



# Child maltreatment severity and adult trauma symptoms: Does perceived social support play a buffering role?<sup>☆</sup>

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## ARTICLE INFO

### Article history:

Received 18 December 2012

Received in revised form 28 February 2013

Accepted 5 March 2013

Available online 25 April 2013

### Keywords:

Child abuse

Childhood sexual abuse

Long-term effects

Psychological functioning

Social support

## ABSTRACT

**Objectives:** The current study investigates the moderating effect of perceived social support on associations between child maltreatment severity and adult trauma symptoms. We extend the existing literature by examining the roles of severity of multiple maltreatment types (i.e., sexual, physical, and emotional abuse; physical and emotional neglect) and gender in this process.

**Methods:** The sample included 372 newlywed individuals recruited from marriage license records. Participants completed a number of self-report questionnaires measuring the nature and severity of child maltreatment history, perceived social support from friends and family, and trauma-related symptoms. These questionnaires were part of a larger study, investigating marital and intrapersonal functioning. We conducted separate, two-step hierarchical multiple regression models for perceived social support from family and perceived social support from friends. In each of these models, total trauma symptomatology was predicted from each child maltreatment severity variable, perceived social support, and the product of the two variables. In order to examine the role of gender, we conducted separate analyses for women and men.

**Results:** As hypothesized, increased severity of several maltreatment types (sexual abuse, emotional abuse, emotional neglect, and physical neglect) predicted greater trauma symptoms for both women and men, and increased physical abuse severity predicted greater trauma symptoms for women. Perceived social support from both family and friends predicted lower trauma symptoms across all levels of maltreatment for men. For women, greater perceived social support from friends, but not from family, predicted decreased trauma symptoms. Finally, among women, perceived social support from family interacted with child maltreatment such that, as the severity of maltreatment (physical and emotional abuse, emotional neglect) increased, the buffering effect of perceived social support from family on trauma symptoms diminished.

**Conclusions:** The results of the current study shed new light on the potential for social support to shield individuals against long-term trauma symptoms, and suggest the importance of strengthening perceptions of available social support when working with adult survivors of child maltreatment.

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## Introduction

Child maltreatment (i.e., sexual, physical, and emotional abuse; physical and emotional neglect) has long been recognized as a traumatic event capable of producing long-term psychological distress, including post-traumatic stress symptoms.

<sup>☆</sup> This research was supported by NIMH grant K01 MH066365 awarded to David DiLillo, Ph.D.

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However, there is substantial variability in the degree of long-term psychological difficulties reported by adult survivors. Recent research has focused on factors that may explain this variation. One such factor is the nature and severity of the maltreatment itself. Several studies of sexual abuse survivors suggest that abuse characteristics indicative of increased severity (e.g., more invasive, frequent, or enduring acts) contribute to increased long-term difficulties, including trauma symptoms (Risser, Hetzel-Riggin, Thomson, & McCanne, 2006; Steel, Sanna, Hammond, Whipple, & Cross, 2004; Trickett, Noll, Reiffman, & Putnam, 2001). In fact, in one population-based study of adult women, abuse involving penetration was found to be the single best predictor of PTSD (Kilpatrick et al., 1989). Although maltreatment types other than CSA have been less often studied, abuse severity of these types also appears to play a role in adjustment following maltreatment. For example, child physical abuse (CPA) resulting in greater physical injury has been linked to increased psychotic symptoms among adults (Schenkel, Spaulding, DiLillo, & Silverstein, 2005), while increased severity of emotional abuse, as rated by trained interviewers, is associated with more severe levels of depression (Bifulco, Moran, Baines, Bunn, & Stanford, 2002). Together, these findings suggest the importance of considering maltreatment severity – rather than simply dichotomizing samples into victims and nonvictims – when examining these experiences as risk factors for adult psychological symptoms.

### *Social support as a protective factor*

Social support is another factor that may contribute to the variability in long-term impairment among adult victims of child maltreatment. Social support has been theorized to shield trauma-exposed individuals from the development of posttraumatic symptoms (Brewin, Andrews, & Valentine, 2000; Guay, Billette, & Marchand, 2006). According to the stress buffering model, social support may mitigate the psychological impact of a stressful event by attenuating the stress appraisal response (Cohen & Wills, 1985). That is, an individual may deem an event less stressful if he or she perceives that others will provide resources needed to cope with the event. Social support following the stressful event may also facilitate cognitive and emotional processing, allowing victims to reappraise the event in a more adaptive manner (Thoits, 1986; Williams & Joseph, 1999). Meta-analytic findings show that a lack of social support is the single strongest predictor of the development of traumatic stress symptoms among military and civilian populations exposed to psychological trauma ( $ES = 0.40$ ; Brewin et al., 2000). While the studies included in this meta-analysis examined varying types of social support (e.g., perceived social support, structural support, functional support), researchers (Cohen & Wills, 1985; Sarason, Sarason, & Gurung, 2001) have found that perceived social support, in particular, best moderates psychological distress. In other words, the *perception* of one's ability to access social support, if needed, is likely more valuable than the actual support received immediately following a stressful event.

A number of studies support the notion that perceived social support lessens the long-term impact of maltreatment. For example, perceived social support may protect against feelings of loss among adult female victims of CSA attending college (Murthi & Espealage, 2005). Similarly, greater perceived social support from a spouse may increase resilience to difficulties in various domains of functioning among both female and male survivors of CSA, CPA, and neglect (Dumont, Widom, & Czaja, 2007). Among women seeking treatment at an outpatient clinic for psychological difficulties related to CSA, treatment focused on increasing the perception of available social support as a means of improving self-esteem also attenuated symptoms of post-traumatic stress disorder (Hyman, Gold, & Cott, 2003).

Despite these findings, there may be limits to the protective function conveyed by social support, particularly in cases of severe child maltreatment. Specifically, victims of severe maltreatment may perceive that the resources provided by family and friends will not provide sufficient benefit to aid in coping with intense post-traumatic reactions associated with severe victimization (e.g., fear, anger, avoidance). Findings from two prior studies support the possibility. In a study of undergraduate students (Scarpa, Haden, & Hurley, 2006), perceived social support from friends served as a buffer between community violence victimization (i.e., violence experienced within one's home, school, or surrounding neighborhood) and PTSD symptoms only when individuals had experienced fewer incidents of violence. In a second study, which examined adolescents and young adults transitioning out of the child welfare system, the effect of perceived social support in buffering relations between child maltreatment and depression diminished as the number of types of maltreatment experienced increased (Salazar, Keller, & Courtney, 2011). These studies suggest an attenuated benefit of social support with increasing trauma severity.

In sum, considerable evidence indicates that more severe child maltreatment is associated with increased psychological difficulties, including trauma symptoms, among adult victims (Bifulco et al., 2002; Risser et al., 2006; Schenkel et al., 2005). Further, theory and accumulating evidence indicate that perceived social support may buffer against the negative psychological consequences of child maltreatment (Dumont et al., 2007; Hyman et al., 2003; Murthi & Espealage, 2005). However, as indicated by recent empirical findings, the buffering effect of social support may vary depending on the severity and complexity of victimization experienced (Salazar et al., 2011; Scarpa et al., 2006).

### *The present study*

Building on this work, a major goal of the present study was to examine the moderating effect of perceived social support on associations between maltreatment severity and adult trauma symptoms. In doing so, we extended the current literature by considering the severity of multiple abuse types and gender in this process. Although most studies have focused on *female* victims of *sexual abuse*, physical abuse, emotional abuse, and neglect have also been linked to long-term trauma symptoms

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