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ABSTRACT

Because research has focused on psychopathology rather than psychological health, little is known about how child sexual abuse (CSA) survivors escape childhood trauma unharmed. This investigation sought to identify cognitive characteristics associated with resilience following a history of CSA. The study sample of 180 women was drawn from a small, public university. Questionnaires assessed demographic information, CSA history, cognitive characteristics and illusions, and current psychological functioning. Illusion was defined on the basis of three cognitive measures: (1) exaggerated perceptions of internal control over life events; (2) unrealistic optimism; and (3) accurate self-knowledge. Twenty-five percent of participants (n=45) reported a history of contact CSA, defined as unwanted sexual contact occurring prior to the age of 15 and initiated by someone 5 or more years senior. A greater percentage of abused women than nonabused women were represented by the lowest income category: below \$15,000. No significant differences were detected between the abused and nonabused women after performance of a multivariate analysis of variance on several measures. Perceptions of control and optimistic expectations of the future, even when exaggerated or distorted, appeared to facilitate adjustment for both groups, suggesting that cognitive methods of coping may be of help irrespective of trauma history. (RJM)

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Resilience in Child Sexual Abuse Survivors:

Healing Power of Illusions

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Problem

Researchers estimate that between 25% and 45% of women experience contact sexual abuse by the age of 18. The consequences of child sexual abuse (CSA) are severe and long-term; CSA has been associated with psychological, social, behavioral, and sexual dysfunction in adulthood (Beitchman et al., 1992; Browne & Finkelhor, 1986). However, some CSA survivors appear to experience little evidence of impact (Finkelhor, 1990). Because clinical research has tended to focus on psychopathology rather than psychological health, little is known about the means by which such resilient individuals escape childhood trauma unharmed.

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Psychological adjustment depends in part on cognitive factors. For example, illusions, or inaccurate self-perceptions and beliefs, appear to be associated with psychological well-being (Taylor & Brown, 1988). Resilience may hinge on the ability to retain or regain illusions after crisis experiences. This investigation sought to identify cognitive characteristics associated with resilience following a history of CSA.

Method

The study was conducted during the new student orientation program held prior to the start of the academic year at a small, public university. Approximately 91% ($n = 180$) of the 198 women enrolled in orientation volunteered to participate, completing questionnaires in small group sessions of 10 to 25 students. The majority of women were single (98%), white (94%), and Protestant (68%), and their mean age was 18.1 years. Family income was assessed according to the following categories: below \$15,000 (5%), \$15,001-\$30,000 (11%), \$30,001-\$45,000 (21%), \$45,001-\$60,000 (21%), more than \$60,000 (24%), and unknown (18%).

The questionnaire assessed demographic information, CSA history, cognitive characteristics and illusions, and current psychological functioning. CSA was defined as any experience of unwanted sexual contact (i.e., fondling, attempted intercourse, or intercourse) occurring prior to the age of 15, initiated by someone 5 or more years older. Illusion was operationalized on the basis of three cognitive measures: exaggerated perceptions of internal control over life events (Mastery Scale; Pearlin & Schooler, 1978), unrealistic optimism (Optimism Scale; derived from Weinstein, 1980), and accurate self-knowledge (Self-Consciousness Scale [private self-consciousness subscale]; Scheier & Carver, 1985).

Psychological well-being was assessed by an index of general happiness (Affectometer 2; Kammann & Flett, 1983), a life satisfaction instrument, and two measures of psychiatric symptomatology (SCL-90-R Anxiety, Depression Scales; Derogatis, 1977).

Results

Twenty-five percent of participants ($n = 45$) reported a history of contact CSA. CSA survivors did not differ from women with no history of CSA with regard to race, religion, or marital status. However, family income varied significantly between the two groups ($X^2 [5, n = 170] = 17.24, p < .01$), with a greater percentage of abused women (15.6%) than nonabused women (1.6%) represented in the lowest income category. In addition, CSA survivors were slightly younger than nonabused women ($M = 17.9$ years vs. $M = 18.2$ years; $t (174) = 2.28, p < .05$).

