

**EXPLORING THE IMPACT OF ADVERSE
CHILDHOOD EXPERIENCES ON SELF-HARM
AND MENTAL HEALTH AMONG EMERGING
ADULTS IN PAKISTAN: A MIXED-METHODS
STUDY**

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**ASIA e UNIVERSITY
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EXPLORING THE IMPACT OF ADVERSE CHILDHOOD EXPERIENCES
ON SELF-HARM AND MENTAL HEALTH AMONG EMERGING
ADULTS IN PAKISTAN: A MIXED-METHODS STUDY

SHUKRIA QASIM KHAN

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ABSTRACT

This study examined the frequency of Self-Harm Behavior (SHB) and determined the effect of ACEs on Self-Harm (SH) among Emerging Adults (EAs). This study reconnoitered how common ACEs are and how they instigate SHB among EAs in Pakistan. It involves a cultural adaptation of card sort task for self-harm (CaTS) followed by a pilot study to uncover the key pattern of SHB among EAs. The data for this study was collected through on-line google forms and in paper using simple random sampling from various local University settings. An analysis was conducted on 301 respondents out of 400 total samples, ranging in age from 18 to 29 years. The majority of the participants, 55.8%, were females, however for the SH variable, there was a significant difference observed between males and females, males reported SHB to a greater extent than females. A Bootstrapping analysis utilizing SMART PLS-SEM and linear regression model utilizing SPSS is conducted to determine the factors that predict SH among emerging adults. The study considered variables such as ACEs, Mental Health (MH), self-harm (SH), Social Functioning (SF) and Social Support (SS), while also accounting for other factors like socio-economic status, and family dynamics etc. Out of the 400, only 301 respondents were examined. According to the findings of the study, there was a significant increase in the likelihood of SH among EAs who experienced physical or sexual abuse, specifically; those with sexual abuse had a higher risk of having SHB, in comparison to those who did not experience abuse. The study demonstrates the negative inspiration of ACEs on SF. The output clearly explains the impact of ACEs on mental health (MH) and Self-harm (SH). It investigated the mediating role of social functioning (SF) between ACEs and MH. It explored the moderating role of social support (SS) that reduces the likelihood of SH among EAs. Conclusions imply that social support can foster favorable outcomes even for individuals from dysfunctional homes and that the protecting roles of SS grow with the number of support programs while this study depicted insignificant mediating role of MH between the ACEs and SH. This insignificance provides good evidence for the fact that SH is maladaptive coping during stressful situation and overcoming emotional dysregulation in EA. The study suggests that addressing MH and related emotion directive abilities right from the childhood can potentially impede forthcoming SHB, while also strengthening social support networks.

Keywords: Adverse Childhood Experiences (ACEs), Card Sort Task for Self-Harm (CaTS), Emerging adults, Self-Harm Behavior (SHB), Mental Health (MH), Social Support (SS), Social Life Functioning (SF)

APPROVAL

This is to certify that this thesis conforms to acceptable standards of scholarly presentation and is fully adequate, in quality and scope, for the fulfilment of the requirements for the degree of Doctor of Philosophy.

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(20 September 2024)

DECLARATION

I hereby declare that the thesis submitted in fulfilment of the requirements for the Degree of Doctor of Philosophy is my own work and that all contributions from any other persons or sources are properly and duly cited. I further declare that the material has not been submitted either in whole or in part, for a degree at this or any other university. In making this declaration, I understand and acknowledge any breaches in this declaration constitute academic misconduct, which may result in my expulsion from the programme and/or exclusion from the award of the degree.

Name: Shukria Fazal

A handwritten signature in blue ink, appearing to read 'Shukria Fazal', is written over a horizontal line.

