

The Mediating Role of Depression between Childhood Trauma and Intimate Partner Violence

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ABSTRACT

Previous studies indicate that childhood trauma results in depression and intimate partner violence. The present study aimed to investigate the relationship between childhood trauma and intimate partner violence with depression as the mediator. The method used in this research would be a quantitative correlational method, using Process by Hayes on SPSS for mediation. This study required participants ($N = 1002$) to complete an online questionnaire using Google Forms. The participants' characteristics requirements were 18-30 years old male and female, have experienced any sorts of childhood trauma and intimate partner violence (dating, cohabiting, marriage). The questionnaires used in this study were *Childhood Trauma Questionnaire* (CTQ), *Center for Epidemiologic Studies Depression Scale* (CES-D), and *Conflict Tactics Scale 2* (CTS2). The results of this study indicate that depression has a significant effect as a mediator ($p = .000$) between childhood trauma and intimate partner violence.

Keywords: Depression, Learned Helplessness, Childhood, Trauma, Intimate Partner Violence, Relationship.

1. INTRODUCTION

Intimate Partner Violence (IPV) refers to any sorts of violence perpetrated by an intimate partner in a relationship including physical, sexual and psychological [1]. IPV could occur in both dating relationships and in marriage (domestic violence). According to the World Health Organization [2] nearly a third of the women worldwide have suffered from physical and/or sexual violence by their partners. The National Human Rights Organization KOMNAS also found 299.911 cases of violence in 2021 in Indonesia [3]. In addition, they also found that 34% of the institutions reported that there has been a dramatic increase in domestic violence cases as well as dating violence since the start of the pandemic in 2020.

One of the factors which contribute to IPV in relationships is due to social norms. This is due to the fact that when individuals are surrounded by those around them who persist in violent relationships because of the cultural norm, they are more likely to stay in relationships with abusive partners. Similarly, social learning theory [4] also indicates that individuals learn how to behave and act through their observations, especially from those who are considered as role models to them. In addition, individuals who witnessed parental violence, are more

likely to become victims of IPV in adulthood [5]. Thus, the abusive relationships that they observe in relationships or what they have experienced in childhood such as childhood trauma, is used as a basis for life learning and when in relationships [6]. Furthermore, individuals, particularly women who have experienced violence in childhood such as being beaten by their parents have a higher chance of being beaten by their partners [7].

Childhood trauma is experienced as a result of violence or abuse by parents or caregivers. There are various forms of childhood trauma such as physical abuse, sexual abuse, psychological abuse and neglect. Approximately 13-66% of individuals who have experienced any sorts of abuse during their childhood, are diagnosed with psychiatric disorders in adulthood [8]. Numerous studies have found that various psychological disorders are associated with exposure to childhood trauma such as posttraumatic stress disorder (PTSD), eating disorders, personality disorders and depression [9,10,11].

Based on the Bowlby's attachment theory, individuals' interactions with their parents in childhood would be the foundation of how they would interact with their partners in adulthood [12], particularly the

mutualistic relationship between the mother and her child. Thus, traumatic experiences such as sexual abuse or violence experienced by a child, would have a massive impact in how a child would interact with other people [13]. Unpleasant childhood experiences could also impair the child's ability to trust others [14], especially since the people that they should trust the most including the parents have betrayed them by doing abusive actions towards them.

One of the main consequences of childhood trauma is depression. Depression refers to a psychological disorder in which individuals feel sad, gloomy, experiencing pessimistic thoughts continuously, feelings of worthlessness, reduced ability to think and have recurring thoughts about committing suicide [15]. Vulnerability Stress Adaption Model [16] assert that individuals who have psychopathologies (depression, anxiety, etc.) are more likely to have poor relationships quality compared to those without psychopathologies.

According to the learned helplessness theory by Seligman [17], when individuals are exposed to repeated trauma and their actions did not seem to make any difference, this results in individuals experiencing helplessness and eventually learn to be helpless in situations that actually have a solution (e.g. violent relationships). Although the learned helplessness theory does not always necessarily describe depression, helplessness is one of the main characteristics of depression. Additionally, individuals with depression tend to have self-blame attribution in relationships [18]. Therefore, individuals with depression are more susceptible to experiencing IPV.

A systematic review [18] also found that although there is no personality pattern that causes someone to become a victim of IPV, individuals with personality traits such as having a low self-esteem, isolated from family and friends, dependency (economically and emotionally), submissive, insecurity and have experienced childhood abuse were more vulnerable to become victims of IPV and more likely to stay in abusive relationships.

Despite the evidences which suggest that childhood trauma results in depression and IPV in adulthood, there has not been any researches, particularly in Indonesia, regarding the role of depression as a factor which links the likelihood of individuals who have experienced childhood trauma and experiencing IPV in adulthood. There are numerous researches which found depression as the result of childhood trauma and IPV, yet most of these researches refer depression as an outcome rather than having a role itself.

