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The effects of gender, personal trauma history and memory continuity on the believability of child sexual abuse disclosure among psychologists[☆]

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ABSTRACT

Gender, a personal history of trauma and attitudes towards continuous vs recovered memories of abuse significantly impact the believability of Child Sexual Abuse (CSA) disclosures in community samples. Yet, whether these variables influence the believability of CSA disclosure and subsequent clinical decisions made by practicing psychologists is underexplored. A vignette of trauma disclosure from a hypothetical adult client was presented via an online survey to 292 registered psychologists. Participants rated the believability of the disclosure, answered an open-ended item regarding treatment planning, and completed the Brief Betrayal Trauma Survey to measure personal trauma history. Results indicated that female psychologists believed disclosures significantly more than male psychologists and that disclosures comprised of continuous memories were believed more than recently recovered memories. A significant interaction between gender and personal trauma history was also revealed. Female psychologists believed disclosures regardless of their personal trauma history, while male psychologists with a personal history of trauma believed disclosures significantly more than male psychologists without personal trauma history. Reported believability of the disclosure, while unrelated to treatment planning, was associated with a reported intention to validate the client's experience. The results support that, similar to community samples, gender and a personal trauma history impact psychologist believability of CSA disclosure. The research further supports that psychologist level of belief then translates into clinical implications.

1. Introduction

Unresolved childhood trauma and abuse currently impact over five million Australian adults and has an estimated \$9.1 billion collective cost nationwide (Kezelman, Hossack, Stavropoulos, & Burley, 2015). Child Sexual Abuse (CSA) has damaging long-term physical and mental health implications for its victims, including depression, substance use disorder, post-traumatic stress disorder (PTSD) and obesity (Afifi, Boman, Fleisher, & Sareen, 2009; Breckenridge, Salter, & Shaw, 2012; Kendall-Tackett, 2002; Rohde et al., 2008). Completed suicide and accidental fatal drug overdose also occur at significantly higher rates among CSA victims compared to non-victims (Cutajar et al., 2010).

Negative reactions by the recipient of disclosure (herein referred to as the *disclosee*) further contribute to the adverse experiences

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of CSA victims. Worry for the possibility of not being believed discourages disclosure, whilst reactions such as disbelief, lack of support and blame were related to heightened PTSD symptomology among CSA victims as adults (Paine & Hansen, 2002; Tener & Murphy, 2015; Ullman & Filipas, 2005). Research has revealed that adult victims of CSA hold pre-existing expectations about how the discloser will react, and negative expectations contributed to further delaying disclosure (Alaggia, 2005, 2004; Berliner & Conte, 1995; Collings, 2007; McGregor, Jülich, Glover, & Gautam, 2010; Tener & Murphy, 2015). A strong therapeutic relationship is central to encouraging disclosure, as adults who choose to disclose CSA do so to professionals with whom they can trust (Deering & Mellor, 2011).

Child abuse is a mandatory reporting requirement for psychologists, however mental health professionals often fail to report suspected cases of child abuse (Hansen et al., 1997; Kalichman & Brosig, 1993). This suggests that some psychologists may question the authenticity of CSA disclosures. It is therefore important to investigate the characteristics of psychologists that impact the believability attributed to CSA disclosure, since this may then translate into clinical implications for the therapeutic relationship, or impact psychologist treatment and ethical decision making.

Gender is thought to be one of the strongest predictors for the believability of CSA disclosure among jurors and undergraduate university students (Cromer & Freyd, 2007, 2009; Quas, Bottoms, Haegerich, & Nysse-Carris, 2002; Ullman & Filipas, 2005). These community-based studies consistently reported that women believed CSA disclosures significantly more than men. A single study has investigated the gender effects for the believability of CSA disclosure among psychologists (Tabachnick & Pope, 1997). No significant main effect for gender was revealed, however there was a significant interaction between gender and psychologist theoretical orientation. This interaction revealed no significant difference in the believability amongst the male and female psychodynamic orientated psychologists, however non-psychodynamic orientated female psychologists believed disclosures more than non-psychodynamic orientated males. These outcomes may suggest that the focus of psychodynamic therapies, that is the childhood experience, might influence the practitioners' perceptions about the legitimacy of childhood memories or indeed the choice to practice psychodynamic might be reflective of differing values of the childhood experience to begin with. In either case, the overall effect sizes for gender in this study might have been understated due to the practitioners' psychodynamic approach which is fundamentally geared towards engagement with and belief of childhood traumas which have ongoing impacts into adulthood.