Signature of Student:

Date: 20 September 2024

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TABLE OF CONTENTS

ABSTRACT	ii
DECLARATION	iv
ACKNOWLEDGEMENTS	vi
TABLE OF CONTENTS	viii
LIST OF TABLES	xiii
LIST OF FIGURES	xvi
LIST OF ABBREVIATION	xvii
 CHAPTER 1 INTRODUCTION	 1
1.0 Introduction	1
1.1 Emerging Adulthood (EA) as a Critical Developmental Stage	1
1.1.1 Identity Exploration	2
1.1.2 Autonomy and Independence	2
1.1.3 Life Transitions	2
1.1.4 Psychological Turmoil	2
1.1.5 ACES and its Influence	3
1.2 Background of the Study	3
1.3 Research Gaps and the Need for This Study	6
1.4 Rationale	7
1.4.1 The Importance of Studying Self-Harm in Emerging Adults (EAs)	7
1.4.2 Vulnerability during Emerging Adulthood (EA)	7
1.4.3 Unique Stressors of Emerging Adulthood (EA)	8
1.4.4 The Role of ACEs in Shaping Self-Harm Patterns	8
1.5 Problem Statement	10
1.5.1 Research Problem	11
1.5.2 Research Questions and Objective	11
1.6 Research Hypotheses	13
1.7 Justifications and Significance of the Study	14
1.8 Theoretical Contributions	15
1.8.1 Developmental Theory	15
1.8.2 Stress-Diathesis Framework	16
1.8.3 Integrated Motivational – Volitional (IMV) Model	18
1.8.4 Escape Theory	19
1.8.5 Emotional Regulation Theory	19
1.8.6 Interpersonal-Psychological theory of suicide and Linehan’s Model of Emotion Dysregulation	20
1.8.7 Integration into the Methodology and Data Analysis	20
1.8.8 Theoretical Framework and their Implication:	21
1.9 Ethical Consideration	22
1.9.1 Informed Consent	22
1.9.2 Confidentiality and Anonymity	23
1.9.3 Minimizing Psychological Distress	23
1.9.4 Mandatory Reporting and Ethical Dilemmas	24
1.9.5 Voluntary Participation and Right to Withdraw	24
1.9.6 Avoiding Harm from Labeling and Stigmatization	24
1.9.7 Cultural Sensitivity	25

1.9.8	Ethical Review and Approval	25
1.9.9	Avoiding Exploitation of Vulnerable Populations	26
1.9.10	Dissemination of Findings	26
1.10	Mixed Method Study	26
1.11	Contribution to Methodology	27
1.11.1	Research Design – A Mixed – Methods Approach	27
1.11.2	Rationale for a Mixed-Methods Approach	27
1.11.3	Addressing Research Gaps	28
1.11.4	Practical Implications and Intervention	29
1.12	Research Process and Methodology	29
1.12.1	Phase I: Qualitative Methodology	29
1.12.2	Phase II: Quantitative Methodology	29
1.12.3	Phase III: A Clinical Case Study	30
1.12.4	Phase I	30
1.12.5	Phase II	33
1.12.6	Phase III	34
1.13	Chapter Summary	35
CHAPTER 2	LITERATURE REVIEW	36
2.0	Introduction	36
2.1	Literature Review	37
2.1.1	ACES	37
2.1.2	ACEs and Early Puberty	42
2.1.3	ACEs and Mental Health (MH)	45
2.1.4	Deliberate Self-Harm (DSH)	53
2.1.5	Emerging Adulthood	56
2.1.6	Mechanisms Linking ACEs and Self-Harm	59
2.1.7	ACE Impact on Social Functioning (SF)	74
2.2	Prevalence in Pakistan	78
2.2.1	ACEs and Pakistan	81
2.3	Trends and Gaps in the Literature	82
2.3.1	Trends	82
2.3.2	Gaps	82
2.4	Conclusion	83
CHAPTER 3	METHODOLOGY	84
3.0	Introduction	84
3.1	Rationale for Mix Method Study	84
3.1.1	Complex Nature of ACE's and Self-Harming:	84
3.1.2	Exploration of Lived Experiences:	85
3.1.3	Enhanced Validity and Robustness:	85
3.1.4	Addressing Gaps in Existing Research:	85
3.1.5	The Need for Mixed Methods in This Study	86
3.2	Research Design	88
3.2.1	Phase I: A Qualitative Study	88
3.2.2	Phase II: Quantitative Analysis	88
3.2.3	Phase III: Clinical Case study	89
3.3	Operational Definitions	89
3.3.1	Emerging Adults (EAs)	89
3.3.2	Mental Health (MH)	90

