



Original article

Adverse childhood experiences leads to perceived negative attitude of others and the effect of adverse childhood experiences on depression in adulthood is mediated via negative attitude of others

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ABSTRACT

Background: The attachment theory suggests that adverse childhood experiences (ACEs) can have an effect on how individuals perceive other people's attitude towards them. ACEs have also been associated with adult depression. We hypothesised that ACEs associate with perceived negative attitude of others (AoO) and depressive symptoms (DEPS), and that these associations differ between the genders.

Methods: Altogether, 692 participants drawn from the general population completed the Trauma and Distress Scale, as a measurement of ACE and its domains: emotional abuse (EmoAb), physical abuse (PhyAb), sexual abuse (SexAb), emotional neglect (EmoNeg) and physical neglect (PhyNeg); a visual analog scale with the question: "What kind of attitude do other people take towards you?", and the self-report scale DEPS on depressive symptoms.

Results: ACEs, AoO and DEPS correlated strongly with each other. In path analyses, ACE total and all its domains associated directly and indirectly, via DEPS, to negative AoO in the whole sample, and in females separately. ACE total, EmoAb, PhyAb, EmoNeg and PhyNeg associated directly and indirectly, via AoO, to DEPS in the whole sample and in both genders separately. EmoNeg, in all, and EmoAB, in males, had specific associations both with negative AoO and DEPS. Mediation effect via AoO was greater than via DEPS.

Conclusions: ACEs have a direct and indirect, via depression, negative effect on how adult individuals perceive other people's attitude towards themselves. Additionally, negative AoO mediates the effects of ACEs on depression. Childhood EmoNeg associates specifically with negative AoO and DEPS in adulthood.

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1. Introduction

As human beings, we live in social relations from our early childhood onwards. The way we perceive other people and their attitude towards us has a powerful impact on the ways we act at both interpersonal and societal level. According to Bowlby's attachment theory [9], the styles, in which we interpret other people's attitude towards us, have their roots in our childhood. Within interaction with attachment figures (most often with parents), children develop representational models that allow them to predict and interpret the behaviour of attachment figures and view themselves in relation to others. Negative representational models of attachment figures, built during childhood and

adolescence, tend to persist relatively unchanged into and throughout adult life, and can manifest in neurotic symptoms and personality disorders [8]; some people with neurotic or personality problems can produce their own severe life events in response to early negative experiences [15]. According to Rohner [27], parental emotional rejection as a part of the acceptance-rejection syndrome may specifically lead to psychological maladjustment including negative worldview.

Various adverse childhood experiences (ACEs) can distort development of the representational models resulting in insecure or vulnerable attachment styles, such as low self-esteem, poor support and childhood adversity, emotional disorders, depression in particular, and disruption in psychosocial functioning in adulthood [3,5,16,22,25,26]. Negative parenting practices, such as high level of criticism, verbal humiliation and lack of emotional warmth, may lead to dysfunctional attitudes and attribution styles with vulnerability for depression [1,4,10,15]; it is thus possible that insecure attachment styles with dysfunctional attitudes, such as

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perceived negative attitude of others (AoO), may act as mediators between ACE and depression in adulthood.

It has been also found that family environments, with ACEs, are associated with poor mental health, depression particularly [19,20,25,26,34], and that depression may change the way individuals perceive their environment, including other people and their attitude towards themselves [7,31,33]. Thus, it is possible that depression act as a mediator between individuals' ACE and the way they perceive attitude of others (AoO). Depression – more prevalent in females than in males – may moderate the association between ACE and AoO differently in females and males. Therefore, it has been suggested that, e.g. the association between depression and suicidal behaviour should be analysed separately by genders [23].

In a population sample, we aimed to explore the associations between ACEs and individuals' perceived AoO and depressive symptoms (DEPS). We hypothesised 1) that ACEs associate with AoO and DEPS, 2a) that AoO mediates the effect of ACEs to DEPS, 2b) that DEPS mediates the effect of ACEs to AoO, and 3) that these associations vary between females and males.

2. Methods

The study protocol was approved by the ethical committee of the University of Turku and the Turku University Central Hospital.

