

The Effects Childhood Sexual Abuse As Adults – Interpersonal Problems and Increased Likelihood of Revictimization: Cassen, Field, Koopman, Manning, Spiegel, Journal Of Interpersonal Violence 2001

60% of women sexually abused in childhood have been revictimized as adults (more than twice as frequent as women who had no history of childhood sexual abuse)

Sexually abused women were significantly more likely to be battered as adults (49%) versus 18% who had no history of childhood sexual abuse.

Childhood sexual abuse is a major predictive factor in sexual revictimization.

WHY:

1. Sexually abused children have lower self-esteem.
2. Learn maladaptive behaviors, attitudes, or beliefs.
3. Make poor relationship choices.
4. Tend to deny the impact of the abuse.
5. Demonstrate learned helplessness.
6. Tend to take on a parental role – the child learns to assume responsibilities of a parent and place the needs of a parent over her own. “Has very little idea how to balance obligation and entitlement in relationships leading to exploitation in subsequent relationships.”
7. Traumatic sexualization – compulsive sexual behaviors.
8. The betrayal from the abuse leads to faulty judgement with regard to the trustworthiness of others, or a profound need for compensatory relationships. These dynamics lead to increased vulnerability in relationships.
9. The powerlessness experienced in the original sexual exploitation can lead to a failure to prevent others from taking advantage of, or harming oneself.
10. Being a sexual victim is stigmatizing. The stigmatization lends toward increased low self-esteem, guilt, shame, and a consequent tendency to isolate oneself.
11. Thus, the consequences of the above mentioned dynamics move sexual victims toward the development of unhealthy relationships that in turn led to interpersonal difficulties. Interpersonal difficulties lend themselves to sexual revictimization.
12. Childhood victims of sexual abuse show signs of posttraumatic stress disorder. This disorder also causes interpersonal relationship problems.
13. Adult victims have greater difficulty being assertive in their relationships. This dynamic lends itself to revictimization.
14. Adult victims tend to be overly nurturing and socially avoidant.
15. Adult victims often blame themselves for the other person’s sexual feelings.
16. Adult victims have fewer appropriate and protective social contacts.

Posttraumatic Stress Disorder: A Brief Summary

The essential feature of Posttraumatic Stress Disorder is the development of characteristic symptoms following exposure to an extreme traumatic stressor involving direct personal experience of an event that involves actual or threatened death or serious injury, or other threat to one's personal integrity. Traumatic events that are experienced directly include, but are not limited to military combat, violent personal assault (sexual assault, physical attack, robbery, mugging), being kidnapped, being taken hostage, terrorist attack, torture, POW, natural or manmade disasters, severe automobile accidents. For children, sexually traumatic events may include developmentally inappropriate sexual experiences without threatened or actual violence or injury. PTSD symptoms may occur having witnessed the above mentioned events.

Symptoms:

1. Intense fear, helplessness, or horror (may be displayed by disorganized or agitated behavior)
2. Persistent re-experiencing of the traumatic event.
 - a. Recurrent and intrusive recollections of the event.
 - b. Recurrent distressing dreams during which the event is replayed.
3. Persistent avoidance of stimuli associated with the trauma and numbing of general responsiveness.
4. Symptoms occur for over a month.
5. The symptoms cause clinically significant distress in social, occupational, or other important areas of functioning.
 - a. In rare instances, dissociative states which may last minutes to days during which components of the event is relived and the person behaves as though experiencing the event at that moment.
 - b. Intense psychological distress.
 - c. Physiological reactivity (increased heart rate/respiration/blood pressure, etc) when exposed to events that trigger the memory – situations that may resemble or symbolize an aspect of the traumatic event. These stimuli are persistently avoided.
6. Deliberate efforts to avoid thoughts, feelings, or conversations about the traumatic event.
7. Deliberate efforts to avoid activities, situations, or people who arouse recollections of it.
8. The avoidance of reminders may include amnesia for an important aspect of the traumatic event.
9. Diminished responsiveness to the external world, referred to as "psychic numbing" or "emotional anesthesia", which usually begins soon after the traumatic event.
10. A lack of interest in or participation in activities previously enjoyed.
11. A marked feeling of detachment or estrangement for other people.
12. A markedly reduced ability to feel emotions, especially those associated with intimacy, tenderness, and sexuality.
13. May have a sense of a foreshortened future, such as not expecting to have a career, marriage, children, or a normal life span.
14. May have persistent symptoms of anxiety or increased arousal that was not present before the trauma.
 - a. Causing difficulty falling asleep or staying asleep which may be due to recurring nightmares.
 - b. Hypervigilance.
 - c. Exaggerated startle response
 - d. General irritability or outbursts of anger.
 - e. Difficulty concentrating or completing tasks.

The onset and duration of these symptoms may be ACUTE, CHRONIC, or may have a DELAYED ONSET.

Learned Helplessness: When we convince ourselves that we're missing something in the present that holds the key to our future. Usually, there's some trauma or event in the past that convinces us fate has already dealt us a losing hand, and that we're powerless to draw more cards.

It is a practiced way of viewing the future that keeps us dependent on the past.

An experiment on Learned Helplessness with dogs.

For several months at the Psychology Department at the University of Pennsylvania, they build a "shuttle box", a long, narrow wooden box with a wire grill floor that was divided into two compartments. Over the course of several months, they placed several different dogs in the box in the first section. At some point, they were given a painful, but not harmful shock. By jumping over a small barrier to the other section of the box, the dog could escape the shock.

As you might expect, the dogs in the study learned very quickly to jump over the barrier and avoid the shock. Small dogs, large dogs, even cats and mice, all reacted the same when put in the shuttle box. When a painful problem (the shock) presented itself, they took action to change their situation and move away from it.

In an unrelated experiment, a group of dogs were bound fast in body harnesses. Totally unable to move, they were delivered sixty-four five-second shocks over sixty minutes. Their responses were recorded and the "experiment" was concluded. The next day, these same dogs were put in the "shuttle box" experiment. The shock came on, and while all the dogs before them had jumped, these dogs did nothing. Instead of jumping over the small barrier in front of them like all the other animals had, they hunkered down, sat still, and endured the pain. After repeated shock, an animal might wander across the barrier, ending the shocks. But he didn't learn anything by it. The next time he was put in the box, he would again sit without moving. A normal dog would whine, bark, or in other ways vent its displeasure. What's more, it would actively make some movement to avoid the shock. But these animals did not. They were passive, almost stoic in the way they sat and endured the pain.

Physically, the animals had not been harmed. They were fully capable of taking action to escape the pain. But mentally, that small barrier between them and freedom became Mount Everest.

The conclusion drawn from the experiment was that uncontrollable negative experiences can freeze up an animal on the inside, making him passive, pessimistic, and withdrawn. Human beings are of course much more complex in their reasoning capabilities, but the comparisons are striking. When humans experience major trauma, from losing a spouse, a job, a parent's blessing, it affects us deeply. But for some of us, it not only marks our past, it immobilizes us as we face the future. Instead of actively trying to solve our problems, we can become passive, dependent, and depressed. In short, we learn that in the face of pain, escape is hopeless. And what's more, we internalize three terrible perspectives on our future.

1. Our efforts won't match our achievement.
2. The key to happiness is out of reach.
3. I'm all alone in my pain.

Further Effects:

1. A devastating blow to our sense of self-worth
2. In turn, results in intimacy difficulties in our most meaningful relationships.