Research paper

Predicting Melancholic Depression by Mental Pain Mediation: The Roles of Object Relations and Childhood Trauma

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Abstract

The study was aimed to investigate the relationship between object relations, childhood trauma and melancholic depression, with the mediation of mental pain. This was descriptive correlational research. The study population included all teenage girls aged 15 to 18 lived in Kerman, Iran 2022. 500 teens were selected using the voluntary manner, and responded to the Object Relations Scale, Childhood Trauma Scale and Mental Pain Scale. Data analysis was done using Pearson correlation statistical tests and structural equation modeling. The results showed that the model predicting melancholic depression based on the role of object relations and childhood trauma with the mediation of mental pain had satisfactory fit. Also, the indirect effect of object relations and childhood trauma through mental pain on melancholic depression were confirmed. Paying attention to these factors can be a guide for counselors and parents to prevent melancholic depression.
Keywords: Childhood trauma, melancholic depression, mental pain, object relation

Introduction

Depression is a mental health condition that is common in young people and predicts many challenges (Fitzpatrick et al., 2023). Nevertheless, the negative outcomes of depression can vary, based on its different characteristics. Among these characteristics, the most enduring distinction that delineates the various types of depressive disorders, is the severity of its manifestation (Lorenzo-Luaces, 2020). Melancholic depression is a severe and chronic manifestation of clinical depression, that leads to high levels of disability in individuals (Martino, 2022). Freud explains the mechanism of melancholia in such way that in childhood, there was attachment to certain object, but the connection with this object was cut off due to neglect or deprivation. In this way, the negative emotions directed at object return to the individual's ego and it causes depression (Freud, 1917; Özkan, 2020). Therefore, considering severe and lasting consequences of melancholia, investigating its etiology is important. Since increasing the experience of negative emotions and mental pain can aggravate and perpetuate the symptoms of depression, it can play a role in various forms of psychopathology. Accordingly, the present study aimed to test these hypotheses: 1. The model for predicting melancholic depression based on the role of object relations and childhood trauma, mediated by mental pain, has a good fit. 2. Mental pain plays a mediating role in the relationship between object relation and Melancholic depression. 3. Mental pain plays a mediating role in the

relationship between childhood trauma and Melancholic depression. And 4. Mental pain has direct effect on melancholic depression.

Method

The research method was descriptive correlational design. The statistical population was made of all teenage girls aged 15 to 18 lived in Kerman, Iran 2022. A sample of 500 teens were selected using the voluntary manner and responded to research tools. The tools were prepared as an online version, and provided to the participants through links by referring to cultural, educational and entertainment centers. Data were analyzed using Pearson correlation statistical tests and structural equation modeling in SPSS-26 and AMOS-24 software.

Tools

Bell Object Relations Inventory (BORI): This 45-items scale was created by Bell (1995), has 4 subscales, Alienation, Insecure attachment, Egocentricity and Social incompetence, scored on a 5-option Likert scale. Its Cronbach's alpha coefficient reported between 0.78-0.90. The concurrent validities of BORI with SCL-90 scale were between 0.26-0.58. Cronbach's alpha of the scale was 0.78 in this research.

Childhood Trauma Questionnaire (CTQ): This 25-items scale was created by Bernstein et al. (2003), has 5 subscales, Sexual abuse, Physical abuse, Emotional abuse, physical neglect and Emotional neglect, scored on a 5-option Likert scale. Its Cronbach's alpha coefficient reported between 0.79-0.94. The concurrent validity of CTQ with Clinical interview with adults about neglect and abuse was between 0.26-0.58. Cronbach's alpha of the scale was 0.71 in this research.

Orbach & Mikulincer Mental Pain Scale (OMMP): This 44-items scale was created by Orbach and Mikulincer (2003), scored on a 5-option Likert scale. Its Cronbach's alpha coefficient reported between 0.78-0.95. The concurrent validities of OMMP with Beck Anxiety and Depression Scale were 0.64 and 0.50. Cronbach's alpha of the scale was 0.97 in this research.

Sydney Melancholia Prototype Index (SMPI): This 24-items scale was created by Parker et al. (2012), items are clustered into two sets: The A items, worded to accord to the melancholic presentation, and the B items, worded to accord to the non-melancholic presentation, scored on a 5-option Likert scale. Its Cronbach's alpha coefficient for A reported 0.70. The concurrent validity of SMPI with PHQ-9 and GAD-7 Scales was 0.73. Cronbach's alpha of the A items and the scale was 0.73 and 0.87 in this research.

