.

The validity and reliability for the Brief Resilience Scale have been shown in a variety of population settings. The scale has a high internal consistency and a strong reliability, as evidenced through its Cronbach's alpha coefficient of 0.91, according to research. Additionally, there was satisfactory reliability between tests over a two-week period (Smith et al. 2008). The construct validity in the Brief Resilience Scale has been confirmed through validity studies. The Brief Resilience Scale indicates a negative correlation between resilience and indicators such as depression, anxiety, and perceived stress. This suggests that fewer of these negative psychological states are linked to greater resilience.

Additionally, the Brief Resilience Scale has been used in a wide range of cultural situations, indicating the ability to adapt to a wide range of demographic groups. The resilience scale is a quick and accurate way to assess someone's endurance in academic and clinical settings due to its brevity.

A higher score correlates to increased resilience. The range of the Brief Resilience Scale is between 6 and 30. When interpreting scores, one takes into consideration an individual's relative position within a given population. For instance, a score below the mean may indicate resilience that is lower than average, while a score above the mean may indicate resilience that is higher than average. In conclusion, the Brief Resilience Scale is a robust and reliable tool for measuring psychological resilience. Because of its brief form, strong psychometric properties, and simplicity of administration, this measure is a priceless tool for academics and professionals who want to find

out more about how well a person can handle challenges in life.

3.7.2 Adverse Childhood Experiences

The Pediatric adverse childhood experiences and Related Life Events Screener (PEARLS) is a tool developed by Dr. R.J. Gillespie in 2013 to assess adverse childhood experiences in pediatric populations. It identifies traumatic events like abuse and household dysfunction. PEARLS demonstrates good reliability and validity, indicating consistent and accurate measurement of adverse childhood experiences.

3.7.3 Big Five Inventory's sub-scale Neuroticism

The popular Big Five Inventory is a personality assessment tool that measures five core personality traits: agreeableness, conscientiousness extraversion and neuroticism. One of these characteristics, called neuroticism, is the propensity to feel negative emotions like dread, worry, and irritability.

Neuroticism is characterized by a number of traits, including emotional instability, susceptibility to stress, and a tendency toward negative affect. High neurotic individuals typically perceive circumstances as challenging or hazardous and respond more emotionally to stimuli. Conversely, those that exhibit low neuroticism tend to have been more emotionally stable, lesser agitated, and capable of managing stress.

The subscale measuring neuroticism on the Big Five Inventory has good psychometric validity and reliability. The high degree of internal consistency of the Neuroticism sub-scale suggests that it might be assessing the same core construct over time. Reliability is defined as the uniformity and consistency of measurement results of a scale. Furthermore, the Big Five Inventory Neuroticism scale-based test-retest reliability is strong, demonstrating consistency over time.

Validity, in contrast, describes how accurate a measurement is or whether the test measures for what it intends to. The Big Five Inventory have shown good convergent and discriminant

validity. Convergent validity is demonstrated by the fact that it has a good representation of the desired personality trait and is correlated with several other neuroticism tests and related variables. Its validity is supported by the capacity to distinguish discriminant validity from additional characteristics assessed by the Big Five assessment.

Elevated levels of neuroticism are correlated with greater scores regarding the Big Five Inventory Neuroticism scale. Values on the scale typically span between low to high. Interpreting the scores is necessary to determine the person's emotional stability; low scores indicate resilience and emotional stability, while high scores may indicate a propensity toward emotional reactivity combined with heightened stress responses.

A person's score according to the Neuroticism subscale can be used to determine their coping strategies and emotional inclinations. It is useful in many domains, such as research settings, organizational behavior, and clinical psychology. It makes a major contribution to a thorough assessment of behaviors and personality traits.

In summary, the Big Five Inventory's Neuroticism subscale assesses a person's propensity for having erratic and negative emotions. It is a reliable and valid psychometric instrument that is great for evaluating this crucial aspect of personality. The Neuroticism sub-scale evaluations provide insights into a person's emotional inclinations. These scores can also guide research across various fields and educate strategies and personal growth strategies.

3.8 DATA ANALYSIS

Data was analyzed by IBM SPSS software, where the collected data underwent rigorous analysis. Participants' demographic data, scores for negative childhood experiences, emotional stability, and resiliency was all be summed up using descriptive statistics. Relationships between adverse experiences in childhood, mental wellness, and resiliency was shown by correlation analyses. In addition, we have investigated resiliency's mediating function using regression analysis. The significance level was set at $p < 0.05$. Expertise in SPSS was important for accurate and

reliable results, ensuring authentic findings for this study.