More recently other variables of interest have been utilised to explain differences in the believability of CSA disclosure. The rape empathy literature proposes that the ability to deeply understand or relate to the experiences of a rape victim is based on a perceived similarity to and/or familiarity with the victim's situation (Brown, Messman-Moore, Miller, & Stasser, 2005; Deitz, Blackwell, Daley, & Bentley, 1982; Osman, 2011; Smith & Frieze, 2003). The apparent gender effects observed within the rape empathy literature might offer an explanatory mechanism for the gender effects revealed in CSA believability. The research suggests that heightened belief among women is not biologically based, but rather develops from women's capacity to identify with a victim. Women are more likely to have experienced CSA (Barth, Bermetz, Heim, Trelle, & Tonia, 2013), are more likely to report heightened fear of sexual crime (see the Shadow of Sexual Assault Hypothesis; Ferraro, 1995) and are socialised as weak and vulnerable (see the Gendered Fear of Crime Socialisation model; Rader & Haynes, 2011; Stanko, 1995). This contrasts with men who experience lower rates of CSA and who are likely to be socialised as protectors who conceal signs of fear (Rader & Haynes, 2011). Due to this, women are more familiar with vulnerability and thus have a heightened capacity to empathise with CSA disclosure, as compared to men. In conjunction with this, recent research has investigated empathy in relation to cases of CSA (Bottoms et al., 2014). The study revealed that women assigned significantly more CSA victim empathy and believability to CSA disclosures compared to men. This suggests that differences in the believability of CSA disclosure may be driven by an individual's ability to empathise with CSA victims.

A possible mechanism through which these gender differences in CSA empathy may be understood is through an individual's personal history of trauma victimisation. Personal victimisation may allow a closer understanding for CSA through increasing an individual's perceived similarity to and/or familiarity with victims. Although women ascribe more CSA empathy as well as CSA believability, participants with a personal history of abuse report significantly more rape victim empathy, perceived similarity to and believability for CSA disclosures compared with those without a personal history of trauma (Brown et al., 2005; Cromer & Freyd, 2007, 2009; Deitz et al., 1982; Osman, 2014; Smith & Frieze, 2003). This highlights a core importance for perceived similarity with victims (through a personal trauma history) and its association with CSA believability. In a study of 259 undergraduate students, a main effect for gender and personal trauma history was revealed which significantly impacted the believability of CSA disclosures. Women believed significantly more than men, and individuals with a personal history of trauma believed significantly more than those without a history of trauma (Cromer & Freyd, 2009).

Moreover, a recent study expanded on this finding and demonstrated how the effect of gender attenuated in significance when personal trauma history was accounted for (Miller & Cromer, 2014). The study reported no significant main effect for gender, however demonstrated that gender significantly interacted with a personal history of trauma. Specifically, men with no trauma history showed significantly less belief in the CSA disclosure compared to both groups of women (with or without a trauma history) and to other males with a trauma history. The ability to cognitively and emotionally identify with CSA disclosures is enhanced for women who are socialised to be vulnerable and fear crime, and for men who have been forced to experience vulnerability through personal experience of trauma. Thus, it was demonstrated that a personal history of trauma can act as a mechanism through which men believe CSA disclosure.

Much of the research within this domain has focused on community samples (Cromer & Freyd, 2007, 2009; Quas et al., 2002). However, some studies have investigated these variables in a sample of psychologists. For instance, psychologists with a personal history of maltreatment or violence were significantly more likely to report four types of childhood abuse, including CSA (Hansen et al., 1997). A further study considered the influence of personal trauma victimisation among a sample of mental health clinicians and its relationship with CSA disclosure believability (Nuttall & Jackson, 1994). The outcomes suggested that mental health clinicians

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