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2020-12-10

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How Poor Mother-Daughter Relationships Can Lead to Depression in Female Adolescents

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PSYCH 307: Writing Within Psychology

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December 10, 2020

How Poor Mother-Daughter Relationships Can Lead to Depression in Female Adolescents

Never has there been a time in psychological history when there has been such a large focus on the mental health of young adolescents. With improved technology and wide access to more information, the occurrence and effects of depression have become a prevalent topic in modern society. There have been numerous studies looking for the cause(s) of the rising frequency of depression in children entering their teenage years and beyond (Cairns, Yap, Rossetto, Pilkington, & Jorm, 2018). But despite all the research there remains unanswered questions, and we only seem to gain small pieces of the puzzle with each passing year.

There are numerous competing theories and worldviews concerning the causation of depression in adolescents. There are just as many solutions for each purported theory. Several sources claim that the chemical imbalance or inhibited serotonin reuptake inside the brain, thus causing the symptoms and an overall source of depression (Sarmiento-Hernández et al., 2019; Schroder, Duda, Christensen, Beard, & Björgvinsson, 2020). The natural reaction to a chemical imbalance problem is to fix it at the source. Several anti-depressant drugs have been manufactured to attempt and correct any malfunction of the brain or imbalance in the brain's chemicals. On the other hand of such views, there are other studies who propose that environmental influences are associated with depression in adolescents; mold and social media being prime examples (Ivie, Pettitt, Moses, & Allen, 2020; Shenassa, Daskalakis, Liebhaber, Braubach, & Brown, 2007). Based on such research, the solution to outside and environmental influences causing depression might simply be to remove the adolescent from the influence of such environmental factors. Yet there remain a few situations where it would be more difficult or improper to remove the adolescent. These situations include school and family relationships, specifically the child-parent relationship.

This paper is designed to explain more clearly certain aspects of the child-parent relationship that can lead to future psychological and mental health problems in adolescents. From the onset of early adolescence, children are desirous to become more independent and recognized as mature fledgling adults (Fuligni & Eccles, 1993). This budding desire to be independent and mature is constantly influenced by the parents and peers of the child. This time of growth is a very important and vulnerable stage for the adolescents. Several studies have shown that the child-parent relationship during this crucial time period can be a major predictor of future mental health disorders, particularly depression (Callaghan et al., 2017). Because of the importance of the parent-child relationship there have been several studies looking into the affects and impact that positive and negative parenting has upon children (Belsky & de Haan, 2011). Despite the copious amounts of research that has been done searching for the cause(s) of depression in adolescents, a major cause of depression in young adolescent females may come from negative mother-daughter relationships, this can be supported by evidence found in general maternal negativity and aggression, brain development and function, and maternal engagement or lack thereof.

General Maternal Negativity and Aggression

Going forward there are a few key terms that need to be defined. The term “negative affect” is in reference to the expression of negative emotions; examples include yelling, screaming, raising one’s voice, becoming judgmental, or being overly critical. The term “positive affect” references the expression of positive emotions; examples include being happy, showing gratitude, appreciation, smiling, pleasant conversation, and expressions of care and affection. The specific term, “invalidation”, is when a positive affect is not acknowledged and/or is dampened through the expression of negative affect. The term “emotional regulation” is a term

to explain the method of how one regulates or understands their own emotions, this is typically done through talking but can also be expressed through actions.

The main impact of maternal aggression can be seen in emotional regulation and repression of positive affect in the daughters. These two topics will be the specific focus of this entire section. Most studies referenced in this paper have tried their best to include both the father and the mother in their studies, but in most cases, mothers have been more involved and more properly represented than the fathers. Thus, many sources that speak of parental affects have been referenced as maternal in this paper.

Impact on Emotional Regulation

Mothers play an incredibly important role in influencing their children's emotional regulation. Recent studies show that the actual ability to regulate emotions is a central factor in determining healthy mental states and may predict future mental health disorders (Tan et al., 2014). Specific to our topic, several studies have shown that maternal aggression in response to adolescent aggression is a predictor of depression only for daughters (Cowan & Cowan, 2002; Schwartz, Orli et al., 2012; Schwartz, Orli S. et al., 2014). Based on this research we can see that there is a connection between maternal negativity/aggression and poor emotional regulation of adolescents. Such that when a mother responds aggressively to a daughter's aggressive outburst, the emotional regulation of the daughter is negatively impacted. Poor emotional regulation combined with continual maternal aggression may lead to the development of depression in the daughters of these aggressive mothers.