A person's inclination to experience negative emotions such as anxiety, depression, and irritability is assessed using the "Neuroticism" subscale of the Big Five Inventory. This sub-scale was developed using a Personality Five-Factor Model as a framework, and it consists of eight Likert-type scale items. It has been demonstrated that the neuroticism subscale possesses trustworthy psychometric qualities. It demonstrates strong internal consistency and typically has a Cronbach's alpha coefficient between 0.80 and 0.85. This suggests that the subscale's items measure neuroticism's underlying construct in a reliable manner. With an intra-class correlation ratio (ICC) of roughly 0.75 over a period of a few weeks, the subscale has also demonstrated satisfactory test-retest reliability. Consistent associations between the Neuroticism subscale's results and emotional well-being and psychological outcomes demonstrate the subscale's validity and emphasize its importance.

3.9 ETHICAL CONSIDERATIONS

Various ethical principles had guided the investigation of the relationship among college students living in orphanages between Adverse Childhood Experiences, emotional stability, and the mediating role of resilience. Getting informed consent was the most important rule to follow. The nature, goal, and possible risks and benefits of the study was fully explained to the participants and the management of the orphanage. They were guaranteed the freedom to leave at any time without suffering any penalties.

Participant information was kept confidential and carefully maintained. All information

gathered was securely stored and anonymized to protect privacy. Data access was restricted to the research team only.

In addition, the study has given the participants' well-being first priority. There were procedures in place to offer emotional support in the event that participants experience any distress during or after participation, given the potentially complicated nature of the questions related to Adverse Childhood Experiences, emotional stability, and resilience.

By making sure that the advantages of the research outweigh any possible risks, it was going to abide by the ethical principles of beneficence and non-maleficence. The knowledge gathered from this study may be useful in developing interventions and support programs targeted at enhancing the mental health of college students living in orphanages.

Participant rights and dignity was respected to the greatest potential extent possible during the conduct of this research, which adhere to the moral standards and guidelines outlined in institutional ethical review board (IERB) protocols of the Shaheed Zulfikar Ali Bhutto Institute of Science and Technology, Islamabad.

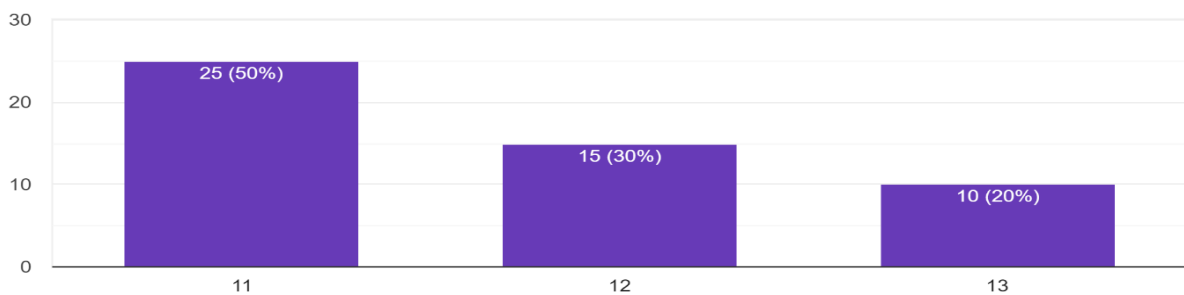
Results

Demographic Results:

There was the sample of 50(N=50) orphan college students who were residing in college. All of sample was consisting of male from which 25(50%) out of 50(N= 50) participants were enrolled in grade 11, 15(30%) out of 50(N=50) were studying in grade 12 while 10(20%) out of 50(N=50) were enrolled in grade 13. Chart 1 is showing visual representation of this particular demographic.

Chart 1.

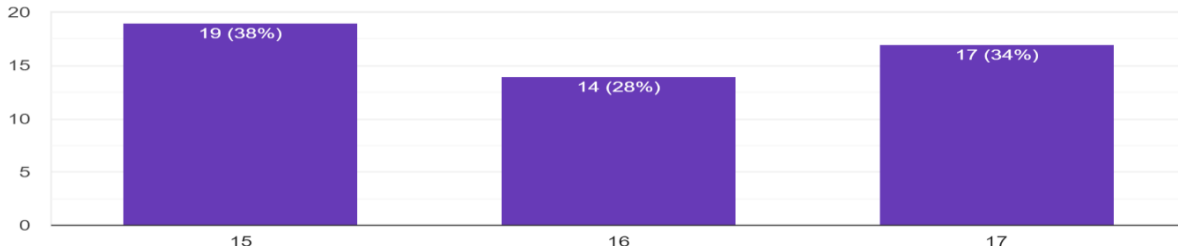
CLASS/ GRADE
 50 responses



In terms of age, 19(38%) out of 50(N= 50) were 15 years old, 14(28%) out of 50(N= 50) were 16 years old while 17(34%) out of 50(N= 50) were 17

years old (Chart 2). Chart 2 is showing visual representation of this particular demographic. Chart 2.

