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Child Maltreatment, Depression, and Chronic Pain in College Students: An Exploratory Study

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Child Maltreatment, Depression, and Chronic Pain in College Students: An Exploratory Study



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Measures

SIC

SCL-90

(Symptoms of Illness

Checklist, Pain subscale)

(Symptom Checklist-90,

Depression subscale)

Abuse on Pain Frequency/Chronicity

FA mod

Depression mod

Background

Child maltreatment (CM) is a significant, widespread public health issue in the United States affecting large numbers of undergraduates and increasing risk for poor college outcomes; our research at UNC has established that around 1 in 3 students self-report evidence of CM history (e.g., Welsh et al., 2017). Health-related CM outcomes such as depression and chronic pain (CP), both of which can interfere with activities of daily living, often develop and persist into adulthood (e.g., Greenfield & Marks, 2009). Depression has been linked to both CM and CP among a range of age groups and identified as a significant concern on college campuses (e.g., Alba-Delgado et al., 2013; Eisenberg et al., 2007). However, research on CP as an outcome of CM has neglected young adults in favor of middle-aged and older adults (Rosenbloom et al., 2017). Relationships between CM, CP, and depression as well as their functional consequences have yet to be explored in young adults.



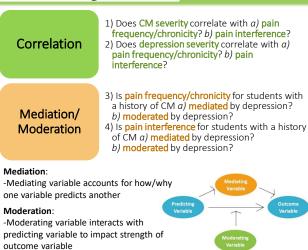
- Explore relationships between CM, CP, and depression among college students.

- Gain a broad understanding of how the interaction of mental and physical health consequences of CM may impact undergraduate students.

- Implement resources that improve college outcomes for CM survivors

Research Questions

Purpose



Method

- Quantitative - Population Survey method - Administration: Online via Qualtrics

N= 47

Preliminary Findings

Correlation		
	SIC Pain Frequency/ Chronicity	SIC Pain Interference
r=	.362**	.403**
r=	.468**	.553**
r=	.286*	0.195
r=	0.182	.390**
on	SIC Pain	
Pain	Frequency/	SIC Pain
es	Chronicity	Interference
r=	.553**	.514**
r=	.493**	.513**
icts	TSC	SCL
on	Depression	Depression
r=	.361**	.364**
r=	.445**	.510**
r=	.325*	0.343*
on is significant	at the 0.01 level	(1-tailed).
	licts Pain es r= r= r= r= Pain es r= r= licts on r= r= r= r= r= r= r= r= r= r=	SIC Pain SIC Pain Frequency/ Chronicity Frequency/ Chronicity r= .362** r= .468** r= .286* r= 0.182 ion SIC Pain Pain Frequency/ r= .553** r= .493** icts TSC ion Depression r= .361** r= .445**

Undergraduates at a midsized university in the Rocky Mountain region ages 18-24 - Preliminary sample size:

Desired/predicted total sample size:

N=100

Mediation & Moderation

CTQ-SF

Form)

TSC-40

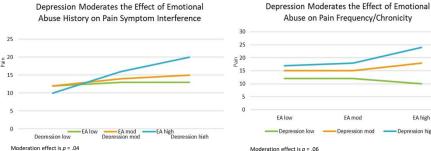
subscale)

(Childhood Trauma

(Trauma Symptom

Checklist-40, Depression

Questionnaire - Short



Mediation Analysis:

Depression fully mediated the pathway between emotional abuse and pain frequency/chronicity; however, depression did not mediate the pathway between emotional abuse and pain interference.

EA low

Depression low

Moderation Analysis:

- The effect of emotional abuse on pain frequency/chronicity was moderated by depression, but this was a trend with p = .06.
- However, there was a significant moderation effect of depression on the pathway between emotional abuse and pain interference.
- In both cases, the effect of emotional abuse on pain is greatest when levels of current depression are the highest.

*. Correlation is significant at the 0.05 level (1-tailed).

CTQ Total = CM Combined-type, EA = Emotional Abuse, EN = Emotional Neglect, PA = Physical Abuse, TSC = Trauma

Symptom Checklist-40 Depression, SCL = Symptom Checklist-90 Depression, SIC = Symptoms of Illness Checklist Pair

Discussion & Future Direction

1) Improving college outcomes

- CM (emotional abuse) predicts not only that pain will occur in a chronic fashion, but also that pain will interfere with the ability of students to function and their quality of life – this could negatively impact college outcomes.
- Universities should consider depression as a point of intervention.

2) Developmental Health Trajectories

- Depression could evolve over time from a construct that mediates to a construct that moderates pain outcomes (Karazsia & Berlin, 2018).
- Depression should be explored further as a mechanism for the development of chronic/frequently occurring pain in voung adults with CM (emotional abuse) histories.
- Depression should be considered as a major point of intervention in early childhood to reduce risk of pain outcomes in voung adulthood.
- It could be useful to screen young adults with pain for CM and depression for effective treatment.

3) Recommendations:

Replication with a larger sample size and a questionnaire designed to assess interference college related activities. Pending full analysis, exploration of depression-linked resilience factor.



References

EA high

Depression high

*Special thanks to Dr. Marilvn Welsh for providing support with statistical analysis.