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Some Mental and Physical Health Outcomes Associated with Sexual Abuse in Childhood: A Community Survey of New Zealand Women

A thesis presented in partial fulfilment of the requirements for the degree of Master of Arts in Psychology at Massey University, Palmerston North, New Zealand

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Abstract

This study examines the long-term impact of childhood sexual abuse (CSA) on mental and physical health functioning, as well as the potentially mediating effects of PTSD symptomatology in a community sample of 964 New Zealand women. In total 63% ($n = 606$) of women surveyed reported experiencing a traumatic event in their lifetime, of which 16 experienced CSA only and 114 experienced multiple types of traumatic events including CSA. Current mental health functioning was examined using measures of Posttraumatic Stress Disorder (PTSD) symptomatology and psychological distress. Measures of physical health symptoms, chronic health, and health care use were used to assess current physical health functioning. Significantly higher levels of PTSD symptomatology and psychological distress were found among women with histories of CSA in comparison to nontraumatised women. Elevated levels of physical health symptoms were also found in women who had experienced multiple types of traumatic events including CSA in comparison to nontraumatised women. Findings indicate that the main effects of traumatic experiences involving CSA on psychological distress and physical health symptoms were partially mediated by PTSD symptomatology. Among women with histories of CSA, hierarchical multiple regression analyses were used to evaluate the impact of CSA characteristics and contextual factors on current mental and physical health functioning, over and above that explained by relevant demographic and background variables. Among the CSA variables, appraisals of CSA effecting many areas of a survivor’s life were associated with higher levels of PTSD symptomatology. Higher levels of chronic health problems were associated with experiences involving physical injury and appraisals of CSA as uncontrollable were related to increased health care use. In conclusion, traumatic experiences involving CSA can negatively impact on the current mental and physical health functioning of women. However, a higher risk of adverse outcomes is associated with several CSA factors. These findings indicate the importance of ensuring the development and provision of services aimed at preventing and ameliorating the impact of exposure; the need to comprehensively assess survivors in both clinical and health care settings; and the utility of further research examining factors which may influence individual variability in adaptation, as well as subsequent trauma exposure.
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