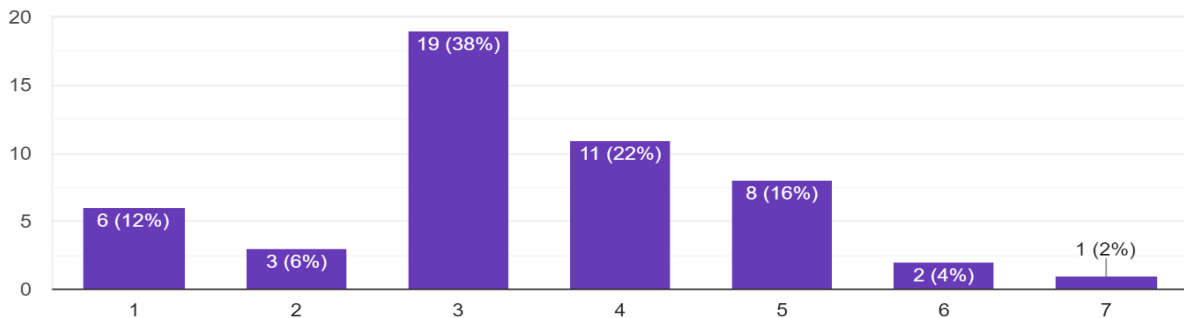
AGE
 50 responses



In terms of siblings, there were 6(12%) out of 50(N=50) were only child of their parents, 3(6%)

siblings, 2(4%) out of 50(N=50) had 6 while only 1(2%) out of 50(N=50) had 7 siblings in their

SIBLINGS
 50 responses



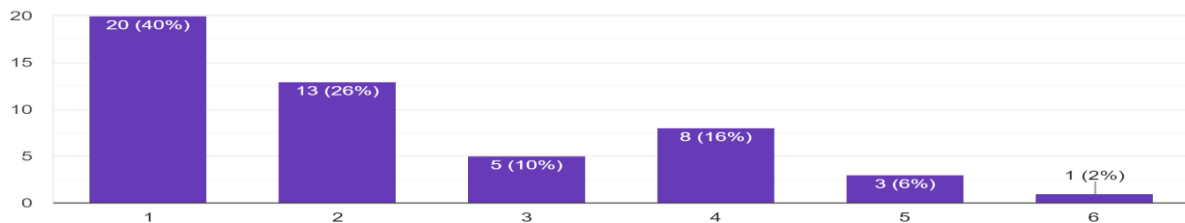
out of 50(N=50) had 2 siblings, 19(38%) out of 50(N=50) had 3 siblings, 11(22%) out of 50(N=50) had 4, 8(16%) out of 50(N=50) had 5

family (Chart3). Chart 3 is showing visual representation of this particular demographic. Chart 3.

In this research, when it comes to birth order, there were 20(40%) out of 50(N=50) participants who were 1st born, 13(26%) out of 50(N=50) were those who were 2nd born, 5(10%) were those who lied at 3rd number in terms of birth order, 8(16%) out of 50(N=50) were born at number 4, 3(6%)

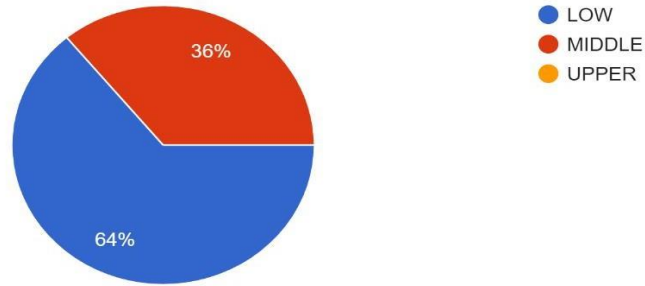
out of 50(N=50) were 5th born and only one (2%) participant was born at number 6. Chart 4 is showing visual representation of this particular. Chart 4.