Just as the emotional regulation of the teenage daughters can be affected by received maternal aggression, merely perceiving maternal aggression can also significantly lead to depressive symptoms. A recent study has shown that when mothers express maladaptive

emotional regulatory behaviors, young adolescent girls are more likely to reciprocate those unhealthy behaviors (Yap, Allen, & Ladouceur, 2008). So, when daughters see their mother act distant, repress emotions, or lash out in anger to regulate their emotions, the daughters are likely to follow these bad habits. Other research suggests that when adolescents perceive maternal invalidation at a time when the teenager needs or expects support and comfort, risk of developing depressive symptoms is increased significantly (Tan et al., 2014). This outcome is logical, the daughters would choose to rather repress their feelings if all they receive is aggression. Thus, perceiving maternal negativity combined with a specific lack of support when it is needed could easily compound the risk of daughters expressing depressive symptoms.

Invalidation and Repression of Positive Affect

Similarly, maternal negativity does not have to be in response to adolescent negativity to lead to future depressive symptoms of the daughters. Research has revealed that girls who attempt to express positive affect and are then invalidated by their mother's negativity, report more depressive symptoms (Yap, Allen, & Ladouceur, 2008). Other research also shows that mothers who dampen their adolescent's expression of positive affect may lead to adolescent vulnerability to depression (Schwartz et al., 2014). Thus, when mothers negatively react to the positive affects of the adolescents through invalidation or dampening, these actions lead the daughters to express more depressive symptoms and feelings.

Maternal negativity also has been shown to affect the teenager's ability to respond positively in peer relationships. As adolescents mature, they become more oriented towards peers as they seek to find more emotional fulfilment personal development; girls specifically have been found to rely upon their peers for advice and emotional support more than boys (Fuligni & Eccles, 1993). A recent study has shown that when a daughter is constantly exposed to maternal

negative affect, the adolescent's capacity to feel or possess positive affect is decreased significantly (Tan et al., 2014). This same study explains that even low levels of maternal negativity are enough to cause the teenager to expect less rewards and positive affect from their peer interactions. It is this decrease in capacity for positive affect that is transferred into the social aspect of the adolescent's life. For the daughters who seek more emotional fulfillment from their peers, maternal negativity has a profound negative affect on those social interactions. Some examples of this include when the mother disapproves of a peer group, or when the mother is overly restrictive in the daughter's social life. Just as the adolescents are becoming increasingly aware of rewarding positive social interactions, maternal negativity can dampen or completely nullify the positive affect, thus increasing the risk of depression for the adolescents.

The influence of maternal negative affect upon daughter's peer relationships can also lead to more maladaptive emotional regulatory behavior. Very similar to the research of how daughter may reciprocate the maladaptive emotional regulatory behaviors of their mother (Yap, Allen, & Ladouceur, 2008), maternal negative affect can lead to adolescents reciprocating the maladaptive behaviors of their peers. When the relationship of the mother and daughter is strained through constant aggression, the daughter may feel that her opinions are invalid. So, the adolescent may feel more validated in their peer groups and would be more willing to sacrifice to keep those peer relationships (Fuligni & Eccles, 1993). When those peer relationships prove to be a negative influence, or exhibit negative behaviors, the daughter will likely reciprocate any negative behaviors in order to keep those friendships. Thus, maternal negativity and invalidation can lead to their daughters follow poor examples, which can also contribute to depressive symptoms in the future.

Brain Development and Function

The overall development and function of the human brain is still on-going during the adolescent years of human life. As such, the teenage years and the teenage brain are extremely vulnerable to influence during this time period. Several sections of the brain have been associated and positively correlated with depression. This segment of the paper is to help provide more empirical evidence of the impact mother negativity and aggression has on the future development of depression, as shown by brain function and development. The focus will be on the function of specific regions in the brain and how the brain's development is affected by maternal negativity and aggression.

Brain Development

As stated earlier, the teenage years are a time of vulnerability and change for the adolescent brain. Thus, it makes sense that maternal aggression and negativity could impact the brain development of their teenagers. Maternal aggression has shown to affect the shaping of amygdala-based resting-state networks and adolescent amygdala connectivity (Callaghan et al., 2017). From this same study, functional abnormalities in amygdala connectivity are known to be directly related to depressive symptoms in adolescents. A few studies have revealed that aggressive maternal behavior may be associated with the delayed development of brain regions that are connected to cognitive and emotional functioning (Tan et al., 2014; Whittle et al., 2016). When such regions are delayed in forming, the young woman's emotional regulation could be weakened, which could lead to depression.

One of the regions, the left NAcc (accumbens nucleus), is associated with reward-related processing, multiple aspects of cognitive behavior, emotional learning, and behavioral flexibility. Depressed youth have been recorded as having increased activation in the left NAcc (Tan et al., 2014). So, as the teens seek to try and deal with their teens, the brain region they attempt to use

is stunted due to maternal aggression. Thus, aggressive maternal behavior that delays the development of the left NAcc in adolescents can directly lead to depression.

