# Assessment of Depression and related Psychological Trauma among Children

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Psychological trauma is an outcome of an overwhelming event causing intense distress. surpassing the individual's resilience capacity. Instances include domestic violence, abuse, physical trauma or catastrophic events. It is to consider that not only victimized subject, but a witness can much undergo psychological trauma. To assess depression score through Children depression inventory and related psychological trauma in children. Purposive sampling was done. Four subjects under the age group of 10-12 years were considered for the study. Interview of the subjects and their respective parents were recorded. Subjects were later assessed on Children's depression inventory. Subjects undergoing psychological trauma had significant scores in children's depression inventory. Subjects experiencing domestic violence (witnessing and victimised), emotional and physical abuse, were found symptomatic of depression. They exhibited consistent low mood, irritable behaviour, diminished pleasure, and feelings of worthlessness. Domestic violence, in this research, pertains to family violence, marital abusive relationships of parents, beating and battering of subjects and emotionally abusive relationships. The linking between depression in children and psychological trauma is sustained in this research.

Keywords: Children, Emotional Abuse, Depression, Psychological Trauma.

Wound is a synonym of trauma. The origination of trauma can be biological, physiological or psychological. Experiences of trauma which are already occurred can be recalled and 'felt' at any similar circumstantial instances. These arousing situations may be repetitive in nature, intimidating and overwhelming, thus supports the statement 'Neurons that fire together, wire together'.

Psychological trauma is generally an event, so overwhelming that it causes distress in individuals beyond their resilience or coping mechanisms, as stated by Van der kolk (1995) Resilience is the process of adaptation during adverse situations, trauma, tragedy that may lead to extreme distressing manifestation. Though, resilience is commonly exhibited by individuals, there is significant amount population which is, so called, less resilient. Instances of traumatic events, include situations threatening the life or body integrity, abusive relationships (physical, emotional and sexual), domestic violence, chronic life threatening

illnesses (self or significant family members) or catastrophic events(such as earthquakes). Victimised subjects and witnessing these events may result in psychological trauma (Pearlman & Saakvitne, 1995).

Psychological trauma has a building block effect, prominently in, conglomeration of anxiety and PTSD symptoms than depressive symptoms (Kraemer et al 2016). An important point in experiencing psychological trauma is its magnitude and frequency. These situations may be repetitive but less influencing or impactful but not repetitive. The cumulative (collected) experiences and routinely involvement may define the severity of traumatic experiences.

In a community sample of a developed economy, more than two thirds of children report experiencing a traumatic event by the age of 16. Trauma during childhood, before puberty was related to depressive and post traumatic symptoms, leading to diagnosis of MDD, personality disorders and substance use

disorders (Khoury et al 2010; Weber et al 2008).

Specifically, considering the prevalence of emotional abuse and neglect in children increased their vulnerability towards adult depression than sexual or physical abuse (Powers, Ressler, Bradley 2009). A study found that psychological traumatic events due to conflict zone in Kashmir, led to the development of PTSD in children of that region and this has increased over past two decades (Mushtaq & Mushtaq, 2016). Adolescents exposed to violence were related directly in the manifestation of PTSD, dissociation, depression and anxiety (Singer et al 1995).

A study conducted on women (adult) participants with childhood abuse history found that the participants reported greater number of medical problems and poorer perceived physical well being(Cloitre,Cohel,Edelman & Han 2001). Another similar result suggests that abusive and molestation history during childhood contributed to chronic depression, morbid obesity, marital instability and psychosomatic disorders in adulthood(Felitti 1991; Koss and Heslet 1992)

### Objective of the Study

To assess depression score through Children Depression Inventory (Kovacs, 1992) and related psychological trauma in children

### Method

# Sample

The selection was based on purposive basis. Four Subjects were considered on the basis of emotional and behavioural issues encountered at significant venues, such as, at their homes. These problems were self reported by the subjects and listed by their parent as well. In other words, short listing was done on the basis their dysfunctional emotional and behavioural tendencies. Screening was done by the exhibited behaviour of these subjects in the school. These traits were described by the concerned teachers and parents. Informed consent was obtained from subjects, parents and school authorities.