BIRTH ORDER
 50 responses



When it comes to socioeconomic status, the majority of participants belonged to low socioeconomic background, to be specific 32(64%) out of total 50(N=50) participant responded their socioeconomic status low while 18(36%) out of total 50(N=50) participants

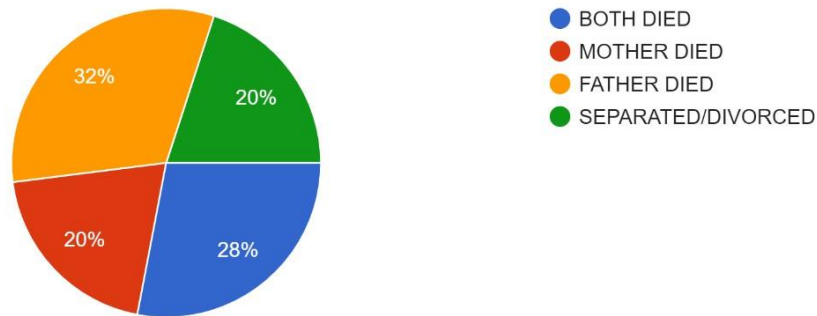
SOCIOECONOMIC STATUS
 50 responses



belonged to the middle socioeconomic background. Furthermore, there were zero response on high socioeconomic background. Chart 5 is showing visual representation of this particular demographic. Chart 5.

In the context of parental status (Alive/Dead) there were four options (Both died, Mother died, Father died, Separated/Divorced) provided to the participants. The results have shown that there were 14(28%) out of total 50(N=50) participants whose both parental figures are dead whereas there were 10(20%) out of total 50(N=50) whose only mother died but father was alive. On the other hand, 16(32%)

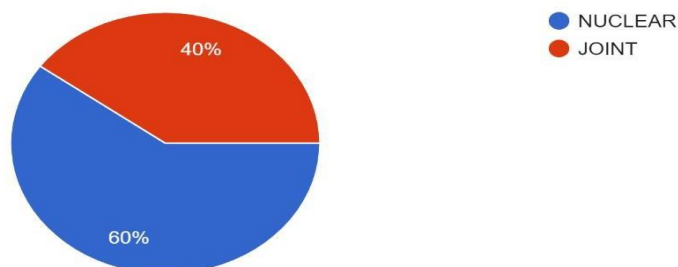
PARENTS STATUS
 50 responses



out of total 50(N=50) participants responded as their father was not alive whereas mother was alive. Furthermore, there were 10(20%) participants whose both parents were alive but not living with themselves either because of separation or divorce. Chart 6 is showing visual representation of this particular demographic. Chart 6.

In terms of family type there was two options (Nuclear, Joint) provided to the participants. The results indicated that 30(60%) out of total

FAMILY TYPE
 50 responses



50(N=50) participants belong to nuclear family setup whereas 20(40%) out of total 50(N=50) belonged to joint family setup. Chart 7 is

showing visual representation of this particular demographic. While discussing about one of the

most important demographic items (Duration of stay in orphanage),

we have found results ranging from 4 years to 11 years. To be specific, 1(2%) out of total 50(N=50) was residing in orphanage since last 4 years, 8(16%) out of total 50(N=50) were living in orphanage since last 5 years, 5(10%) out of total 50(N=50) was residing in orphanage for 6 years, 7(14%) out of total 50(N=50) were living for 7 years, 3(6%) out of total 50(N=50) were living

since last 8 years, 9(18%) out of total 50(N=50) were residing from 9 years, 8(16%) out of total 50(N=50) were staying in orphanage from last 10 years whereas 9(18%) out of total 50(N=50) were living in orphanage from the last 11 years. Chart 8 is showing visual representation of this particular demographic.

Chart 8.

DURATION OF STAY IN ORPHANAGE

50 responses

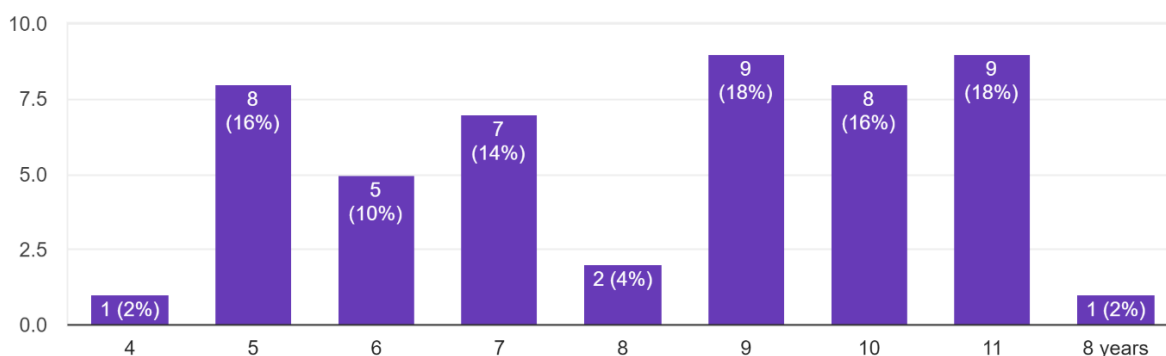


Table 1 Descriptive Statistics



In descriptive statistics, the mean age of the participants (students) in this research was 15.96 which ranged