Results

According to the findings of this research, the mean and standard deviation of the age of the participants were 16.77 and 0.68. Given that structural equation analysis relies on Pearson correlation coefficients derived from the sample correlation matrix, it is noteworthy that all correlations reached statistical significance and the highest correlation is between mental pain

and melancholic depression (r=0.63, P<0.01). Furthermore, results pertaining to fit indices indicated the model's satisfactory alignment with the data in this study (CMIN/DF= 4.35, CFI= 0.92, PCFI= 0.74, RMSEA= 0.09 & HOLTER= 123.00). As Table 1, the Bootstrap test results reveal all direct paths of the modified model are significant (P < 0.01) and Figure 1.
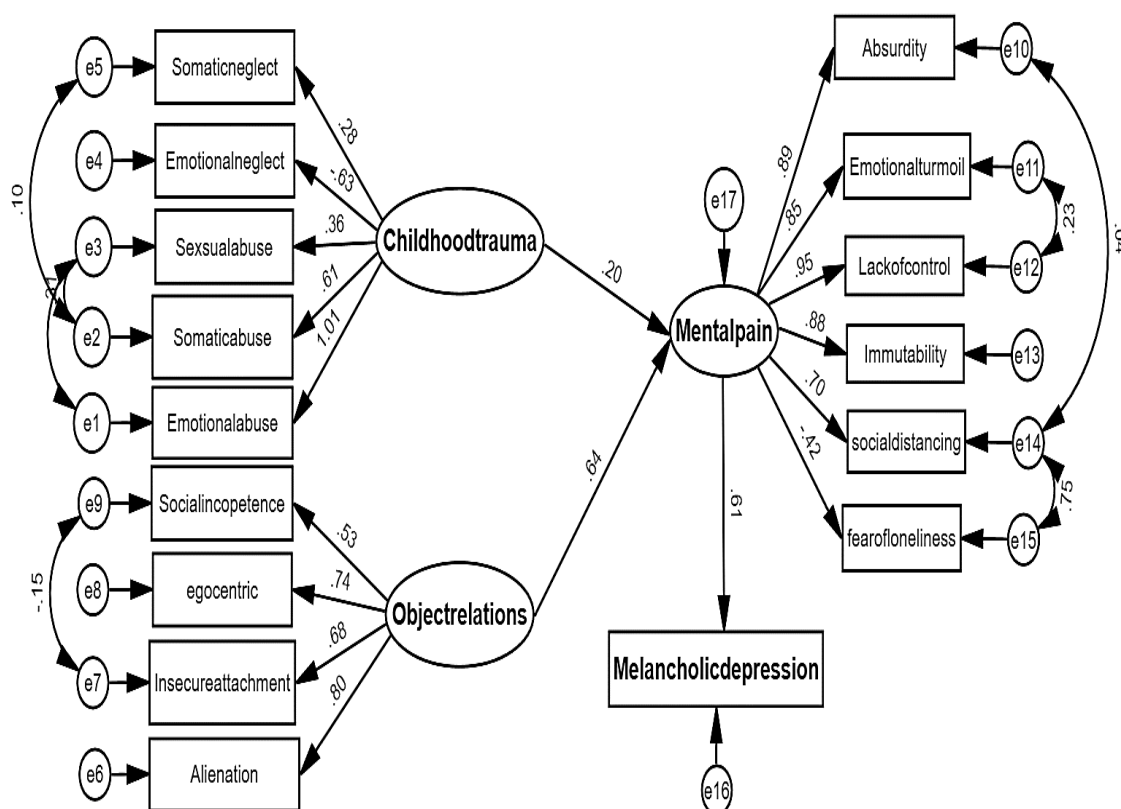

Figure 1. Modified model

Table 1, the Bootstrap direct paths

Variables	Path	Beta	T value	P Value
Childhood trauma ⟶ Mental pain		0.20	4.77	0.01
Object relations ⟶ Mental pain		0.64	12.22	0.01
Mental pain ⟶ Melancholic depression		0.61	14.69	0.01

Discussion and Conclusion

The results showed that the mental pain directly, and object relations and childhood trauma indirectly through mental pain can predict melancholic depression. Thus, examining factors of the formation of mental pain makes people aware from how strong negative emotions appear. The results of the research show Experience of neglect, abuse or deprivation from parents or primary caregivers in childhood can cause frustration of the basic psychological needs that satisfaction in connection with them. Again, absence of sympathetic parents who can help to express and recognize the child's emotions is one of the important grounds of inability to

regulate emotions and increase the experience of negative emotions. Experiencing extreme negative emotions and inability to relieve these emotions is one of the important causes of depression. So, acquire adaptive emotion regulation strategies, can lead to reducing the impact of early adverse experiences in childhood on increasing the likelihood of psychological vulnerability, and have practical implications for preventive interventions in melancholic depression. One of the research limitations was the possibility of memory bias of the participants, when reporting their childhood experiences; Therefore, it is suggested to use other sources of information in future research to collect information related to childhood experiences. Also, the statistical population included teenage girls aged 15 to 18, and this limits the generalization of the findings to people who are at the end of this age range. Therefore, it is suggested that future research should include all age ranges of young people.

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Conflicts of interest

There is no conflict of interest for the authors of the article.