Introduction

Awareness of Abuse

- Many individuals who experience sexual, physical, or emotional abuse describe trauma behaviorally but do not categorize themselves as having been abused (e.g., Goldsmith & Freyd, 2005; Koss, 1998).
- Even with substantiated severe abuse and neglect, research indicates that approximately one-third of individuals deny abuse occurrences when specifically queried as adults (Hardt & Rutter, 2004).

Results

- Trauma-related symptoms such as depression are more strongly related to researcher-defined abuse, based on behavioral definitions, than they are to individuals' perceptions of themselves as abused (Silvern, Waide, Baughan, Karyl, & Kaersvang, 2000).

Betrayal Trauma

- Betrayal Trauma refers to the cognitive and emotional conflict individuals face when they are hurt in the context of relationships upon which they depend (Freyd, 1996).
- This theory explains why some individuals do not acknowledge their trauma and/or experience memory impairment for trauma—because they need to preserve an attachment to the caregiver who is also the source of maltreatment.

Costs and Benefits of Abuse Awareness

- Abuse awareness may threaten necessary relationships and provoke a sense of stigma, whereas minimizing or internalizing abuse may allow victims to maintain a sense of control and preserve caregiving attachments (Goldsmith & Freyd, 2005).
- Varia and Abidin (1999) report that those who minimize childhood emotional abuse experiences report higher levels of relationship satisfaction than individuals who acknowledged childhood emotional abuse.
- Among 1,385 university women, Harrend (2004) reported that unwanted sexual experiences, rather than labeling these as sexual abuse or assault, predicted distress.
- Awareness for abuse may decrease the potential for intergenerational violence (Egeland & Susman-Stillman, 1996).

How do young adults’ perceptions of having experienced childhood abuse relate to levels of reported maltreatment and current symptoms? How do these relations change over time?

Method

Participants

- N = 185 (126 females and 59 males) at Time 1
- N = 96 (71 females and 25 males) at Time 2
- Participants were recruited from the University of Oregon Human Subject Pool, and indicated that they would be willing to participate in a paid follow-up session in 1-2 years.
- At Time 1, participants’ ages ranged from 18 to 32 years, with 86.6% of participants between the ages of 18 and 21.

Materials

- Questionnaire items included six questions of perceptions of physical, sexual, and emotional abuse. Three questions used the word “abused” (e.g., “Would you say that you were emotionally or psychologically abused as a child [before age 17]?”), and three questions used the word “maltreated” (e.g., “Would you say that you were sexually maltreated as a child before age 17?”). A symptom checklist for childhood sexual abuse was added which included symptoms of PTSD (Knutson, J. F., & Selzer, M. B. (1994). Further childhood sexual experiences reported by young adults over a 10-year period. Child Abuse and Neglect, 18(3-4), 153-166).
- Trauma Symptom Checklist-40 (Elliott & Briere, 1992)
- Pennebaker Inventory of Limbic Languidness—time bound (PILL; Pennebaker, 1982)
- Child Abuse Trauma Scale (Sanders & Becker-Laussen, 1995)

Procedures

- The UO Human Subjects Committee approved the study protocol.
- Students signed informed consents prior to their participation.
- Participants completed anonymous surveys matched by a code that they were instructed to create using information that could not be traced to their contact information.
- After completing the surveys, participants received a written debriefing.

References


Discussion

Young adults’ appraisals of childhood experiences as “abuse” or “maltreatment” may change over time, but are positively correlated with abuse severity. Relations between abuse awareness and trauma symptoms are also likely to fluctuate.

Future Research

- This study indicates that clinicians should be aware that abuse perceptions have potential costs and benefits, and that changing abuse perceptions may cause distress.
- Results demonstrate the depth of emotional experiences related to trauma and awareness.

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