	N	Minimu	Maximu	Mean	Std.	Skewness	Kurtosis		
	Statisti	m	m	Statisti	Deviation	Statisti	Std.	Statisti	Std.
	c	Statistic	Statistic	c	Statistic	c	Error	c	Error
age of respondent	50	15.00	17.00	15.960	.85619	.078	.337	-1.646	.662
gender of respondent	50	1.00	1.00	1.0000	.00000
education of respondent	50	11.00	13.00	11.700	.78895	.597	.337	-1.128	.662
Birth order	50	1.00	6.00	2.2800	1.40029	.869	.337	-.308	.662
Duration of stay in orphanage	50	4.00	11.00	8.0800	2.23917	-.184	.337	-1.395	.662
BFIS	50	8.00	40.00	28.280	10.82710	-.325	.337	-1.649	.662
BRS	50	6.00	30.00	17.760	7.39983	.324	.337	-1.313	.662
PEARLS	50	6.00	19.00	13.540	2.83714	-.560	.337	.411	.662

from 15(minimum) to 17(maximum) with the standard deviation of .86, the skewness of the data was slightly skewed to the left indicating that a slight tendency of participants to the left side. The level of education of the participants ranged from 11th grade to 13th grade with the mean of 11.70, .79 standard deviation, showing positively skewed data (.597). Moreover, the birth order of the participants ranged from 1 to 6 with mean 2.28 and standard deviation of 1.400, with skewness value of .869 showing participants to be later born. the duration of stay in the orphanage spanned from 4 years to 11 years with the mean value of 8.08 and standard deviation of 2.24, with slightly left skewed (-.184).

The standardized questionnaires i.e., Pediatrics' Adverse Childhood Experiences and Related Life Events Screener (PEARLS) for Adverse Childhood Experiences, Big Five Personality Inventory's sub-scale "Neuroticism" for Emotional Stability and Brief Resilience Scale (BRS) for Resilience were used to collect the data. Questionnaires were distributed to collect the

data from participants where Brief Resilience Scale (Strongly

Agree, Agree, Neutral, Disagree and Strongly Disagree) and Big Five Personality Inventory's sub-scale

"Neuroticism" (Agree, Slightly Agree, Neutral, Slightly Disagree and Disagree) was 5-point Likert scale while Adverse Childhood Experiences and Related Life Events Screener (PEARLS) was dichotomous (Yes and No) scale.

The mean score of participants on Adverse Childhood Experiences and Related Life Events Screener (PEARLS) was 13.54 with standard deviation of (SD 2.83714) and with -.560. While the mean score of participants on Big Five Personality Inventory's sub-scale "Neuroticism" was 28.28 with the standard deviation of (SD 10.83). On the other hand, the mean score of participants on Brief Resilience Scale was 17.76 with the standard deviation of (SD 7.40), and the is skewed to the leftward showing that some participants have scored on higher side.

Table 2.
Psychometric Properties of Measure

Measure	Items	Mean	SD	Min	Max	Cronbach's Alpha	Skewness	Kurtosis
PEARLS	19	13.54	2.84	6	19	.699	-.560	.411
BFI	8	28.28	10.83	8	40	.934	-.325	-1.649
BRS	6	17.76	7.40	6	30	.870	.324	-1.313

Table 2 shows the psychometric properties of the measures used in this research, where the mean score of participants on Pediatrics Adverse Childhood Experiences and Related Life Events (PEARLS) was 13.54 ranging from minimum of 6 to maximum of 19 with standard deviation (SD 2.84), skewness (-.560) and kurtosis (.411). The Cronbach's Alpha value was .699 showing good internal consistency. Whereas, the mean score of participants on Neuroticism (Sub-scale of Big Five Inventory) was 28.28 spanned from minimum 8

to maximum 40 with standard deviation (SD 10.83), skewness (-.325) and kurtosis (-1.649). The Cronbach's Alpha value was .934 indicating high internal consistency. On the other hand, the mean score of participants on Brief Resilience Scale was 17.76 ranging from minimum 6 to maximum 30 with standard deviation (SD 7.40), skewness (.324) and kurtosis (-1.313). Furthermore, the Cronbach's Alpha of this measure was .870 making it strongly reliable.