2.1. Sample

A random, age-stratified sample of 2080 citizens aged 18 years or more was drawn from the general population of South-West Finland. The general sampling rate was 1/100, and, because of their low proportion in the population, 2/100 for people over 70 years. An extensive questionnaire battery was mailed in spring 2008 and re-mailed to non-responders in summer 2008. The questionnaire included written consent and the individuals who had filled it in were accepted as study participants. The response rate for females (41.5%) was higher than that for males (25.3%; Fisher exact: $p < 0.001$). Mean age of responders (42.0 ± 16.95 years) was slightly higher than that of non-responders (39.5 ± 16.37 years; $p = 0.001$).

2.2. Assessments

The questionnaire included items on participants' socio-demographic background and previous care for mental problems, including treatment visits for mental problems to primary and

psychiatric care. The questionnaire also included a visual analog with the question: "What kind of attitude do other people take towards you?" The ends of the visual analog were: 0 = very negative and 10 = very positive. This question was used as an indicator of perceived attitude of others (AoO) and its distribution is shown in Fig. 1. The attitude question was taken from the PROD screen [18] developed for screening people with (cognitive) prodromal symptoms of psychosis. In a prospective study, perceived negative AoO predicted onset of psychosis in clinical high-risk to psychosis patients [29].

Depressive symptoms were assessed by the depression screening instrument DEPS [30]. It consists of 10 questions rated on a Likert scale as: 0='not at all', 1='to some extent', 2='rather much' and 3='very much'; their sum (range 1–30) indicates number of depressive symptoms during the past month. The DEPS, with Cronbach's $\alpha 0.88$, was originally developed for the use of general practitioners. In a sample of patients attending primary care at a cut-off of >8 , the DEPS revealed a sensitivity of 74% and a specificity of 85% for clinical depression [30].

ACEs were assessed by the Trauma and Distress Scale (TADS) [24]. At the time of the present study, the TADS was the only available ACE instrument in Finnish. It includes 43 items on childhood trauma and adversity rated for their frequency in a Likert format: 0='never', 1='rarely', 2='sometimes', 3='often' and 4='almost always'. Five TADS domain scores can be calculated by summing their respective items: 1. emotional abuse (EmoAb; 5 items), 2. physical abuse (PhyAb; 5 items), 3. sexual abuse (SexAb; 5 items), 4. emotional neglect (EmoNeg; 5 items), and 5. physical neglect (PhyNeg; 4 items), as well as the TADS total score (sum of all five domain scores). The TADS, with Cronbach's $\alpha 0.92$, and its five core domains proved to be a valid, reliable and clinically useful instrument for assessing retrospectively reported childhood traumatisation [31].

2.3. Statistical analyses

First, means of AoO and DEPS scores were calculated by background characteristics, as well as ACE scores by gender, and differences were tested by t-test. ACE domain and DEPS scores were correlated (Spearman's rho) with AoO. Because the dependent variables, DEPS and AoO, were skewed, their logarithmic transformations were used in multivariate path analyses.

In multivariate analyses, a PROCESS macro in SPSS (model template 4) by A. F. Hayes [17] was used. In cross-sectional

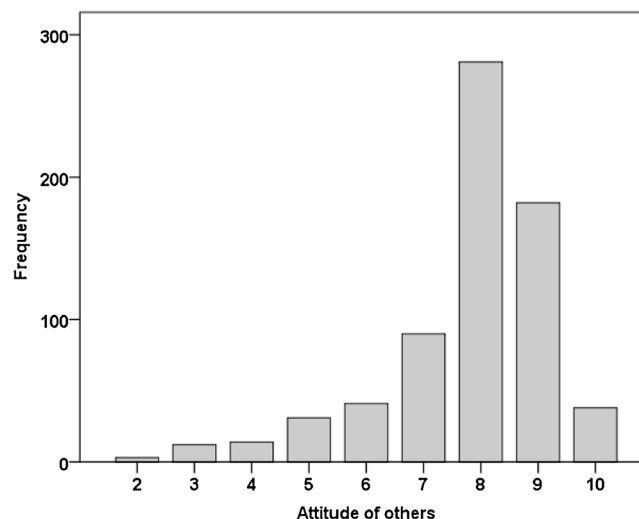


Fig. 1. Distribution of attitude of others scores (1=Extremely negative, 10= Extremely positive).

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