Following table describes the subjects and category of trauma they experienced.

Subject	Age/ Sex	Psychological Trauma (obtained during interviewing)	
Α	12/F	Emotional abuse, Beating and battering by elder siblings, bullying at school	
В	10/F	Emotional and verbal abuse by grandparents, Beating by parents	
С	10/M	Bullying victim at school, Marital abusive relationship of parents	
D	10/M	Marital Abusive relationship of parents, Alcoholic parent, Socio economic factors.	

#### **Procedure**

The shortlisted subjects and their parents were interviewed in three sessions, where two sessions were individually conducted (a. subject+ psychologist, b. parent+ psychologist) and one was a combined session( subject+ parent+ psychologist). Four subjects were considered for the study. Subsequently, they were assessed by administering Children's Depression Inventory (Kovacs, 1992).

## Findings of the study

Subject	Children depression Inventory Scores	Psychological Trauma (ongoing events)
A	24	Emotional abuse, Beating and battering by elder siblings, bullying at school, Socio economic factors.
В	36	Emotional and verbal abuse by grandparents, Beating by parents, Socio economic factors
С	15	Bullying victim at school, Marital abusive relationship of parents
D	14	Marital abusive relationship of parents, Alcoholic father, Socio economic factors.

The above table represents the corresponding scores of subjects on children's depression inventory. All the subjects were symptomatic of

Depression, as evident through the Childhood Depression Inventory assessment. Depending of the severity of the scores, functional and social impairment was also present as stated by the subjects.

### **Results and Discussion**

Psychological traumatic events during childhood have a crucial role in development of psychiatric disorders during childhood as well as adulthood. A traumatic event can range from physical trauma hampering the survival integrity to abusive relationships. Victimising and witnessing a psychological trauma has varied degree of impact on children. PTSD, dissociative disorders are few of the mental illnesses diagnosed in patients who had encountered a psychological trauma.

Studies emphasise that population of children who face adversities and traumatic events are comparatively more vulnerable towards anxiety disorders such as PTSD than mood disorders. This study finds that subjects under psychological trauma had major depressive disorder. These traumatic episodes were ongoing in the subject's current routine. The category of psychological trauma can be detailed as:

- a. Emotional and verbal abuse Parents and other significant family members such as siblings and grandparents were using abusive language to address the subject. All the four cases had emotional and verbal abuse in common.
- Physical abuse Beating and battering of the subject by elder siblings and parents (most of the cases by mother). All the four cases had physical abuse in common.
- c. Parent marital relationships- Parents had marital conflict, Physical abuse from male partner towards female with inclusion of verbal abuse trauma. (Two cases belonged to parent marital conflicts)
- d. Substance abuse by either parent (Alcoholic parent) Out of four cases, One (Male parent) belonged this category.
- e. Socioeconomic Factors Low socio economic sources were present in three cases.

It is found that all the four subjects have emotional, verbal and physical abuse as a common feature. Such psychological trauma seems to be directly linked in the development of depression in subject. This is supported by a recent study highlights that emotional abuse is linked to development and manifestation of depressive symptoms (Christ et al, 2019). In other words, the population that is routinely undergoing the psychological trauma in terms of abuse may become prone towards the manifestation depression. The awareness about mental health and mental illness among children, adolescents as well as their parents/ guardians in educational institutions/community centres can play a role in early identification of these issues. Intervention by psychologists/ counsellors/teachers can play a vital role in managing the abuse at the first level. Thereafter the management techniques can be further implied.