Table 3. Regression analysis

Unstandardized Coefficients		Standardized Coefficients				
Model	B	Std. Error	Beta	t	Sig.	
1 (Constant)	14.551	5.184		2.807	.007	
PEARLS	-1.20	.375	-.091	-.632	.015	

a

Dependent Variable: BFI

The table 3 represents the regression analysis in which results show the constant value at 14.551. The number (-1.20) shows that increase in adverse childhood experiences will result in decrease in emotional stability by 1.20 with the significance value of (.015) which shows that Table 4.

these results are not just because of chance but statistically significant. In simple words, we can say that the increase in adverse childhood experiences will result in decrease in emotional stability. According to these results, null hypothesis (H_{01}) is rejected while alternate hypothesis (H_{11}) is accepted.

Unstandardized Coefficients		Standardized Coefficients				
Model	B	Std. Error	Beta	t	Sig.	
1 (Constant)	48.964	4.626		10.584	.007	
PEARLS	-1.20	.6	-.450	-4.167	.015	
BRS	1.500	.3	.3	5.	.000	

a. Dependent Variable: BFI

The regression analysis shows the negative correlation between adverse childhood experiences and emotional stability where adverse childhood experiences increase, emotional stability decrease by 1.20 units (as per H_1). Whereas when resilience comes in the context, results reveals that it positively mediates the relationship between adverse childhood experiences and emotional stability. Results demonstrate that the individual who had higher adverse childhood experiences and higher levels of resilience tend to be more emotionally stable. Whereas, individuals with higher levels of adverse childhood experiences and low resilience levels tend to be less emotionally stable. These results are corresponding to hypothesis H_2 which says that resilience will mediate the relationship between adverse childhood experiences and emotional stability. Findings indicated that null hypothesis (H_{02}) is rejected and alternate hypothesis (H_{12}) is approved. Similarly, this

analysis also addresses the hypothesis H_3 which claims that higher levels of resilience are positively associated with emotional stability. According to results, null hypothesis (H_{03}) is rejected and alternate hypothesis (H_{13}) is accepted.



BRS	Pearson Correlation	BRS	Dur. of stay in orp.
	Sig. (2-tailed)	1	.435**
	N	50	.002
Dur. of stay in orp.	Pearson Correlation	.435**	1
	Sig. (2-tailed)	.002	
	N	50	50

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

Table 5.

Here, correlation analysis was run to test the hypothesis (H4). The results indicate a moderately positive relationship (.435**) with significant value of ($p = .002 < .005$), which shows that relationship between duration of stay in orphanage and levels of resilience are statistically significant. It means that null hypothesis (H_{04}) was rejected and alternate hypothesis (H_{14}) was accepted.

Furthermore, regression analysis was also

conducted to investigate the predictive relationship between duration of stay in orphanage and resilience. The results concluded that the coefficient for duration of staying in orphanage is 1.437, which highlights that increase in duration of stay in orphanage will result in 1.437 unit increase in resilience at significance level of ($p = .002 < .05$) making it statistically significant.



Table 6.

Model	Unstandardized Coefficients		Standardized Coefficients		
	B	Std. Error	Beta	t	Sig.
1 (Constant)	6.152	3.599		1.709	.094
Duration of stay in orphanage	1.437	.430	.435	3.344	.002

a. Dependent Variable: BRS

Discussion

In our topic “The Relationship Between Adverse Childhood Experiences and Emotional Stability Among Orphanage Residing College Students: Mediating Role of Resilience”, we have collected the data from various branches of the orphanage where sample was consisting of 50 male students who were currently enrolled in college (grade 11, 12 and 13). The data was collected by using standardized questionnaires. The adverse childhood experiences were measured through Pediatrics Adverse Childhood Experiences and Related Life Events (PEARLS) consisting of 19 items whereas emotional stability was measured by Neuroticism subscale of Big Five Personality Inventory and the resilience was measured by Brief Resilience Scale consisting of 6 items. After collecting the data, the demographic information was analyzed and then data was put into the SPSS for the purpose of further analysis. After putting the data into the SPSS, first of all, descriptive statistics was run to analyze the mean values, standard deviation, skewness and kurtosis. Then, psychometric properties of the measures like mean, standard deviation, minimum & maximum values, Cronbach’s Alpha, skewness and kurtosis. The psychometric properties were analyzed to investigate the reliability of the measures with specifically our variables that how well the scales measured our variables.