To assess differences in psychological well-being between the abused and nonabused women, a multivariate analysis of variance (MANOVA) was performed on the Affectometer 2 (Positive Affect and Negative Affect subscales), the Anxiety and Depression scales of the SCL-90-R, and the life satisfaction index. No significant differences between groups were detected ([Wilks's lambda = .99], $F[5, 168] = .20, p > .05$).

The measures of psychological well-being were standardized and combined to form one summary score of adjustment. To test the hypothesis that resilience is associated with illusion, Pearson correlations were conducted between the three cognitive measures and the adjustment index. For both abused and nonabused women, two of three correlations were significant: Better adjustment was associated with greater perceptions of internal control ($r = .74, p < .001$, abused; $r = .58, p < .001$, nonabused) and greater levels of unrealistic

optimism ($r = .65, p < .001$, abused; $r = .57, p < .001$, nonabused).

Interpretation

This study suggests that cognitive factors may ameliorate the long-term effects of contact CSA. Perceptions of control and optimistic expectations of the future, even when exaggerated or distorted, appear to facilitate adjustment. Such schemas constitute illusions to the extent that they collide with the probabilistic and factual realities of everyday life.

However, overall levels of adjustment reported by abused and nonabused women in the present investigation did not differ. The failure to detect a psychological impact of CSA may be due to this study's use of global rather than abuse-specific measures of psychological well-being (see Briere & Runtz, 1989; Elliott & Briere, 1992). In addition, admission to college may require a minimum level of psychological health, thereby serving to screen out more poorly functioning CSA survivors.

The relationship between illusion and psychological well-being held true for both abused and nonabused women, suggesting that cognitive methods of coping may be of help irrespective of trauma history. The finding of a relationship between illusion and adjustment conflicts with traditional wisdom that psychological health depends on realistic self-perception. Clinical work with CSA survivors may benefit from a cognitive focus that attends to the beneficial, adaptive aspects of *inaccuracy*.

References

- Beitchman, J. H., Zucker, K. J., Hood, J. E., daCosta, G. A., Akman, D., & Cassavia, E. (1992). A review of the long-term effects of child sexual abuse. Child Abuse & Neglect, 16, 101-118.

- Briere, J., & Runtz, M. (1989). The Trauma Symptom Checklist (TSC-33): Early data on a new scale. Journal of Interpersonal Violence, 2, 367-379.
- Browne, A., & Finkelhor, D. (1986). Impact of child sexual abuse: A review of the research. Psychological Bulletin, 99, 66-77.
- Derogatis, L. R. (1977). SCL-90: Administration, scoring and procedures manual for the revised version. Baltimore, MD: Clinical Psychometric Research.
- Elliott, D. M., & Briere, J. (1992). Sexual abuse trauma among professional women: Validating the Trauma Symptom Checklist-40 (TSC-40). Child Abuse & Neglect, 16, 391-398.
- Finkelhor, D. (1990). Early and long-term effects of child sexual abuse: An update. Professional Psychology: Research and Practice, 21, 325-330.
- Kammann, R., & Flett, R. (1983). Affectometer 2: A scale to measure current level of general happiness. Australian Journal of Psychology, 35, 259-265.
- Pearlin, L. I., & Schooler, C. (1978). The structure of coping. Journal of Health and Social Behavior, 19, 2-21.
- Scheier, M. F., & Carver, C. S. (1985). The self-consciousness scale: A revised version for use with general populations. Journal of Applied Social Psychology, 15, 687-699.
- Taylor, S. E., & Brown, J. D. (1988). Illusion and well-being: A social psychological perspective on mental health. Psychological Bulletin, 103, 193-210.
- Weinstein, N. D. (1980). Unrealistic optimism about future life events. Journal of Personality and Social Psychology, 39, 806-820.