3.3.3	Adverse Childhood (ACEs)	90
3.3.4	Self-Harm (SH)	91
3.3.5	Social Support (SS)	91
3.3.6	Social Life Functioning (SF)	92
3.4	Theoretical Framework	93
3.4.1	Psychosocial Developmental Theory	93
3.4.2	Attachment Theory	93
3.4.3	Trauma Theory	94
3.4.4	Biological and Neurobiological Theories	94
3.4.5	Social Learning Theory	94
3.4.6	Social Determinants of Health	95
3.4.7	The Four-Function Model of Self Harming Behavior (SHB)	95
3.5	Summary	96
3.6	Conceptual Framework	96
3.6.1	ACES	97
3.6.2	Mental Health	97
3.6.3	Self-Harm	98
3.6.4	Social Support	98
3.6.5	ACES, Social Support & Mental Health	98
3.6.6	ACES, Social Support & Self-Harm Behavior	99
3.6.7	ACES, Social Support & Social Life Functioning	100
3.7	Scope of the Study	100
3.7.1	Significance of the Study	102
3.8	Sampling	102
3.8.1	Sampling Technique	102
3.8.2	Rationale	103
3.8.3	Sample Size	103
3.9	Significance of Research Design	105
3.9.1	Sampling Method	105
3.9.2	Recruitment Process	106
3.9.3	Informed Consent	106
3.10	Instrumentation	106
3.10.1	ACES	106
3.10.2	Social Support	108
3.10.3	Mental Health (MHI-18)	109
3.10.4	Self-Harm Behavior (DSHI)	110
3.10.5	Social Life Functioning (SFQ)	111
3.11	Permissions, Ethics Clearance and Informed Consent	112
3.11.1	Ethical Approval	112
3.11.2	Informed Consent	112
3.11.3	Data Collection Method	112
3.12	Data Analysis	113
3.12.1	Phase I: Qualitative Analysis of Self-Harm	113
3.12.2	Phase II: Quantitative Study	114
3.12.3	Phase III: A Clinical Case Study	114
3.13	Findings of the Pilot Study (Phase I)	117
3.13.1	Background	117
3.13.2	Cultural Adaptation of CaTS	117
3.13.3	Introduction	119
3.13.4	Method	120

3.13.5	Card Sort Task for Self-Harm (CaTS)	120
3.13.6	Frequency of Self-Harm	121
3.13.7	Sequence Analysis	122
3.13.8	First Episode of Self-Harm Sequence Analysis	123
3.13.9	Most Recent Episode of Self-Harm	124
3.13.10	Self-harm frequency and method	125
3.13.11	Discussion	125
3.13.12	Strengths and Limitations	128
3.13.13	Limitations of the Pilot Study	128
3.14	Conclusion	130
CHAPTER 4	RESULTS	131
4.0	Descriptive Analysis	131
4.1	Respondents Demographics	131
4.1.1	Age of Respondents	131
4.1.2	Gender of Respondents	132
4.1.3	Education of Respondents	134
4.1.4	Marital Status	135
4.1.5	Employment Status	135
4.1.6	Family Status	136
4.1.7	Socio-Economic Status	137
4.1.8	One-Way ANOVA	137
4.1.9	Self-Harm Methods Reported by Participants	140
4.2	The Linear Regression Model	142
4.2.1	ACE and MH	143
4.2.2	ACE and SFQ	146
4.2.3	SFQ and MH	149
4.2.4	MH and SH	152
4.2.5	ACE and SH	154
4.3	Reliability and Validity of the Scales	157
4.3.1	Cronbach's Alpha and Guttman Split-Half Coefficients	158
4.3.2	Composite Reliability	159
4.3.3	Discriminant Validity-Fornell & Larcker Criterion	159
4.4	Structural Model Testing	160
4.5	Evaluation of Structural Model	161
4.5.1	Bootstrapping	161
4.5.2	Beta Values	162
4.6	Hypothesis Testing	163
4.6.1	Adverse Childhood Experiences Substantially Impacts Self-Harm (H1)	163
4.6.2	Adverse Childhood Experiences Substantially Impacts Mental Health (H2)	164
4.6.3	Mental Health Impacts Self-Harm (H3)	165
4.6.4	Mental Health Effectively Mediates the Relationship of Adverse Childhood Experiences and Self-harm (H4)	165
4.6.5	Social Support Plays a Significant Role in Moderating the Relationship of ACEs and Self Harm (H5)	166
4.6.6	ACEs Impact Social Functioning (SF) (H6)	168
4.6.7	SF Impacts MH (H7)	168

