



The Effect of Complex Childhood Trauma on Adult Mental Health

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ABSTRACT

- The current study is a secondary analysis, with data obtained from the Childhood Adversity and Traumatic Stress Among Inpatients at a Psychiatric Hospital in the Baltimore Area from 1993-1995 (ICPSR 36168).
- This sample size for this study is 212 with data collected in the original study through interviews and validated assessments.
- Overall, the results of this study indicate that symptomatology across all abuse groups is higher when both physical and sexual abuse are present.
- These results indicate a significant difference among abuse groups, thus supporting the hypothesis, and are consistent with previous research and literature.
- The results of this study, combined with previous literature regarding Adverse Childhood Experience's and childhood trauma, will aid in the education and empowerment of clinicians to better understand the need for routine assessment of childhood trauma.

INTRODUCTION

- The impact of trauma on the brain has been researched for many years, but the long-lasting impact of childhood trauma is a more recently emerging focus.
- The Adverse Childhood Experiences (ACE) study, done by Kaiser in 1995-1997, provided evidence adverse childhood events can have a significant impact on adults later in life, both mentally and physically (Feletti et al., 1998).
- The purpose of this study is to increase knowledge related to adult mental health.
- The research question for this study is: what is the effect of complex childhood trauma on adult mental health?
- It is hypothesized that study participants who experienced complex childhood trauma will have increased symptomatology of adult mental health diagnoses.
- Mental health disorders are reported in 1 out of every 8 emergency room visits, or approximately 12 million visits per year. Of individuals seeking treatment, 20% are diagnosed with a mental health disorder each year (National Alliance on Mental Illness, 2019).
- This research could fuel grants for prevention and education programs and overall awareness into the mental and physical impacts appearing in adulthood, which stem from childhood experiences and trauma.

LITERATURE REVIEW

- The American Psychiatric Association (2013) defines trauma as experiences that threaten death, injury, or create feelings of fear and helplessness. In childhood, trauma experiences negatively impact social, emotional, and cognitive development (Schneider et al., 2017).
- In the U.S., one in five adults experiences mental illness each year, with one in twenty-five adults experiencing a serious mental illness (NAMI, 2019).
- There are severe discrepancies in the accuracy of reports, as many clinicians do not assess for childhood trauma when working with clients (Rossiter et al., 2015).
- In some cultures, the lines between discipline and abuse may be easily blurred (Mersky & Janczewski, 2018). Thus, researchers often struggle to create a comprehensive definition of childhood trauma.
- The current study will add to the literature by providing data which will help local, state, and federal agencies provide better prevention, education, and treatment for individuals who have experienced complex childhood trauma.

METHODS

- This is a secondary analysis with data obtained from the Childhood Adversity and Traumatic Stress Among Inpatients at a Psychiatric Hospital in the Baltimore Area from 1993-1995 (ICPSR 36168). The sampling frame includes all new patients during 1993-1995 between the ages of 27 and 45. Researchers used the convenience sampling method and the study is cross-sectional.
- Researchers contacted the 591 patients who met the sampling criteria and 217 completed all or most of the interview. This study utilized the entire original sample, minus five individual reports that were incomplete. Thus the sample size for the current study is 212.
- The majority of participants are Caucasian (78.6%) and just over half are female (52%). The second largest ethnic group in this study is African Americans at 18.7%. The average age of the sample is 37.74 years old.
- Operational definitions of IV and DV

Characteristics	Frequency	Percentage (%)
SEX		
Female	122	57.50
Male	90	42.50
RACE		
White	171	81.80
Black	35	16.70
Other	3	1.40
ABUSE		
No Abuse	43	20.30
Physical Abuse	64	30.20
Sexual Abuse	19	9.00
Both	86	40.6

Characteristics	Mean	SD
AGE	37.74	4.83
SCL_ANX ^a	1.90	1.03
SCL_DEP ^b	2.28	1.01
PRES_PT ^c	29.33	16.32

^a Scores range from .00 to 3.90. Higher scores indicate higher levels of anxiety.

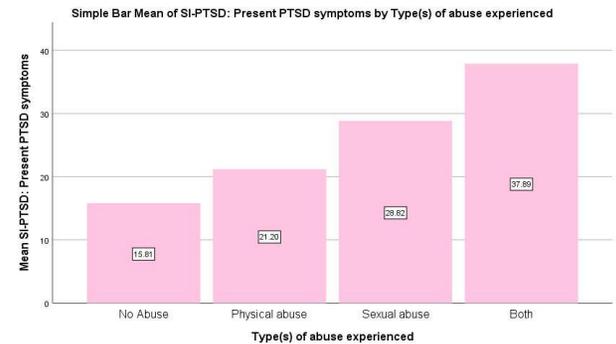
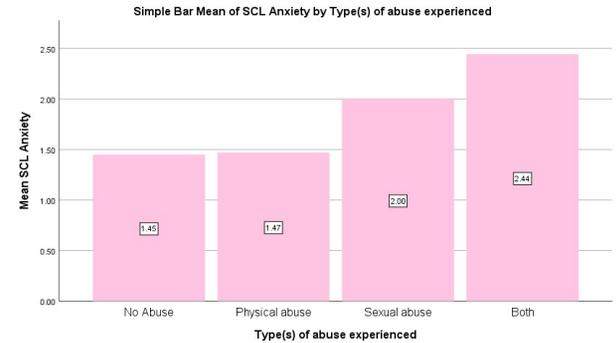
^b Scores range from .00 to 4.0. Higher scores indicate higher levels of depression.

^c Scores range from 0 to 60. Higher scores indicate higher levels of post-traumatic stress.

RESULTS

- One-way ANOVA tests comparing mean anxiety and mean PTSD scores by abuse group, and a Kruskal-Wallis H test comparing mean depression scores by abuse group were compared.
 - Participants who experienced both physical and sexual abuse had significantly higher anxiety ($M = 2.44, SD = .91$) than study participants who experienced only physical abuse ($M = 1.47, SD = .99$).
 - Participants who experienced both physical and sexual abuse had significantly higher PTSD ($M = 37.89, SD = 14.18$) than study participants who experienced no abuse ($M = 15.81, SD = 10.82$) as well as those who experienced only physical abuse ($M = 21.2, SD = 13.97$).
 - Participants who experienced both physical and sexual abuse were significantly more depressed ($M = 2.72, SD = .90$) than participants who experienced only physical abuse ($M = 1.96, SD = 1.06$).

RESULTS GRAPHICS



CONCLUSIONS

- The findings of this study are consistent with previous research and literature.
- The results of this study, combined with previous literature regarding ACE's and childhood trauma, will educate and empower clinicians to better understand the need for routine assessment of childhood trauma (Feletti et al., 1998).
- A limitation to this study is the lack of acknowledgment of resiliency and protective factors. This data could help explain some of the unexpected results and better understand the expected results.
- Understanding the lifelong impact childhood trauma has on individuals will assist clinicians in better understanding and treating their clients. Educating those in the community, including parents, families, teachers, etc. on childhood trauma may assist with prevention efforts and early intervention of those impacted by childhood abuse.