1.1. Method

This study used a quantitative method with a correlational research design. This study required participants to take part in one online questionnaire through google form link. Measurements include:

1.1.1. Childhood Trauma

Childhood Trauma Questionnaire (CTQ) [19] which has been translated to Indonesian [20] was used to measure childhood trauma experienced by participants. CTQ consists of 28 item and measured 5 dimensions, including emotional abuse, physical abuse, sexual abuse, and physical neglect. The 3-item scale range from not true at all to very often true. Since this version has an additional three items on the questionnaire known as the minimization/denial scale (item No. 10, 16 and 22), thus those three items were not included in the final score. The scale has an overall reliability up to a respectable level ($\alpha = 0.707$).

1.1.2. Depression

Center for Epidemiologic Studies Depression Scale (CES-D) [21] was used to measure participants' depressive symptoms. The dimensions measured were depressed affect, positive affect, somatic and interpersonal. The 4-item scale measures the depression ranging from 0 as rarely or not at all (less than a day) to 3 indicates most or all the time (5-7 days). In addition, the overall reliability of the CESD was good ($\alpha = 0.933$).

1.1.3. Intimate Partner Violence

Conflict Tactics Scale Revised 2 (CTS-2) [22] was used to measure the intimate partner violence experienced by participants, in particular the CTS2 which has been translated to Indonesian [23]. CTS2 consists of physical, psychological, sexual and negotiation dimensions. The CTS2 which has been adapted consists of 46 items, in which 23 were favorable items (perpetrator) and 2 unfavorable items (victim). Initially, the CTS2 has an overall reliability of $\alpha = 0.416$. However, 5 items were deleted (unfav8, fav5, fav 13, fav19 dan fav23) which results in an acceptable reliability ($\alpha = 0.642$).

Statistical Analysis

All data were analysed using SPSS (SPSS Inc., Chicago, IL, USA), particularly Process by Hayes ('processmacro.org' macro v2.14.) for the mediation analysis. Descriptive statistics were used to determine the characteristics of the sample.

2. RESULTS

The participants ranged in age from 18 to 30. The majority of participants were female (79%) compared to male (21%). The majority of the participants who have experienced IPV were 18 years (14.5%) and 20 years (13.6%), have not gotten married (80.9%), had high school education (62.5%), students (42%), lived with family (64.1%) and have only been in a relationship with the perpetrator for less than a year (44.2%).

The results also indicate that the most common type of childhood trauma experienced by participants were both physical abuse (31.4%) and sexual abuse (27.5%), whereas physical neglect was the least commonly experienced childhood trauma (0.6%).

The Pearson's Correlation table for all of the variables and dimensions are presented in Table 1. IPV, depression and childhood trauma were positively correlated ($p < .01$). However, IPV is only significantly correlated with sexual abuse within the childhood trauma dimension. Thus, individuals who have experienced sexual abuse during their childhood, highly correlated with the tendency to experience IPV in adulthood ($p < .01$). IPV is also significantly correlated with all of the dimensions within depression, which suggests that the more individuals experience depression, the higher their chances are on experiencing IPV.

Childhood trauma significantly correlates with almost all dimensions except psychological aggression and sexual violence within IPV ($p > .05$). In addition, childhood trauma has the highest correlation with emotional abuse experienced in childhood. Thus, the more individuals experience emotional abuse from parents or caregivers, the higher the level of trauma experienced in childhood.

On the contrary, the results indicate that emotional neglect is negatively correlated with childhood trauma, emotional abuse and sexual abuse ($p < .01$). This suggests that individuals do not experience violence such as emotional abuse and sexual abuse, as their parents do not pay attention to them. Similarly, negotiation dimension also negatively correlated with emotional neglect ($p < .05$), which suggests that the higher the negotiation skills that individuals have, the more likely they would be able to overcome issues with their partners.

A mediation analysis using Process by Hayes was performed and the results indicate that childhood trauma significantly explains 21.05% of the variance in depression ($p = .000$). A significant relationship between childhood trauma and IPV were found. Therefore, as childhood trauma increases, IPV also increases. Additionally, mediation effect was found as the direct effect (.4150) is larger compared to the indirect effect (.2437) which suggests that a mediation effect was found.

Overall, the mediation analysis suggests that depression has a significant role as a mediator between childhood trauma and IPV ($p < .01$).

3. DISCUSSION

This research supported the hypothesis that depression has a significant role as a mediator between childhood trauma and IPV. Thus, individuals who have experienced childhood trauma, would experience depression and this contributes to the likelihood of experiencing abusive relationships in adulthood.

According to the developmental psychopathology's perspective, experiences experienced by individuals in childhood, particularly the ones which are related to interpersonal relationships, could have a massive impact in individuals and persists until adulthood [24]. Thus, when individuals experienced childhood trauma such as being physically abused, the experience would be internalized and taught individuals that violence and aggression are an acceptable thing to do in a relationship [25].

