

Predicting the Depression Symptoms by Childhood Traumas in Male Students

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Abstract

The purpose of this study was to predict the depression symptoms in male students by childhood traumas. The research method was descriptive correlational. The sample size consisted of 310 students were selected by multi-stage random sampling and answered to the Childhood Trauma Questionnaire and Children's Depression Inventory. Data were analyzed through the Pearson correlation and standard regression. The results showed that childhood trauma variables (emotional abuse, physical abuse, sexual abuse, emotional neglect and physical neglect) predict student depression significantly. The emotional abuse and physical abuse predicted student depression significantly but physical neglect, emotional neglect and sexual abuse did not. Findings of this study support the significant role of emotional abuse and physical abuse on depression symptoms. Therefore, considering the childhood trauma is recommended to clinicians in the treatment of student depression.

Keywords: Childhood trauma, depression symptoms, students

Introduction

Depression is a common health problem There is evidence to suggest that students are at higher risk of depression, despite being a socially advantaged population. According to some theorists, depression is caused by traumatic experiences and childhood traumas (Linehan, 1993). She believes that traumas occur when children's private experiences are responded with irregular, inappropriate and intense responses from others. According to Linehan (1993) childhood traumas lead to psychological disorders through the emotional invalidation and experiences. In his opinion, abuse and neglect are examples of severe emotional invalidation. According to Bernstein, et al. (2003) childhood traumas have the following five components: emotional abuse (hurts a child's feelings through harsh words or behaviors), Sexual abuse (refers to unwarranted sexual behavior or conducts toward a child by an adult), physical abuse, (hurts a child's body), emotional neglect (ignores a child's psychological needs), and physical neglect (refers to neglecting and failing to provide basic physical care to a child, such as preparing food). Previous studies have suggested that childhood trauma can cause numerous negative outcomes over a long period. It increases the risk of a wide range of psychological problems, such as depressive disorders (Vibhakar, et al., 2019; Kuzminskaite,

et al., 2021). Of course, a review of the research literature indicates inconsistent results and there is a research gap in the components of childhood traumas in predicting depression (Sekowski, et al., 2021; Glickman, et al., 2020). In other words, it is not clear which component of childhood traumas causes depression. Therefore, the present study investigated this overall hypothesis: The five components of childhood traumas predict depression symptoms in students.

Method

The present study method was a descriptive-cross-sectional (correlation) study. The statistical population consisted of all male students in elementary and secondary public high schools of Rabat Karim during the academic year of 2020-2021. A sample of 310 students were selected by multi-stage random sampling method. For this purpose, from 10 schools in Rabat Karim, 4 schools with two classes from each school were selected randomly (with age mean= 15 ± 1.76), but, it was reduced to 282 students, by applying some criteria as well as incomplete questionnaires. The students completed below tools. The Data were analyzed through the Pearson correlation and standard regression by SPSS21 software.

Tools

Childhood Trauma Questionnaire-Short Form (CTQ-SF): The CTQ-SF was developed by Bernstein, et al. (2003). It has 25 items with 5 scales and the 5- points Likert type responses (emotional, sexual, physical abuse, emotional, and physical neglect). Bernstein, et al. (2003) reported the internal consistency with Cronbach's alpha ranging 0.81 to 0.94 for subscales and 0.85 for total score. In the present study, Cronbach's alpha was 0.89 for total score.

Children's Depression Inventory (CDI): The CDI was developed by Kovacs (1985). It has 27 items with 5 scales and the 3- points Likert type responses (negative mood, interpersonal problems, ineffectiveness, anhedonia, negative self-esteem). Kovacs (1985) estimated the internal consistency with Cronbach's alpha ranging 0.65 to 0.83 for subscales and 0.86 for total score. In the present study, Cronbach's alpha was 0.79 for total score.

Results

Mean and standard deviation of variables are presented in Table 1. As Table 1 shows, the mean variables of emotional abuse, sexual abuse, physical abuse, emotional neglect, physical neglect, and depression are 7.19, 5.83, 5.57, 9.23, 8.48, and 14.80, respectively. The results of correlation coefficient in Table (1) showed that correlation ranged from 0.26 to 0.64 ($P < 0.01$).

Table 1: Descriptive indicators and correlation matrix between research variables (n=282).