4.6.8	Social Functioning Mediate the Relationship of Childhood Experiences and Mental Health (H8)	169
4.6.9	Social Support (SS) Significantly Moderate the Relationship between Social Functioning (SF) and MH (H9)	171
4.6.10	There is a Significant Difference in Gender Orientation Towards SH (H10)	172
4.7	Explanatory Power of the Model	172
4.7.1	Mental Health (MH)	173
4.7.2	Social Function (SF)	173
4.7.3	Social Support (SS)	174
CHAPTER 5	CASE STUDY (PHASE III)	175
5.0	Introduction	176
5.1	A Case Study: The Association of ACEs with SHB among EA	178
5.1.1	The DAS Scale	186
5.1.2	Reliability	187
5.1.3	Validity	187
5.1.4	Beck Anxiety Inventory (BAI)	187
5.1.5	Beck Depression Inventory (BDI-II)	188
5.1.6	Schema-Mode Inventory (SMI)	188
5.2	Results	189
5.2.1	SMI Test Result & Interpretation:	190
5.3	Discussion	192
5.4	Conclusion	196
CHAPTER 6	DISCUSSION, CONCLUSIONS & RECOMMENDATIONS	198
6.0	Overview	198
6.1	Experimental Findings	199
6.1.1	Interpretation of Findings	199
6.1.2	Comparison with Previous Studies	215
6.2	Implications of the Findings	217
6.2.1	Theoretical Findings	217
6.2.2	Implications of the Study Findings	218
6.3	Future Research Directions	223
6.4	Limitations	223
6.5	Suggestions for Future Research	225
6.6	Conclusion	226
	REFERENCES	227
	APPENDICES	244
	Appendix-IA: Pilot Study Supplementary Material	244
	Appendix-IB: Pilot Study Supplementary Material	248
	Appendix-IC: Pilot Study Supplementary Material	253
	Appendix-ID: Pilot Study Supplementary Material	258
	Appendix-IE: Pilot Study Permissions & Submissions	260
	Appendix-II: Research Questionnaires	265
	Annexure-III: Smart PLS Analysis	286

LIST OF TABLES

Table	Page
Table 3.1 Four Function Model of Self Harming Behavior (SHB)	96
Table 3.2 Purposive Convenient Sampling	104
Table 3.3 Simple Random Sampling	104
Table 3.4 Cultural Adaptation	117
Table 4.1 Age of Respondent	131
Table 4.2 Gender of Respondents	132
Table 4.3 Gender of Respondents	133
Table 4.4 Education of Respondent	134
Table 4.5 Marital Status	135
Table 4.6 Employment Status	136
Table 4.7 Family Status	136
Table 4.8 Socioeconomic Status	137
Table 4.9 ANOVA-Age Range	138
Table 4.10 ANOVA-Age Range	139
Table 4.11 ANOVA Marital Status Differences	140
Table 4.12 Self-Harm Reported by Participants	140
Table 4.13 ANOVA Socio-Economic Status	142
Table 4.14 Analysis of Variance (ANOVA) for ACE and MH	144
Table 4.15 Summarizes the Analysis of Variance (ANOVA) for ACE and MH	145
Table 4.16 Regression Coefficients of the ACE and MH Model	145
Table 4.17 Analysis of Variance (ANOVA) for ACE and SFQ	147