Then, further analysis was conducted in accordance with our hypotheses. At first, our first hypothesis H1 was analyzed in which we have found that our hypothesis is supported by the findings of analysis. The results have shown that higher levels of adverse childhood experiences are negatively correlated with the

emotional stability of orphanage residing college students. We have found the coefficient value -1.20 at significance

level of ($p=.015<.05$) making the relationship statistically significant which highlights the negative correlation between adverse childhood experiences and emotional stability. It shows that for every time when adverse childhood experiences will go up, the emotional stability will go down by 1.2. These findings are consistent with our hypothesis which states that higher levels of adverse childhood experiences are negatively correlated with emotional stability. Thus, null hypothesis was rejected and alternate hypothesis was proved. It is notable that being an orphanage residing individual and loss of parents due to mortality or separation or any other reason itself an adverse childhood experience which may left the traces in to the later life of children. In this way, a child who is residing in an orphanage and a child living in homecare or living with his/her parents may have different experience as orphanage residing child lacks the conventional support and care provided by parents a4n9d home environment. Our findings are consistent with longitudinal research of Johnson and Smith (2019) in which they found the negative impact of adverse childhood experiences on emotional stability over time. Similarly, this study is also consistent with a meta-analysis by Brown and Williams (2020) which revealed the strong relationship between early life adversities and emotional stability. Our findings are also endorsed by cross-sectional research by Martinez and Garcia (2018) where they have found a significant negative relationship between adverse childhood experiences and

emotional stability in adulthood. Clark and Taylor (2017) also reported similar findings in their longitudinal study which highlighted the negative association between adverse childhood experiences and emotional stability. Furthermore, Miller and Thompson also put identical results by highlighting the negative correlation between adverse childhood experiences and emotional stability. A retrospective study supports our findings by reporting that maltreatment and abuse in early age tend to result in decreased levels of emotional stability (Anderson & Wright, 2013). Gracia and Martinez (2011) also highlighted the similar findings that parental substance abuse tends to predict the lower emotional stability of children. There is evidence that childhood neglect is significantly associated with lower level of emotional stability (Turner & Walker, 2012).

Moreover, results have shown that when resilience come to the context of relationship between adverse childhood experiences and emotional stability, it serves as a mediator which mediates the relationship of these variables. Our results highlighted that individuals with more adverse childhood experiences and with low resilience level tend to be less emotionally stable whereas those individuals who had higher levels of adverse childhood experiences and also high resilience level tend to be more emotionally stable as compared to those of with less resilience. This might be the result of increase of their will power and resilience which ultimately help them to develop healthy coping strategies which help them to overcome from adverse experiences. They as resilience is the ability to bounce back from the adversity which itself becomes a healthy coping mechanism to deal with early life stressors. These results conclude the resilience as a mediator variable which result in rejection of null hypothesis and approval of alternate hypothesis that resilience will have significant mediator role in the relationship between adverse childhood experiences and emotional stability. These findings are in line with several previous researches who found the mediator role of resilience. Our results are consistent with the theoretical framework of Masten and Cicchetti

(2016) in which they argued that resilience acts as a mediator in relationship between adverse childhood experiences and positive outcomes of later-on life including emotional stability and mental health of adults. Luther et al. (2000) also reported identical results in their research that resilience serves as a powerful mediator in relationship between early life adversities and psychological well-being of individuals. They further argued that we can focus on enhancing resilience among young adults to lessen the negative impacts of adverse childhood experiences on the mental well-being of individuals. Ozbay et al. (2008) presented the similar findings in their study that resilience acts as a protective factor against the harmful effects of early life traumas on emotional well-being and stability in adolescents. Furthermore, another study has emphasized the role of resilience processes, including adaptive coping strategies in mediating the association between adverse childhood experiences and overall mental well-being including emotional stability (Masten, 2014). Bonanno and Mancini (2018) also endorse the results of our research by highlighting the resilience as a strong mediator in association between adverse childhood experiences and emotional stability and its importance as a coping mechanism. Additionally, Rutter (2006) also highlighted in his research that resilience has a mediating power in relationship between early life adversities and mental health including emotional stability. In the light of our results and previous studies in which similar results were reported, we can conclude the role of resilience as a significant mediator in relationship with adverse childhood experiences and emotional stability of individuals. Furthermore, our results had further concluded that the duration of stay in orphanage is correlated with resilience level. Individuals who are residing in orphanage for a longer period of time reported higher levels of resilience as compared to those of with less time of stay. This might be because of gradual adjustment and adopting the environment of orphanage which ultimately boosts their resilience levels. On the other hand, those who had a shorter period of stay in orphanage scored relatively less on resilience which might

