

DISTRESS AMID COVID-19 AMONG THOSE EXPOSED TO EARLY LIFE STRESS

INTRODUCTION

Mental health and well-being depend heavily on our early experiences.

Adverse early environments account for a third of adult-onset mental health disorders such as anxiety and depression¹.

Stress in early life has also been linked with poor gastrointestinal outcomes, and emerging evidence suggests that gut-brain interactions may partially account for the associations between early-life stress and psychological dysfunction².

Importantly, there is evidence to suggest that those exposed to stress in early life may be particularly vulnerable to stress later in life in terms of their mental and physical health³.

The COVID-19 pandemic poses a unique opportunity to investigate relationships between people’s early experiences and their current physical and mental health amid a global health crisis.

RESEARCH QUESTION

Do those who have experienced early life stress in the form of childhood trauma respond differently to the stress of the COVID-19 pandemic?

METHODS

Participants

N = 139 (27 Male, 112 Female)

M_{age} = 21.23 (18-38)

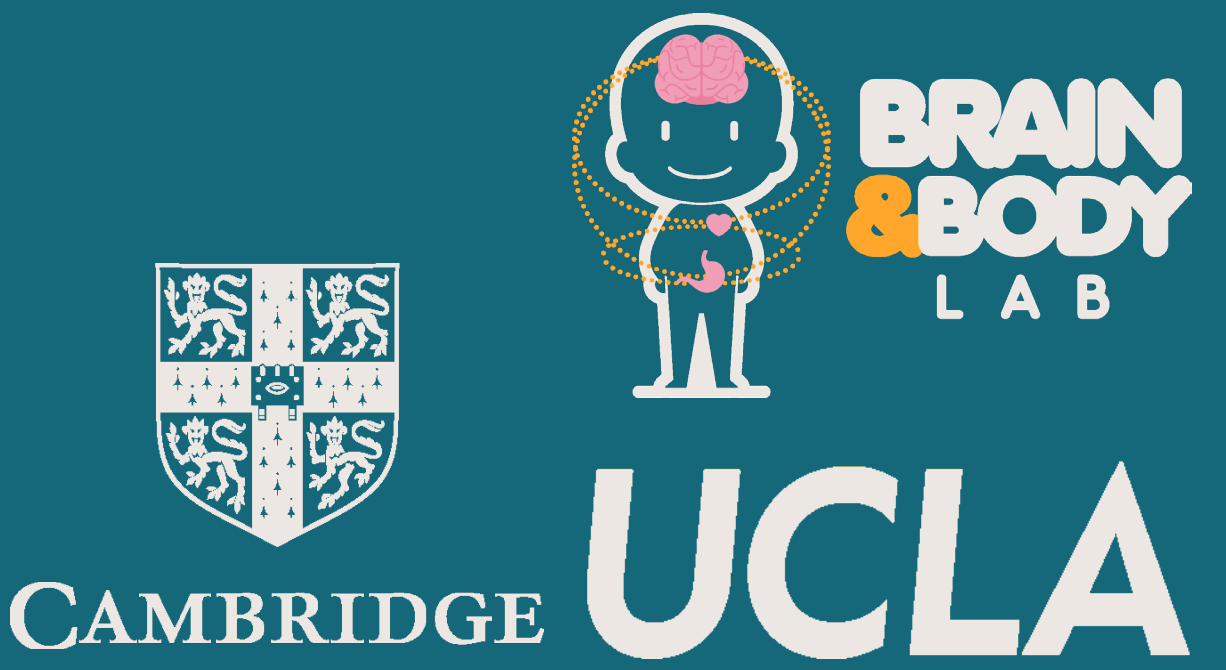
Variables	Measures
Childhood trauma	Childhood trauma questionnaire (CTQ) [Reported retrospectively]
	Childhood traumatic events survey (CTE) [Reported retrospectively]
Anxiety	State and trait anxiety inventory (STAI)
Depression	Beck depression inventory II (BDI) [Reported currently and retrospectively]
Gastrointestinal symptoms	Pediatric quality of life inventory - gastrointestinal module (PedsQL-GI) [Reported currently and retrospectively]
Social status	Subjective social status