Table 4.18	Table Summarizes the Analysis of Variance (ANOVA) for ACE and SFQ	148
Table 4.19	Regression Coefficients of the ACE and SFQ Model	148
Table 4.20	Analysis of Variance (ANOVA) for SFQ and MH	150
Table 4.21	Analysis of Variance (ANOVA) for SFQ and MH	151
Table 4.22	Regression Coefficients of the SFQ and MH Model	151
Table 4.23	Analysis of Variance (ANOVA) for MH and SH	153
Table 4.24	Summarizes the Analysis of Variance (ANOVA) for MH and SH	153
Table 4.25	Regression Coefficients of the MH and SH Model	154
Table 4.26	Analysis of Variance (ANOVA) for ACE and SH	155
Table 4.27	Analysis of Variance (ANOVA) for ACE and SH	156
Table 4.28	Regression Coefficients of the ACE and SH Model	156
Table 4.29	Reliability & Validity	157
Table 4.30	Composite Reliability	159
Table 4.31	Discriminant Validity	160
Table 4.32	Hypothesis Testing	163
Table 4.33	ACEs & SH	164
Table 4.34	ACE -> MH	165
Table 4.35	MH->SH (H3)	165
Table 4.36	Mediation Impact of MH	166
Table 4.37	Moderation Impact of SS	167
Table 4.38	ACEs Impact Social Functioning	168
Table 4.39	SF Impacts MH	169
Table 4.40	Mediating Relationships of SFQ	170
Table 4.41	Direct Relationships (MSPSS->SFQ->MH)	171

Table 4.42	Perception of Male and Female Respondents Regarding SH	172
Table 4.43	Explanatory Power of the Model	173
Table 5.1	Diagnostic Data	189
Table 5.2	Client's Score for Schema Modes	190
Table 5.3	SMI Findings	191

LIST OF FIGURES

Figure	Page
Figure 1.1 Translation Procedure	31
Figure 2.1 Dose Response Relationship	61
Figure 3.1 Theoretical Model	97
Figure 4.1 Histogram of Regression Standardized Residuals (ACE-MH) Model	143
Figure 4.2 Plot of Regression Standardized Residual	144
Figure 4.3 Histogram of Regression Standardized Residuals (ACE-SFQ)	146
Figure 4.4 Normal Probability Plot of Regression Standardized Residual	147
Figure 4.5 Histogram of regression standardized residuals (SFQ-MH) Model	149
Figure 4.6 Normal Probability Plot of Regression Standardized Residual	150
Figure 4.7 Histogram of Regression Standardized Residuals (MH-SH)	152
Figure 4.8 Normal Probability Plot of Regression Standardized Residual	152
Figure 4.9 Histogram of Regression Standardized Residuals (ACE-SH)	154
Figure 4.10 Normal Probability Plot of Regression Standardized Residual	155
Figure 4.11 Structural Model of Research	161
Figure 4.12 Social Support Moderation Graph	167
Figure 5.1 Schema Modes	190
Figure 5.3 Bar Graph of SMI	191
Figure 5.4 Combo Chart of SMI	191

LIST OF ABBREVIATION

ACEs	Adverse Childhood experiences
CSA	Child Sexual Abuse
DSH	Deliberate Self-Harm
EA	Emerging Adulthood
EAs	Emerging Adults
MH	Mental Health
MT	Maltreatment
NSSI	Non-suicidal Self Injury
SF	Social Functioning
SH	Self-Harm
SHB	Self-Harm Behavior
SI	Suicidal Ideation
SS	Social Support
SSI	Suicidal Self-Injury

CHAPTER 1

INTRODUCTION

1.0 Introduction

Self-Harm is a complex, multifaceted and diverse phenomenon in the realm of mental health. Self-Harm (SH) is defined as deliberate acts of self-injury without planning to suicide (Klonsky, 2011). SH, a coping mechanism or a method of conveying internal distress is often driven by emotional suffering (Plener et al., 2015). Self-harming behaviors such as burning, beating, or cutting oneself serve as a way to conceal the intense psychological distress and is a clear signal of extreme mental suffering and a cry for help, indicating that an individual is struggling to manage intense emotions.

