

Autobiographical memory and the self-memory system in posttraumatic stress disorder

Kylie Sutherland, Richard A. Bryant*

University of New South Wales, Sydney, Australia

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Abstract

This study investigated the relationship between perceptions of self and retrieval of autobiographical memories in posttraumatic stress disorder (PTSD). Civilian trauma survivors with and without PTSD ($N = 33$) provided autobiographical memories in response to positive and negative cue words. Participants also completed a measure of self-image derived from Higgins's [Higgins, E. T. (1987). Self-discrepancy: A theory relating self and affect. *Psychological Review*, 94, 319–340] Selves Questionnaire. Participants with PTSD reported more trauma-focused memories in response to positive cues than non-PTSD participants. Further, retrieval of trauma-focused memories in response to positive cues was strongly associated with perceptions that one's actual self was discrepant from one's ideal self. These findings are discussed in terms of the role of the self-memory system in adjustment to trauma.

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One of the defining characteristics of posttraumatic stress disorder (PTSD) is intrusive memories of the traumatic event. Not surprisingly, studies have focused on the pattern of autobiographical memory retrieval in PTSD.

Across several empirical studies, McNally and colleagues have reported that Vietnam veterans with PTSD demonstrate deficits in retrieving specific memories relative to those without PTSD (McNally, Lasko, Macklin, & Pitman, 1995; McNally, Litz, Prassas, Shin, & Weathers, 1994). Interestingly, McNally et al. (1995) also found that Vietnam veterans who wore military insignia were more prone to report

memories of their military experiences, compared to those without regalia. This finding was interpreted as evidence that veterans who maintain a self-image of military identity are more likely to retrieve memories of that part of their lives (McNally, 2003). Similarly, a study of cancer patients with PTSD indicated that these patients retrieved more autobiographical memories about their illness compared to cancer patients without PTSD (Kangas, Henry, & Bryant, 2005).

Conway and Pleydell-Pearce (2000) maintain that autobiographical memory for specific events is reconstructed from representations in the autobiographical knowledge base. It is proposed that the retrieval of specific information about one's personal past is influenced by constructions of the self, including self-image, goals, and expectations. In this model, the self-memory system shapes cues that activate autobiographical memory representations. This results in the search process selecting memories consistent

* Corresponding author at: School of Psychology, University of New South Wales, NSW 2052, Australia. Tel.: +61 2 9385 3640; fax: +61 2 9385 3641.

E-mail address: r.bryant@unsw.edu.au (R.A. Bryant).

with our “working self” which comprises our self-image and associated goals. In this sense, autobiographical knowledge is thought to ground the self (Conway & Pleydell-Pearce, 2000; Conway & Tacchi, 1996). Consistent with this approach is evidence that personal memories often concur with reported goals (Pillemer, Picariello, Law, & Reichman, 1996; Singer & Salovey, 1993).

This study investigated the role of the self-memory system in the retrieval of autobiographical memories in PTSD. According to Conway and Pleydell-Pearce (2000), the personal goals one hold influences the encoding and retrieval of autobiographical memories. These goals are generated from our notion of self, a dynamic conception of who we are and who we might become. Building on Higgins’s (1987) theory, it is proposed that goals emerge from discrepancies between different domains of self and these drive autobiographical remembering. In this theory, the self is divided into three domains: the actual, ideal and ought selves. Further, discrepancies between these three domains are thought to influence the type of negative affect that one subsequently experiences (Strauman, 1990; Strauman & Higgins, 1987).

The actual-ideal self-discrepancy refers to the extent to which an individual perceives their current actual self to be different from the self they would ideally like to be. This discrepancy signifies an absence of positive outcomes and is typically associated with depressive disorders. The actual-ought self-discrepancy refers to the extent to which an individual perceives their current self to be different from the self they believe they should attain to (as decreed by significant others and society in general). Moreover, this form of discrepancy connotes the presence of negative outcomes and is associated with the development of anxiety disorders (Higgins, 1996; Higgins, Bond, Klein, & Strauman, 1986).

In the context of posttraumatic psychopathology, this theory generates a number of hypotheses regarding autobiographical memory retrieval. Specifically, it would be expected that PTSD would be associated with a predominance of memories of threat related to the trauma and a perception indicating that the self is in danger. This would be demonstrated in increased retrieval of threat- or trauma-related memories being associated with a more discrepant self-concept (e.g., a self-perception that one is threatened yet aspiring or desiring to be safe and immune to threat).

This study tested this proposition by administering the autobiographical memory task to trauma-exposed participants with and without PTSD. Participants were required to provide autobiographical memories in

response to positive and negative cue words. Participants were also asked to complete a measure of self-concept derived from Higgins’s (1987) Selves Questionnaire. This idiographic free recall requires individuals to spontaneously report qualities they think best describe their actual, ideal, and ought selves. Using a scoring system based on synonyms and antonyms, discrepancy scores are calculated between the actual-ideal and the actual-ought selves. Although PTSD is nominally an anxiety disorder, it is also characterized by depressive symptomatology. Based on this comorbidity, both actual-ought and actual-ideal self-discrepancies might be expected to play a comparable role in autobiographical retrieval in PTSD. Accordingly, it was hypothesized that the expected predominance of trauma memories in PTSD participants would be associated with greater actual-ought and actual-ideal self-discrepancies.

1. Method

1.1. Design

A 2 (Participant Group: PTSD, non-PTSD) \times 2 (Cue Valence: positive, negative) design was employed in which participants retrieved autobiographical memories to cue words and also rated their self-concept.

1.2. Participants

Seventeen PTSD (11 female, 6 male) participants of mean age 35.7 years (S.D. = 10.4), and 16 trauma-exposed non-PTSD (11 female, 5 male) participants of mean age 29.4 years (S.D. = 10.9) were included in the study. Participants were recruited from consecutive volunteer patients who were referred to the PTSD Unit at a major trauma hospital. Seven PTSD participants met criteria for major depressive disorder. Exclusion criteria included inability to speak English without the aid of an interpreter, administration of narcotic analgesia within the previous 24 h, or a diagnosis of organic mental disorder, psychosis, or substance abuse. After a complete description of the study, written informed consent was obtained from all participants.

1.3. Materials

The cue words comprised 5 positive and 5 negative words selected from the 1000 most frequent English words (Carroll, Davies, & Richman, 1971; Robinson, 1976) and were matched on frequency of usage. The

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