#### Conclusion

traumatic event may lead This psychological disturbances. study outlines the effect of psychological trauma in development of depression in children. Studies are evident in showing that psychiatric illness may be manifested as a result of such events. Anxiety disorders, Mood disorders are commonly associated with repeated exposure to situations involving psychological trauma. The mark of major depressive disorder is sustained in this research. Along with this, the literature available suggests that range of perceived physiological health problems also exist. It is evident that adults with childhood traumatic experiences are inclined to poor perceived health. One of the famous studies suggests that such subjects tend to use health services at a higher rate than those who did not experience repeated exposure to psychological trauma. The conclusion can be summed up as a repetitive, impactful and frequency of psychological trauma determines its effect on the individual, leading to short as well long term psychiatric illness including major depressive disorder.

#### References

- Christ C., De Waal, M.M., Dekker, J.M., Van Kujik,L., Van Schaik, D.J.F., Kikkert, M.J., Gaudriaan, A.E., Beekman, A.T.F., Messman,T.L.(2019) Linking childhood emotional abuse and depressive symptoms: The role of emotion dysregulation and interpersonal problems. *PLoS One. 2019 Feb 14;14*(2):e0211882. doi: 10.1371/journal. pone. 0211882. eCollection 2019.
- Cloitre M, Cohen L, Edelman RE, Han H. Posttraumatic stress disorder and extent of trauma exposure as correlates of medical problems & perceived health among woman with childhood abuse. *Women and Health*. 2001;V 34(3).
- Felitti VJ.,Long term medical consequences on incest, rape and molestation. 1991; Mar 84(3);328-31. [PubMed 2000519]
- Khoury L, Tang YL, Bradley B, Cubells JF, Ressler KJ. Substance use, childhood traumatic experience and Posttraumatic Stress Disorder in an urban civilian population. *Depress Anxiety*. 2010 Dec; 27(12): 1077–1086. doi: 10.1002/da.20751 [PMCID: PMC3051362]
- Koss MP, Heslet L. Somatic consequences of violence against women. *Archives of family medicine*. 1992; Sep 1(1); 53-9 [PubMed 1341588]
- Kovacs M. The Children's Depression Inventory: Manual, Multi-Health Systems, North Tonawanda, NY, USA, 1992.
- Kraemer B, Schumacher S, Winkel B, Imboden C, Wittman L. The building block effect of prior trauma for psychological outcome in victim of a natural disaster. *European Psychiatry*. 2016: V 33,Supplement,s214-215. Available from: https:// doi.org/10.1016/j.eurpsy.2016.01.520

- Mushtaq R, Shah T, Mushtaq S. Post-traumatic Stress Disorder (PTSD) in Children of Conflict Region of Kashmir (India): A Review . J Clin Diagn Res. 2016 Jan; 10(1): VE01–VE03. Doi: 10.7860/ JCDR/2016/11766.7152 PMCID: PMC4740687
- Pearlman LA, Saakvitne KW. Trauma and the therapist: Counter transference and vicarious traumatisation in psychotherapy with incest survivors. 1995. NY: WW Norian
- Powers A, Ressler KJ, Bradley RG. The protective role of friendship on the effects of childhood abuse and depression . *Depress Anxiety.* 2009;26(1):46-53. doi: 10.1002/da.20534.
- Presidential task force on PTSD and Trauma in children and adolescent.2 008. Available from: http://www.apa.org/pi/families/resources/children-trauma-update.aspx
- Singer MI, Anglen TM, Song LU, Lunghofer L.1995. The Journal of American Medical association. Adolescents' exposure to violence and associated symptoms of psychological trauma. *JAMA*. 1995;273:277–482
- The road to resilience. Available from http://www.apa.org/helpcenter/road-resilience.aspx
- Van der Kolk B, Fiesler R. Dissociation and the fragmentary nature of traumatic memories overview and explanatory study. *Journal trauma stress*. 1995;oct 8(4);505-25.
- Weber K, Rockstroh B, Borgelt J, Awiszus B, Popov T, Hoffmann K, Schonauer K, Watzl H, Pröpster K. Stress load during childhood affects psychopathology in psychiatric patients. *BMC Psychiatry.* 2008 Jul 23;8:63. doi: 10.1186/1471-244X-8-63.

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