



Pathway from Childhood Trauma to Nonsuicidal Self-Injury in Adolescents with Major Depressive Disorder: The Chain-Mediated Role of Psychological Resilience and Depressive Severity

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Abstract

This study aimed to examine the chain-mediating role of psychological resilience and depressive symptoms on the pathway from childhood trauma to non-suicidal self-injury (NSSI) among adolescents with major depressive disorder (MDD). A total of 391 adolescents with MDD were recruited in the present study. The childhood trauma, depressive symptoms, psychological resilience and NSSI in these patients were evaluated.

Our results showed that the childhood trauma severity was negatively correlated with psychological resilience, but positively correlated with depressive symptoms and NSSI severity in MDD adolescents. The three steps hierarchical regression showed that childhood trauma, psychological resilience and depressive symptoms all obviously associated with NSSI frequency in patients. Furthermore, the chain-mediation analysis revealed that psychological resilience and depression serially mediated the relationship between childhood trauma and NSSI in adolescents with MDD.

Intervention targeted at improving resilience and depression may reduce childhood trauma severity associated with NSSI risk in adolescents with MDD.

Introduction

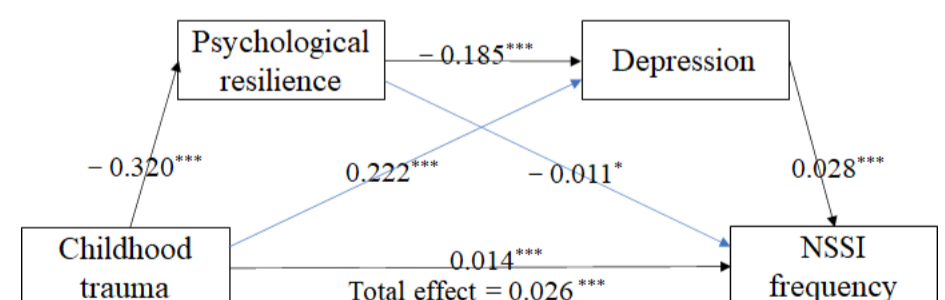
NSSI has become a serious public health problem among adolescents. Existed studies demonstrated that childhood trauma could significantly affect the NSSI behavior by directly influencing and mediating effects of depression, but not all individuals suffered from childhood trauma develop depressive symptoms and commit NSSI, thus, suggesting some other factors may play promoting roles on this pathway. It is supposed that the psychological resilience is gradually generated and developed as an individual experiences and responds to stress, and may play an important role in the experience and management of depression and NSSI. Hence, our study aimed to examine the chain-mediating role of psychological resilience and depressive symptoms on the pathway from childhood trauma to NSSI among adolescents with MDD.

Methods

A total of 391 adolescents with MDD were recruited from the Department of Psychology at the First People's Hospital of Wenling, Zhejiang. The Chinese version of Childhood Trauma Questionnaire—Short Form (CTQ-SF), the Chinese version of the symptoms check list-90 (SCL-90), the Chinese version of Conner-Davidson Resilience Scale (CD-RISC), and the Ottawa Self-Injury Inventory Chinese Revised Edition (OSIC) were used to evaluate the childhood trauma, depressive symptoms, psychological resilience and NSSI, respectively.

Results

Among 391 study participants, 238 (60.87%) had NSSI in the past month, and 153 did not have NSSI in the past month (39.13%). These with NSSI had greater childhood trauma, more serious depressive symptoms, but lower psychological resilience than patients without. The stepwise logistic regression analysis identified that age, childhood trauma and depressive symptoms could independently predict the occurrence of NSSI, and the three steps hierarchical regression showed that childhood trauma, psychological resilience and depressive symptoms all obviously associated with NSSI frequency in adolescents with MDD. there was a chain-mediated role of psychological resilience and depressive symptoms on the relationship between childhood trauma and NSSI in adolescents with MDD (Figure below).



Conclusion

Our findings provided evidence suggesting that the psychological resilience may be a potential avenue for reducing the impact of childhood trauma on depressive symptoms and NSSI risk in adolescents with MDD.