The findings of this study supported Seligman's Learned Helplessness theory [17] which claims that when individuals were abused in childhood, the traumatic experience would reduce their abilities regarding what to expect in a relationship [26]. Consequently, depression relates to feeling of worthlessness and helplessness [27], which then makes individuals vulnerable in relationships. As depression results due to a negative core beliefs or schema that individuals have regarding themselves, the world and the future [28], poor parenting has a tremendous impact on the individuals' development of core beliefs [29].

In contrast, individuals are more likely to develop insecure avoidant attachment when they are emotionally neglected by their parents or caregivers. Ainsworth [30] claims that infants with *insecure avoidant attachment* tend to not seek closeness and even avoid their caregivers.

One of the strengths of CTS2 is that it allows researchers to measure both the victim as well as the partner's aggression, particularly since CTS2 is divided into two dimensions both the perpetrator (unfavorable)

Dimensi	Mean	SD	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
IPV	94.974	10.891	1.000															
DEPRESI	57.693	13.305	.022	1.000														
TRAUMA	49.507	5.613	.131**	.352**	1.000													
Emotional Abuse	7.084	2.070	.055	.582**	.665**	1.000												
Physical Abuse	8.680	1.617	.038	-.003	.615**	.248**	1.000											
Sexual Abuse	7.685	2.692	.163**	.395**	.623**	.573**	.093**	1.000										
Emotional Neglect	10.376	2.766	-.018	-.558**	-.107**	-.650**	.185**	-.293**	1.000									
Physical Neglect	8.459	1.289	.008	.037	.419**	.069*	.203**	.084**	.113**	1.000								
Negotiation	24.705	4.223	.705**	.151**	.121**	.080*	.006	.174**	-.076*	.029	1.000							
Psychological Aggression	25.226	4.153	.409**	.046	.032	.040	-.006	.048	-.033	-.004	.177**	1.000						
Physical Assault	26.513	4.839	.553**	.097**	.131**	.060	.065*	.177**	-.026	.015	.262**	-.148**	1.000					
Kekerasan Seksual	15.616	2.985	.505**	.028	.023	.008	-.002	.019	.021	-.022	.298**	.258**	.073*	1.000				
Depressed Affect	9.942	4.871	.087**	.931**	.297**	.544**	-.043	.364**	-.550**	.017	.134**	.048	.065*	.029	1.000			
Positive Affect	5.860	3.133	.107**	.890**	.352**	.525**	.020	.349**	-.463**	.071*	.154**	.048	.093**	.030	.777**	1.000		
Somatic	10.796	4.970	.105**	.950**	.347**	.559**	.014	.397**	-.535**	.032	.154**	.029	.118**	.023	.834**	.784**	1.000	
Interpersonal	3.385	1.810	.082**	.897**	.265**	.516**	-.031	.333**	-.527**	-.016	.121**	.063*	.072*	.034	.831**	.753**	.818**	1.000

Table 1. Correlation table between Childhood Trauma, Depression and IPV.

and victim (favorable). This is particularly helpful for researchers in determining whether the relationship is unilateral (violence only been done by one person) or bilateral (done by both) [31].

The most common type of violence found in relationships would be both-violent couples (54%) compared to one violent person in the relationship (24%) [32]. Although some researchers have found that one of the violence done by one partner, particularly by women, was actually a self defence [33,34], yet women could also be just as violent as men nor men could also claim using violence as a self-defence just to justify their action [35]. Therefore, researchers should be aware of interpreting the results of CTS2.

Another factor which could contribute to IPV would be the influence of cultural socialization, particularly since men and women have been socialized differently growing up based on their gender roles in countries such as Indonesia [36]. This is due to the fact that men are considered to have a more traditional role as a bread wiener and more dominant compared to women [37], whereas women are socialized to have a more passive approach in behaving [38]. As a result, countries which emphasize on the paternalistic role tend to have the highest IPV rates compared to countries which do not have the paternalistic culture [39].

This study has several limitations. One of the limitations would be that there is a possibility that participants have the tendency to underestimate or overestimate their childhood experiences compared to the actual events [40]. Therefore, future researchers are encouraged to do probing in addition to the questionnaires in order to double check participants' past experiences. Moreover, social desirability might have taken place, as the questionnaire was advertised through the social media which announced that the five lucky participants would win 50 thousand rupiah. Therefore, in order to reduce this effect, future research should also revise some of the sentences or words used in order to make the research topic less obvious.

4. CONCLUSION

In conclusion, the overall results of this study supported the hypothesis that depression has a significant role as a mediator between childhood trauma and IPV experienced in adulthood. This research is also consistent the learned helplessness theory which suggests that childhood trauma leads to depression and make individuals more prone in experiencing IPV. Therefore, depression is not just an outcome, but also plays a role in contributing to the likelihood of individuals experiencing IPV.

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