Variables	M/SD	1	2	3	4	5	6
1.Emotional Abuse	7.19±2.94	-	0.54**	0.44**	0.51**	0.47**	0.43**
2.Sexual Abuse	5.83±2.38	-	-	0.51**	0.34**	0.26**	0.32**
3.Physical Abuse	5.57± 1.35	-	-	-	0.33**	0.30**	0.38**
4.Emotional Neglect	9.93±3.79	-	-	-	-	0.64**	0.36**
5.Physical Neglect	8.48±2.88	-	-	-	-	-	0.32**
6.Depression	14.80±10.09	-	-	-	-	-	-

** P<0.01

Finally, the standard regression results (Table 2) showed that the linear combination of the research variables predict students' depression ($F = (5,276) 14.18; P<0.0001$). As Table 2 shows, only emotional abuse ($\beta=0.21$) and physical abuse ($\beta=0.17$) can predict students' depression ($P<0.05$), but physical neglect, emotional neglect and sexual abuse did not, ($P>0.05$).

Table 2: Coefficients of childhood traumas in predicting students' depression.

Variables	B	Standard Error	β	t	Sig
Emotional Abuse	0.72	0.27	0.21	2.64	0.009
Sexual Abuse	0.43	0.40	0.08	1.8	0.280
Physical Abuse	1.26	0.56	0.17	2.25	0.026
Emotional Neglect	0.32	0.22	0.12	1.47	0.140
Physical Neglect	0.27	0.28	0.08	0.97	0.330

Discussion and Conclusion

The abuser/invalidating families have three features. First, it responds in a critical, punitive, or dismissive way to the emotionally vulnerable child, thereby exacerbating the child's emotional vulnerability. Second, it responds erratically to extreme emotional displays, reinforcing them intermittently. Third, it overestimates the ease of problem solving. The invalidating environment fails to teach skills needed to regulate intense emotions. Consequently, the emotional vulnerable individual is vulnerable to psychological disorders such as depression. Physical and emotional neglect and sexual abuse did not predict depression. Since the questions related to sexual abuse are sensitive items in Iranian culture, the participants may be biased in their accurate reporting and this may lead to inconsistent results with other studies. The results of this study cannot be generalized to all students. It is suggested to consider childhood trauma in treatment of depression.

References

- Bernstein, D. P., Stein, J. A., Newcomb, M. D., Walker, E., Pogge, D., Ahluvalia., et al. (2003). Development and validation of a brief screening version of the Childhood Trauma Questionnaire. *Journal of Child Abuse & Neglect*, 72(2), 169-190 .
- Glickman, E. A., Choi, K. W., Lussier, A. A., Smith, B. J., & Dunn, E. C. (2021). Childhood emotional neglect and adolescent depression: Assessing the protective role of peer social support in a longitudinal birth cohort. *Frontiers in Psychiatry*, 12, 1182. Doi:[10.3389/fpsy.2021.681176](https://doi.org/10.3389/fpsy.2021.681176)

- Kovacs, M. (1985). The Children's Depression Inventory (CDI). *Psychopharmacology Bulletin*, 21(4), 995-998.
- Kuzminskaite, E., Penninx, B. W., van Harmelen, A.-L., Elzinga, B. M., Hovens, J. G., & Vinkers, C. H. (2021). Childhood trauma in adult depressive and anxiety disorders: An integrated review on psychological and biological mechanisms in the NESDA cohort. *Journal of Affective Disorders*, 283, 179-191. Doi: [10.1016/j.jad.2021.01.054](https://doi.org/10.1016/j.jad.2021.01.054)
- Linehan, M. M. (1993). *Cognitive-Behavioral Treatment of Borderline Personality Disorder*. New York: Guilford Press.
- Sekowski, M., Gambin, M., Cudo, A., Wozniak-Prus, M., Penner, F., Fonagy, P., & Sharp, C. (2020). The relations between childhood maltreatment, shame, guilt, depression and suicidal ideation in inpatient adolescents. *Journal of Affective Disorders*, 276, 667-677. Doi: [10.1016/j.jad.2020.07.056](https://doi.org/10.1016/j.jad.2020.07.056)
- Vibhakar, V., Allen, L. R., Gee, B., & Meiser-Stedman, R. (2019). A systematic review and meta-analysis on the prevalence of depression in children and adolescents after exposure to trauma. *Journal of Affective Disorders*, 255, 77-89. Doi: [10.1016/j.jad.2019.05.005](https://doi.org/10.1016/j.jad.2019.05.005)

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Conflicts of interest

Authors found no conflict of interest.



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