Childhood trauma associated with increased distress amid COVID-19

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RESULTS

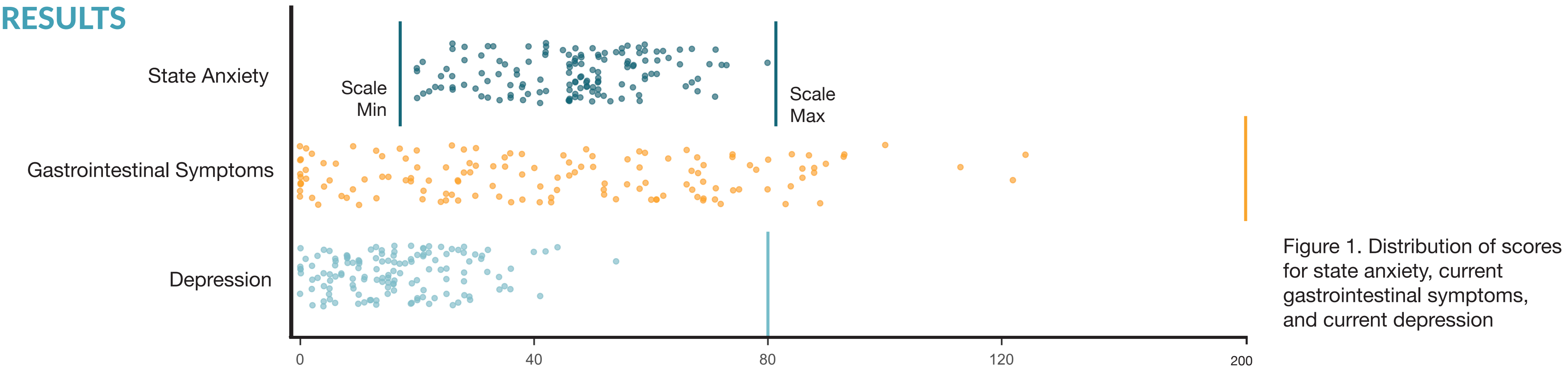


Figure 1. Distribution of scores for state anxiety, current gastrointestinal symptoms, and current depression

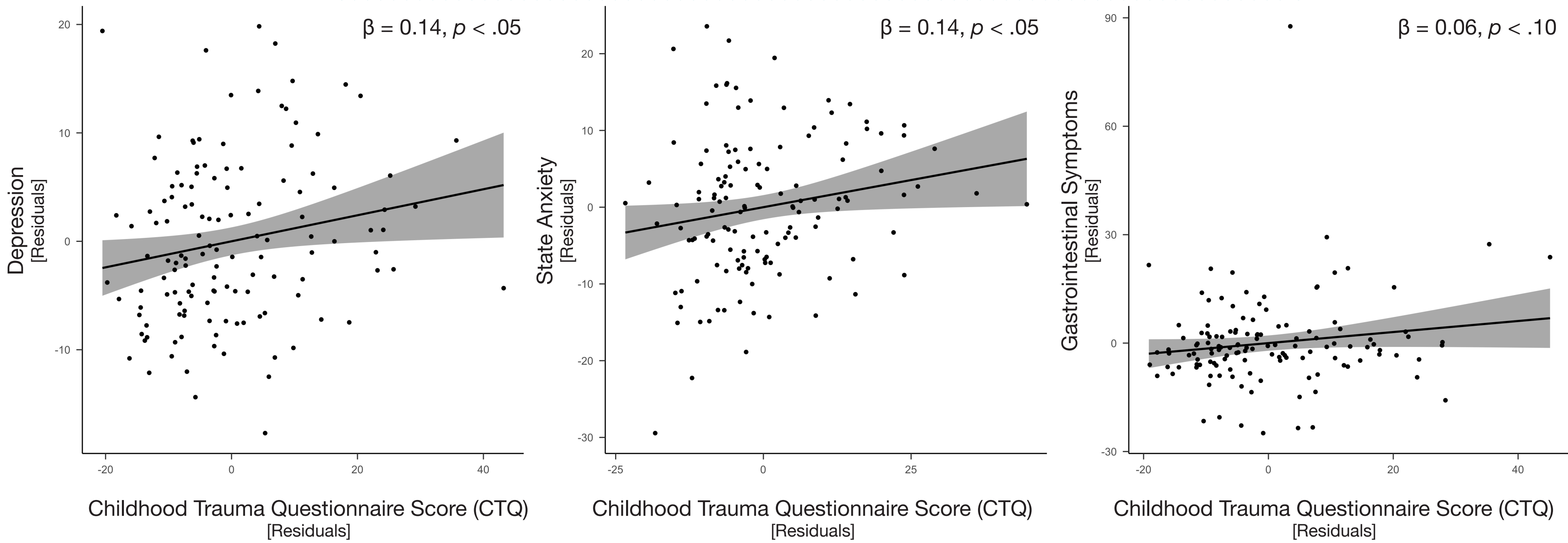


Figure 3. Partial regression plots - the association between CTQ score and the outcome of interest controlling for age, sex, subjective social status, and prior level of distress (i.e. retrospective reports of depression, retrospective reports of gastrointestinal symptoms, and trait anxiety)

