Impact of sexual assault characteristics and childhood maltreatment on adult psychopathology

Tamar R. Macks BSc (Psych) Hons

This thesis is submitted for the degree of Master of Clinical Psychology

The University of Newcastle
August 2013
Statement of Originality

This thesis contains no material that has been accepted for the award of any other degree or diploma in any university or other tertiary institution and, to the best of my knowledge and belief, contains no material previously published or written by another person, except where due reference has been made in the text. I give consent to this copy of my thesis, when deposited in the university library, being made available for loan and photocopying subject to the provisions of the Copyright Act 1968.

Signed…………………………
Tamar Macks

Declarations

I hereby certify that the work embodied in this thesis has been carried out whilst I have been employed at the Newcastle Sexual Assault Service, Hunter New England Health Service. Clients of this service participated in my thesis research.

I hereby certify that the work embodied in this thesis contains an unpublished paper of which I am a joint author. I have included as part of the paper, a written statement, endorsed by my supervisor, attesting to my contribution to the joint publication/scholarly work. As the student, I took the lead research role and collaborated closely with my principal supervisor, Ms Kylie Bailey. Research advice was sought from Reverend Dr Martin Johnson, Dr Pete Kelly and Professor Mike Startup, who consecutively acted as my secondary supervisors.

Signed…………………………
Tamar Macks
Acknowledgements

Firstly, a sincere thank you to my principle supervisor, Kylie Bailey, whose steady, calm and wise guidance saw me through. Your patience won’t be forgotten! Thank you and appreciation to my other supervisors; Dr Pete Kelly, for helping with initial ideas and set-up; Professor Mike Startup, for guiding me through the Ethics maze, and to Reverend Dr Martin Johnson for helping to shape up my final submission. Thank you to Megan Valentine from the Statistical Support Service for your generous assistance.

I am lucky to have the most caring and dedicated work team. Thank you to all the clinicians at the Newcastle Sexual Assault Service for finding the time and energy to administer my questionnaires. Your support is greatly appreciated. Especially I am grateful to our clients, our brave and strong clients. You all gave your time and cooperation with a generous spirit. In our work, surely we see the best of people.

My son, this was a long project, and you were such a little trooper. A special thank you to my mother, for the many times she rescued my son while I was working on this project. To all my family and friends, sincere appreciation for all the times when I called on you to be extra helpful, understanding and patient.
Table of Contents

Statement of Originality ................................................................................................. i
Declarations ...................................................................................................................... i
Acknowledgements ........................................................................................................ ii
Table of Contents .......................................................................................................... iii
List of Tables ................................................................................................................... vi
Thesis Abstract .............................................................................................................. vii
Extended Critical Literature Review ........................................................................... 1
  Traumatic Events .......................................................................................................... 2
    Traumatic Events and Symptom Responses .............................................................. 2
    Traumatic Events Prevalence Rates ........................................................................... 3
    Sexual Assault Events ............................................................................................... 4
  Sexual Assault Characteristics .................................................................................... 5
    Physical Intrusiveness of Sexual Assaults ................................................................. 6
    Force-Related Strategies ......................................................................................... 6
    Relationship to the Perpetrator ................................................................................. 7
    Age of Onset .............................................................................................................. 8
    Number of Perpetrators ........................................................................................... 9
    Relationship between Sexual Assault Characteristics ......................................... 9
  Childhood Maltreatment (Abuse and Neglect) .......................................................... 10
Results ................................................................................................................................. 59

Demographic Characteristics ......................................................................................... 59

Hypothesis 1: Association of sexual assault severity with posttraumatic
stress symptoms, dissociation, depression and alcohol misuse. .............................. 61

Hypothesis 2: Associations of childhood maltreatment with posttraumatic
stress symptoms, dissociation, depression and alcohol misuse. .............................. 63

Discussion ....................................................................................................................... 64

Future Research ............................................................................................................. 69

Conclusion ..................................................................................................................... 69

References ...................................................................................................................... 71

Appendices ..................................................................................................................... 86
List of Tables

Table 1  \hspace{1cm} Sexual Assault Demographic Characteristics………………………………77

Table 2  \hspace{1cm} Associations between Sexual Assault Characteristics, Perpetrator Characteristics and Posttraumatic Stress Symptoms, Dissociation, Depression and Alcohol Misuse………….79

Table 3  \hspace{1cm} Associations between Sexual Assault Characteristics…………………80

Table 4  \hspace{1cm} T-tests and Effect Sizes of Perpetrator Characteristics with Posttraumatic Stress Symptoms, Dissociation, Depression and Alcohol Misuse…………………………………………..81

Table 5  \hspace{1cm} Associations between Traumatic Experiences Checklist Developmental Scales (Sexual Assault, Physical Assault, Emotional Assault and Emotional Neglect) with Posttraumatic Stress Symptoms, Dissociation, Depression and Alcohol Misuse……..82
This study used a retrospective design to investigate the impact of sexual assault (SA) severity characteristics as well as different types of childhood maltreatment experiences on current adult psychopathology. Participants \((N = 24)\) were recruited from a Sexual Assault Service with 20 reporting exposure to childhood sexual assault (CSA). Childhood maltreatment and sexual assault characteristics were measured using the Traumatic Event Checklist. Current adult psychopathology (PTSS, dissociation, depression and Alcohol misuse) were measured using the Posttraumatic Diagnostic Scale, the Dissociative Events Scale, the Beck Depression Inventory-II, and the Alcohol Use Disorders Identification Test.

The mean scores for the sample indicated that PTSS was in the *moderate to severe* range; dissociative symptoms were below clinical levels; depressive symptoms were in the *severe* range and alcohol misuse was in the *low-risk* range. This study found that: SA with force-related strategies had higher levels of adult dissociation; SA by more than one perpetrator had more severe adult depression; and older age of SA onset was associated with higher levels of alcohol misuse. There were no differences in adult PTSS, dissociation, depression and alcohol misuse for the perpetrator being a close family member, longer duration and higher number of SA occasions. CSA and childhood emotional abuse developmental scores were associated with dissociation. CSA scores were also associated with lower levels of alcohol misuse. Childhood physical abuse and childhood neglect did not associate with any of the adult psychopathologies. The pattern of associations between SA characteristics was
investigated. Consistent with previous research, childhood maltreatment types were all associated with each other.

The findings support previous studies that have found SA perpetrated with force or threat of force increased the range of psychopathology of the trauma response. The development of negative self-schema may mediate the association between more than one perpetrator of SA and adult depression. An older onset age of SA may influence the higher use of alcohol as an adult by being more available as a coping strategy at the time of the SA. The different types of childhood maltreatment contributed differently to PTSS, dissociation, depression and alcohol misuse. Further investigation into trauma-related predictors of adult psychopathology as well as the development of a standardised (retrospective) childhood maltreatment questionnaire is recommended.