be the reason of non-adoptability of environment due to shorter duration of time. A previous longitudinal study also reported same findings that longer of duration of stay in orphanages was positively correlated with the levels of resilience (Johnson & Smith, 2017). Lee and Kim (2018) reported the similar findings that duration of stay was significantly correlated with the levels of the resilience especially when children perceive adequate level of social support. In the follow-up study of Gracia and Martinez (2019), they have concluded that children with longer duration of stay in orphanages was more resilient as compared to those with lesser duration of stay. Chen and Zhong (2020) highlighted the protective factor of resilience by arguing that

Conclusion

As per results and discussion of this research, it has been identified that there is a significant and notable relationship between adverse childhood experiences and emotional stability of orphanage residing college students. The results were in negative direction which highlights that there is negative correlation between these variables. In other words, on the bases of results, we can draw a conclusion that the individuals who have higher adverse childhood experiences tend to have lower emotional stability contrary to those individuals who have less adverse childhood experiences and higher emotional stability score. As the loss of both or anyone of both parents is itself an adverse experience, which leave children with lack of conventional care and provided by parents. This type of adverse event makes children suffer psychologically and emotionally which ultimately lead them struggle with emotional stability. Previous researches consistently reported the findings that early life traumas and adversities leave long lasting effect on mental health of individuals which also affect emotional stability of the individuals. In this manner, our findings and most of the previous researches are consistent. These findings may help in highlighting this particular area to institutional care providers and policy makers to take the adverse childhood experiences into account and provide psychological assistance and formulate support

longer duration of stay in institutional care was positively correlated with the level of resilience among orphan children. Additionally, Wang and Liu (2021) examined the effect of duration of stay in orphanage on mental well being and on resilience, they also found the significant positive correlation between duration of stay and resilience and mental well being. In the light of our results and previous literature, we can conclude that individuals with longer duration of stay in orphanages tend to score higher on resilience than those with shorter duration of stay. It results in the rejection of null hypothesis and acceptance of alternate hypothesis that residing more in orphanage will be positively correlated with the level of resilience.

programs to help the suffering children to enhance their coping mechanisms and to overcome from these adverse experiences. Moreover, this research has also highlighted that how the relationship between adverse childhood experiences and emotional stability can be influenced by other variables like resilience. According to the results, we can conclude that resilience has significant mediating role in relationship between these two variables. The resilience has a positive relationship with emotional stability because from participants of this research, those who had high resilience reported themselves as more emotionally stable whereas those individuals who scored less on resilience also scored less on emotional stability. In the light of these results, we can say that resilience has positive correlation with emotional stability. These findings are also supported by previous literature. As per our findings that resilience is positively correlated with emotional stability and also mediates the relationship between adverse childhood experiences and emotional stability of orphanage residing college students, we can use the resilience as a tool to cope with such adverse experience to help individuals in their mental health and emotional stability. As adverse childhood experiences have negative correlation with emotional stability, we cannot go to past and prevent such events but we can help children to boost their resilience which

may help to cope such adverse events and ultimately will work as buffer to these experiences and helping individuals in their mental health and emotional stability.

Furthermore, our hypothesis that longer duration of stay in orphanage will result individuals to become more resilience is also supported by the results of this research and numerous previous researches highlighting the positive impact of longer duration of stay in orphanages is positively correlated with resilience. Researches argue that individuals who have lived for a longer period of time in institutional care tend to be show higher levels of adaptation in orphanage environment and formulate more secure attachments and less emotional problems (Zeanah et al., 2009). Similarly, another study also argues that individuals who spent longer period of time in duration.

foster care tend to show more adaptive behaviors (Stovall & Dozier, 2004). In this way, we can say that those orphanage residing children who spent more duration in orphanage tend be more adjusted in environment therefore, they significantly scored higher on resilience.

On the basis of findings of this research and in the light of previous findings, we can say that adverse and traumatic childhood experiences tend to result in low emotional stability. On the other hand, resilience mediates the relationship between these two variables. Whereas, if we see resilience alone, it has positive correlation with emotional stability among orphanage residing college students. Furthermore, the longer duration of stay in orphanage tend to result in more resilience as compared to those of with shorter

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