Brain Function

Just as adolescent brain development is impacted by maternal negativity, so is brain function. The brain function found specifically in brain connectomes are associated with maternal negativity. Brain connectomes can help predict future psychological problems. A recent study on the brain connectomes between maternal-child relationship and future psychological problems showed that there was a significant difference in the way that children responded to mothers and fathers (Itahashi et al., 2020). Explicitly, maternal negative parenting was shown to be associated with increased cortical thinning in the right frontoparietal regions (the front part of the prefrontal cortex). The right frontoparietal regions and networks are incredibly crucial for the development of emotional functions. These regions are also associated with the future regulation of adaptive behavior. It is easy to see how these impacted brain functions could lead to depression in young women.

Another study claims that maternal criticism is positively associated with teenage difficulty in regulating negative emotions (Lee et al., 2015). The lentiform nucleus and posterior insula specifically were activated in response to maternal criticism. These specific brain regions are associated with negative feedback processing, physical/social pain, and negative emotions. As these studies show, the brain helps to reveal that maternal negativity physically impacts adolescent's brains. Difficulty in regulating negative emotions and overall emotional functions can directly lead to the development of depression.

Also, maternal influence in certain regions of the brain may directly correlate to the development of depression in daughters. According to a study looking at the functional brain

connectomes linking mother and child relationships to psychological problems, several depressive symptoms were identified significant to girls only (Itahashi et al., 2020). The connectomes involving the frontoparietal, orbitofrontal cortex, salience networks, and the default-mode network are all unique to mothers interacting with their children. Specific only to girls, those same connectomes are associated with symptoms including internalizing problems, being withdrawn, anxious, and depressed. Another study revealed that maternal aggression is positively associated with connections in the left temporal cortex and insula (Callaghan et al., 2017). These connections are specifically tied to the subsequent onset of depression in late adolescence. From these empirical studies surrounding the function of specific brain regions that are associated with depression, the evidence is clear that maternal aggression is heavily correlated with the development of depression in young women specifically.

Maternal Engagement/Involvement

Finally, the last major piece of scholarly evidence is found in maternal engagement/involvement. We will define maternal engagement/involvement as how a mother interacts and cares for her children. Maternal affectionless control has been known to be directly tied to the development of depression (Parker, Tupling, & Brown, 1979). Essentially, when a mother controls her children but does so without affection, this may hurt the children emotionally (and can even affect them into adulthood). It is also important to note that the concept of affection is from the point of view of the child, not the mother. As such, the perception of maternal affection/care is directly associated with the diagnosis of depression in teenagers (Rey, 1995). The more teenagers do not perceive care and affection, the more likely they are to be diagnosed with depression. According to these findings, the mother does not have

to be overly aggressive to incite depression, but merely must be uncaring to negatively impact their teenager.

Similarly, mothers play an important role in providing a good example of self-care for their daughter's own future self-care. The mother-daughter relationship can be vital to helping the daughter understand how to take care of herself physically. Consistently going to the doctor, practicing good health habits, and promoting good health of their children are all aspects of how a mother can positively influence her daughter (Marcell, Matson, Ellen, & Ford, 2011; Thakkar, Hao, & Marcell, 2019). The absence of such a motherly example could lead to the daughter neglecting her own physical health later in life. As a daughter's physical health declines, they may become more susceptible to mental illnesses like depression.

Conclusion

The negative relationship between a mother and daughter seems to be highly correlated to depression in the daughter according to multiple sources. From the conclusive studies surrounding maternal aggression, daughters are more likely to develop depression from aggressive mothers. The research found on the brain development and function shows that maternal negativity delays growth and hampers functions in select regions of the brain that are associated with depression. The lack of maternal involvement with their daughter is also seen to have a role in the development of depression. It is apparent from this literature review that maternal negativity/aggression, brain development and function, and maternal engagement/involvement, are evidence that daughters may develop depression from poor mother-daughter relationships.

These findings are in line with previous studies, and no new studies were conducted for this paper. While most of the previous findings focus on general depression in teenagers, this is a

synthesized paper of specific maternal impact on female adolescents. The impact of this information can help lead to greater awareness for mothers to be more conscientious within their mother-daughter relationships. In the future there may be more information from this niche relationship so therapists will be able to help more female adolescents deal with depression. But there is still much more that needs to be understood about depression in young women.

Research specializing in adolescent females with depression in relation to their mothers is still very new. As such, the lack of extensive research is the largest limitation for the findings established in this paper. Future topics of research can focus more on what kind of mothers tend to have depressed daughters. Are there any common variables across all the mothers that raise depressed daughters? Is there any specific difference based on the location of the daughter-mother relationships on depression? Further research in these areas could prove to be very helpful in finding ways to help combat depression in female adolescents.

Starting now therapists can start using the mother daughter relationship to try and help those female patients with depression and see if it might stem from that relationship. After more research is done, symptoms of negative mother-daughter relationships can be identified to help prevent those same relationships from developing into more depressed daughters. Hundreds if not thousands of people can be helped with the understanding that comes from this research. Even though it is just one more way to fight depression, it is still one step closer to helping more people.

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