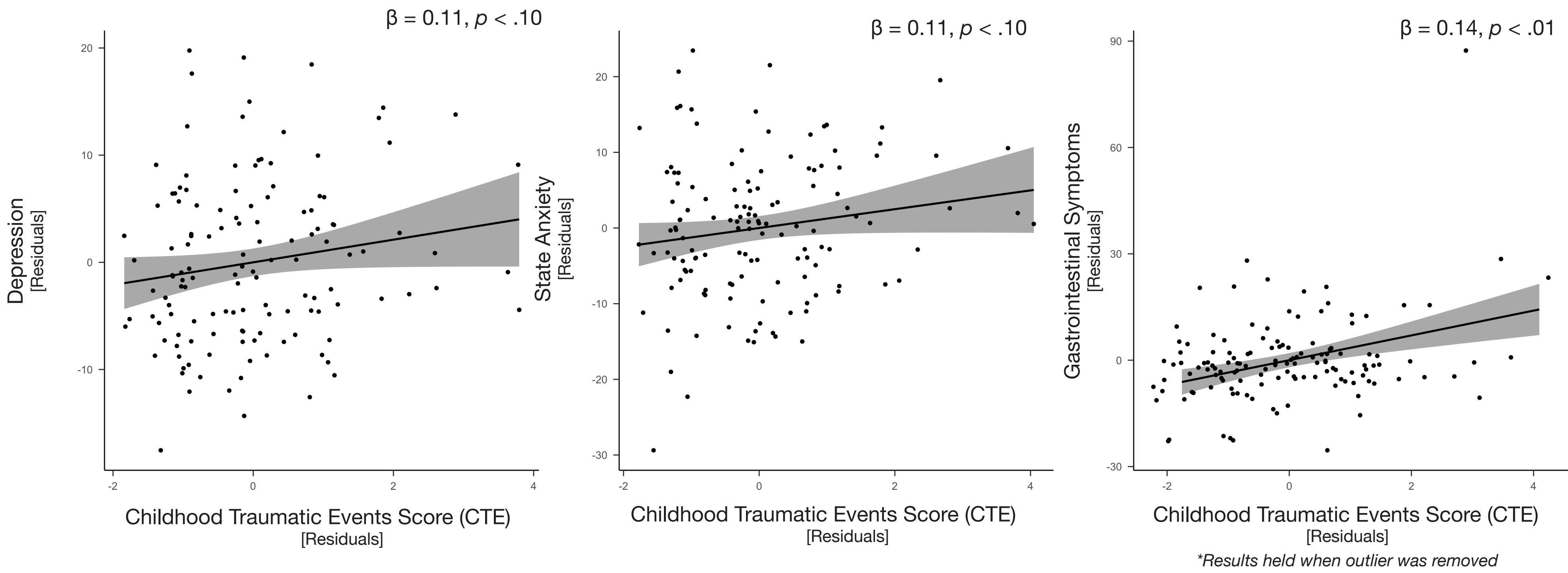


Figure 2. Partial regression plots - the association between CTE score and the outcome of interest controlling for age, sex, subjective social status, and prior level of distress (i.e. retrospective reports of depression, retrospective reports of gastrointestinal symptoms, and trait anxiety)

DISCUSSION

When controlling for prior levels of distress, childhood trauma is associated with increased distress during the global pandemic.

Childhood trauma, as measured by the Childhood Trauma Questionnaire (CTQ), is significantly associated with increased levels of current depression and state anxiety when controlling for prior levels of depression and trait anxiety. It is also marginally associated with increased gastrointestinal distress when controlling for prior levels gastrointestinal distress.

Childhood trauma, as measured by the Childhood Traumatic Events Survey (CTE), is significantly associated with increased gastrointestinal distress, when controlling for prior levels of gastrointestinal distress. It is also marginally associated with current levels of depression and state anxiety when controlling for prior levels of depression and trait anxiety.

There is a great deal of variability on all three outcome measures between participants, suggesting individual differences.

LIMITATIONS

Retrospective reports - not truly longitudinal - state and trait anxiety may not be parallel to current and retrospective reports.

FUTURE DIRECTIONS

Exploring subscales on the childhood trauma questionnaire to examine the influence of specific types of childhood trauma.

Exploring between person variability - what factors are protective versus risk factors?

Exploring differences between the CTE and CTQ.

[1] McLaughlin, K. A., Green, J. G., Gruber, M. J., Sampson, N. A., Zaslavsky, A. M., & Kessler, R. C. (2010). Childhood adversities and adult psychopathology in the National Comorbidity Survey Replication (NCS-R) III: Associations with functional impairment related to DSM-IV disorders. Psychological Medicine, 40(5), 847.

[2] Callaghan, B. L., Cowan, C. S. M., & Richardson, R. (2016). Treating Generational Stress: Effect of Paternal Stress on Development of Memory and Extinction in Offspring Is Reversed by Probiotic Treatment. Psychological Science, 27(9), 1171-1180.

[3] Grasso, D. J., Ford, J. D., & Briggs-Gowan, M. J. (2013). Early Life Trauma Exposure and Stress Sensitivity in Young Children. Journal of Pediatric Psychology, 38(1), 94-103.