

Retrospective Re-Appraisal of Childhood Maltreatment During Parenthood

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Abstract

Background: Child maltreatment is associated with poorer physical and mental health outcomes across the lifespan. Prior research has suggested that individuals' appraisals of childhood maltreatment have important implications for physical and mental health outcomes. Research has also shown that appraisal is shaped by biological, psychological, and social-cultural factors, each of which undergoes change in parenthood.

Hypotheses: Parenthood may prompt re-appraisal of childhood maltreatment, given that parenting evokes experience of being parented. Re-appraisal will be more likely in parents than non-parents. In parents, re-appraisal will be more likely among primiparous parents, parents with offspring of the same sex, and parents who experienced maltreatment after age five.

Method: This research uses existing data from a prospective longitudinal study that followed individuals with court-substantiated histories of childhood maltreatment, and demographically matched controls into adulthood. At two different time points 22 years apart, 867 parents and 328 non-parents completed questionnaires that asked them to report (yes or no) about previous experiences of childhood sexual and physical abuse. Re-appraisal is operationalized as the change in responses representing the retrospective self-reports of childhood maltreatment. Potential bias from social desirability is assessed with the Marlowe-Crowne Social Desirability Scale.

Analyses: Chi square tests were conducted to examine group differences in re-appraisal of sexual abuse and physical abuse. Logistic regressions were conducted to estimate adjusted odds ratios of re-appraisal among these groups.

Results: Re-appraisal did not differ significantly between parents and non-parents overall. However, re-appraisal of sexual abuse specifically differed in comparisons between: 1) control versus maltreated parents; 2) control versus maltreated non-parents; 3) parents maltreated before versus after age five; and 4) newer parents versus existing parents who had children at both time points.

Discussion: Clinical implications are considered for treating psychopathology and supporting wellness in survivors of childhood maltreatment. Factors influencing re-appraisal of sexual abuse are considered.