Among Emerging adults (EA) exclusively, the incidence of SHB is concerning. The years between the twilight of puberty and the middle of one's twenties constitute the developmental period known as emerging adulthood (Arnett, 2000). Significant life changes, more independence, and the quest for one's own identity characterize this formative period. Challenges including becoming financially independent, pursuing higher education or job goals, and forming personal relationships are common outcomes of these transitions (Arnett et al., 2014). The significant changes during this phase of life are causing instability and uncertainty, posing a risk to mental health. EA age is a time of great personal growth and discovery, it is also a period when mental health issues are more prevalent. Suicide attempts may be prompted by the unique pressures felt during this transitional time.

1.1 Emerging Adulthood (EA) as a Critical Developmental Stage

Emerging adulthood (EA) has garnered increased attention in the domains of psychology and sociology due to its distinctive traits and developmental significance.

This stage is distinguished by an investigation of one's individuality, a growth in autonomy, and a protracted period of transition between adolescence and full maturity. It includes the following major features:

1.1.1 Identity Exploration

Emerging adults (EAs) are on a quest for self-identity, experimenting with different roles, values, and life trajectories to figure out who they are and who they want to be. This approach frequently entails trying out new experiences and beliefs (Arnett, 2001).

1.1.2 Autonomy and Independence

EAs try to be self-sufficient from their parents or caretakers. This need for autonomy extends to decisions about school, employment, living circumstances, and relationships (Arnett, 2004).

1.1.3 Life Transitions

This life phase is highlighted by substantial life transformations such as excelling further to higher education, beginning a profession, and creating intimate relationships. These changes present a distinct set of difficulties and opportunities (Arnett, 2004).

1.1.4 Psychological Turmoil

Along with potential for development, emerging adulthood is marked by emotional and psychological upheaval. Uncertainty, identity confusion, and greater emotional sensitivity may plague young adults with vulnerability (Grosz et al., 2016).

Emerging adulthood is a developmental period in which people are significantly vulnerable to mental health issues. Self-harm activity frequently emerges during this period as a sign of underlying psychological pain and emotional instability.

The stresses of seeking education, work, and personal relationships might aggravate sensitivity to self-harm, making this demographic an important subject for research and intervention.

1.1.5 ACES and its Influence

ACEs, refer to childhood adversities, have appeared as substantial constituent that has an influence on the mental-wellbeing of individuals throughout their life-spans. According to Felitti et al. (1998), ACEs encompass a wide-ranging spectrum of distressing childhood experiences comprising corporal or emotive abuse, abandonment, dysfunctional home dynamics, besides exposure to drug addiction or mental illness within the family. It is possible for these encounters to exert enduring influence on a one's psychological fitness as well as their general well-being. Multiple studies conducted by Nelson et al. (2017) and Hughes et al. (2017) have consistently shown the substantial and enduring impression of ACEs on physical and intellectual health, leading to increase the susceptibility to depression, anxiety, substance abuse, and suicidal tendencies. It is possible for repressed childhood trauma to emerge and hit with the developmental problems of emerging adulthood, which is a period when the repercussions of ACEs linger throughout emerging adulthood ((Babad et al., 2020). As a maladaptive method of dealing with their emotional distress, EAs who have had ACEs are more inclined towards self-inflicted damage.

1.2 Background of the Study

An intriguing and pressing topic in contemporary mental health research and treatment is the increase in adult self-harm behavior. Encompassing various deliberate self-harm (DSH) or self-poisoning actions, often employed as a way to cope or as an indication of underlying psychological turmoil (Klonsky, 2011). During the developmental stage

of emerging adulthood, which typically spans from late adolescence to the mid-20s according to Arnett (2000), individuals face unique challenges and stresses while transition from adolescence to full adulthood. EAs are in a phase where they are discovering themselves, pursuing further education or career aspirations, and establishing independent living situations, all contributing to the intricacies of their social and psychological surroundings. These modifications may heighten the chances of engaging in SHB due to their alignment with the emotional upheaval and developmental traits of this life stage. SH is a prevalent issue during adolescence and early adulthood because of its frequent occurrence and negative outcome. In most cases, there will be a gradual deterioration in SHB, but a significant proportion will persist in this chronic manner into later years (Barrocas et al., 2015). SH has been identified the most potent among other predictors of effective suicide (Hawton et al., 2003) and attempted suicide (Guan et al., 2012), regardless of suicidal intent. Regarding prevention and treatment, it is critical to identify correlates and predictors of these maladaptive behaviors in diverse samples.

