Freyd Dynamics Lab
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Writing about Betrayal Trauma: Examining Gender and Narrative Structure

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Introduction

Pennebaker's Writing Paradigm

- Experimental design in which participants are instructed to write either about emotional events or neutral topics
- Those writing about emotional events typically display physical and psychological health improvements (Pennebaker, 1997; Smyth, 1998)
- Presence of emotion words, and causal and insight words (presumably reflective of coherence) related to positive outcomes (e.g., Pennebaker & Francis, 1996; Pennebaker, 1997)

Betrayal Trauma

- Trauma high in betrayal is perpetrated by someone who is close to the victim and/or upon whom the victim is dependent (see Freyd, 1996, 2001)
- Associated with impaired memory for trauma, presumably for purpose of preserving victim-perpetrator relationship, and various negative sequelae, including dissociation, depression, anxiety and physical ailments (e.g., Freyd, Klest & Allard, in press)

Objectives

- Primary goal: to test generalizability of emotional writing to betrayal trauma
  - Up until now, paradigm has mostly been applied to emotional events
  - Those few applied to traumas involve one-time non-complex low betrayal traumas
- Secondary goal: to investigate mechanism behind writing phenomenon by elucidating essay characteristics associated with positive outcomes
  - While number of emotion words has been associated with positive outcomes, the relationship with causal and insight words is less clear (e.g., Pennebaker & Francis 1996)
  - Global ratings of coherence may be more valid

Method

Participants

- 65 (51 female, 14 male) physically symptomatic undergraduates recruited from psychology Human Subjects Pool and compensated with choice of partial course credit or $7
- Demographics (representative of UO undergraduate population):

  Age: M = 19.94 years (SD = 3.86) and mostly (94.4%) single
  Ethnicity: 67 (93.1%) Caucasian; 2 (2.8%) each Asian, African American, Hispanic, Pacific Islander; and 1 (1.4%) American Indian

Assessments

- Trauma assessed at pretest using Brief Betrayal Trauma Survey (Freyd & Goldberg, 2004)
- Psychological health assessed at pre and posttest with Trauma Symptom Checklist 40 (TSC; Elliott & Briere, 1992)
  - Includes overall symptom score and 6 subscales (depression, dissociation, anxiety, sleep difficulties, sexual problems, post sexual abuse trauma)
  - Time-bound so that participants were instructed to report frequency of symptoms during past 2 weeks

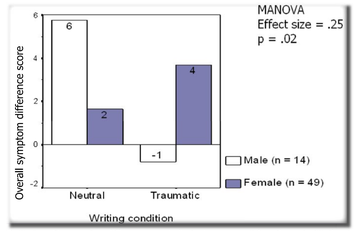
Procedures

- Random assignment to intervention of 2 x 20-minute writing assignments one week apart
  Group 1: most distressing interpersonal childhood experience (n = 33)
  Group 2: how you spent your time yesterday (n = 32)
- Completed posttest one month following second writing session

Content Analysis of Essays

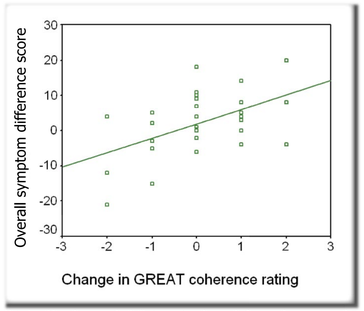
- Counted number of emotion and coherence related words using Pennebaker's Linguistic Inquiry and Word Count (LIWC) computer program (Pennebaker, Francis & Booth, 2001; see Table 1 in handout for examples of words counted)
- Rated coherence using Global Ratings of Essays About Trauma (GREAT) code (Klest & Freyd, 2004; see Table 2 in handout for coding rubric)

Figure 1. Mean change in overall symptoms from pre to posttest by writing condition and gender.



Note: A positive symptom difference score indicates improvement from the pretest to the posttest, while a negative score indicates a worsening of symptomatology.

Figure 2. Overall symptom change from pretest to posttest predicted by change in GREAT coherence rating from essay 1 to essay 2 (controlling for gender and the maximum coherence rating from both essays).



Note: A positive coherence rating indicates greater coherence in the second essay compared with the first. A positive symptom difference score indicates improvement from the pretest to the posttest, while a negative score indicates a worsening of symptomatology.

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http://dynamic.uoregon.edu/~jjf/istss04/

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Summary of Results

Descriptives

- Over 50% of all participants reported having experienced at least one betrayal trauma
- Women reported more betrayal trauma than men (see handout for specific distribution)
- Significant correlations exist between symptoms and betrayal trauma

Intervention Results

- No significant overall main writing or gender effect on symptomatology outcome
- A significant gender by writing condition interaction emerged: that women in trauma writing condition benefited more and men benefited more in the neutral condition (see Figure 1)

Content Analysis Results*

- LIWC emotion words:
  - Increased frequency of positive emotion words over the 2 writing periods, and greater use of anxiety or fear words in either essay, predicted improvements in symptomatology
- LIWC causal and insight words:
  - Neither change in word frequency or overall word usage predicted symptomatology at posttest
- GREAT coherence rating:
  - Increased coherence over the 2 writing periods predicted improvements (see Figure 2 for an illustration of one of these predictive relationships)

* See Table 3 in handout for summary of significant regression analyses, which included pretest scores, gender, change in LIWC word count or GREAT coherence rating from essay 1 to essay 2, and the maximum word count or rating from either essay, as predictors of posttest symptom scores

Discussion

The large number of participants reporting high betrayal trauma is not surprising given that they were highly physically symptomatic. Many chronic pain disorders and health problems have been found to be related to trauma (e.g., Felitti, 2002). That women reported experiencing more high betrayal trauma replicates previous findings (Freyd & Goldberg, 2004).
The different types of traumas reported by the women and men of this study, and the differential results of the writing intervention for each gender, suggest it would be fruitful to consider the type of trauma experienced by an individual when considering intervention strategies.

Directing the writing process to include components found to be related to better outcomes may enhance the effectiveness of the writing intervention. It appears that positive outcomes are related to the frequency of emotion words used. While causation and insight words appear not to be related to outcome, increased coherence, as measured via global ratings, appears to be related to better outcomes. No causal interpretations can be made, but the lack of significant correlations between outcomes and coherence ratings in the neutral essays, and between baseline symptom measures and coherence ratings, suggest the change in coherence has predictive value.

Future research should be aimed at overcoming some of the limitations of this study, including improving the sample heterogeneity, increasing the followup latency, and experimentally manipulating the content and structure of the writing.

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