Preventing SHB from becoming chronic problems may be facilitated by identifying risk behaviors that are typically overlooked by utilizing community samples to identify predictors (Baetens et al., 2014).

Victims of sexual assault violence and child sexual abuse (CSA) are prevalent issues with well-documented, detrimental long-term effects. The World Health Organization (WHO) defines CSA as the involvement of young children in sexual activities that they do not fully understand, cannot consent to, or are not prepared for developmentally, and goes against societal laws or norms. Child sexual abuse is defined as any form of engagement between a minor and an adult or another minor in which the former, who is older takes advantage of their position of trust or power to

fulfil their own needs (WHO, 1999). Teens who are victims of sexual abuse are more probable to attempt suicide and engross in SHB (Soylu et al., 2022). By identifying SH risk factors, it is possible to prevent potentially fatal behaviors.

This study is an attempt to add to the corpus of knowledge previously available on the correlations and determinants of SH, by examining this subject in populations of EAs in Pakistan and providing a prospective method of investigation. There is a wide range of terminology that is linked with SH, each of which involves a distinct conceptualization. Depending on the sample of the research, the conceptualization that was shown to be the most useful was evaluated.

Instances of abuse, bullying, or family disruptions are considered ACEs and have been identified as solid gauges of impending MH issues supported by an accumulating corpus of research. According to estimates, the prevalence of MH disorders such as depression, drug addiction, and behaviors that cause injury to oneself is at least twice as common among those who suffered any kind of adversity throughout their childhood, including but not limited to abuse of any type, bullying, and inadequate parenting. Even while ACEs are recognized as being noteworthy meant for subsequent mental health conditions, there is a very little amount of information available about the parts of ACEs that have the most significant impact.

Initially ACEs are simply dichotomized and summed up into cumulative scores, which serve as the foundation for a great deal of study. The assumption that every ACEs function via the same mechanisms and contributes equally to the desired result is the foundation upon which this strategy is built. More study is being done to investigate the association among particular ACEs and MH. This research primarily focuses on the correlation between adverse childhood experiences (ACEs), and mental

health that lead to self-destructive behaviors among the emerging adults. The SHB of adolescents in addition to EA, whether they are suicidal (SI) or non-suicidal (NSSI), provide a huge challenge for both the institutions that they are a part of and their families. In spite of this, there are not enough recommendations for controlling NSSI at the moment, especially in the context of Pakistan and other developing nations, which includes school-based treatments. These recommendations should detect SSI and NSSI behavior between school, college pupils, as well as the nature of the problem and the proper time for notifying their parents of the behavioral issue. Additionally, these guidelines should also define the nature of the problem. The present research is expected to investigate the impact of various ACEs on mental well-being and self-harm in later life. With the help of this study, policymakers and law enforcement will be effectively pressured to prioritize primary prevention and control. This will be accomplished by mandating not only the presence of school psychologists in elementary schools, colleges and university campuses at all levels, but also mandatory premarital counselling on healthy relationships and effective parenting.

1.3 Research Gaps and the Need for This Study

Although there is an increasing amount of research on SHB and ACEs individually, there is still a significant gap in understanding the intricate interaction between these two factors among emerging adults. Current research has mainly concentrated on growing adults, resulting in a lack of comprehension of self-harm behaviors during this developmental stage. Furthermore, although ACEs have been extensively studied regarding their impact on mental well-being, further research is necessary to explore how ACEs directly affect self-harm behaviors (SHB) during the critical period of emerging adulthood.