Empirical Investigations of Betrayal and Memory Impairment

Jennifer J. Freyd
University of Oregon

References to works cited at:
http://dynamic.uoregon.edu/~jjf/ISTSS2000.html

Initial Question
- Observation: Sometimes people remain unaware of (or forget) a traumatic experience
  - For example, Frank Fitzpatrick forgot (and later remembered) being abused by James Porter (Freyd, 1996; 1999)
- Question: Why and how would individuals remain unaware of (or forget) traumas they had experienced?

A different question often asked:
- “Are recovered memories accurate?”
- Common conflation of memory accuracy with memory persistence
- Separate dimensions (Freyd, 1998)

Betrayal Trauma Theory Addresses
- Motivations: Why remain unaware of (or forget)?
- Mechanisms: How to remain unaware of (or forget) trauma?
The Core of the Motivation Hypothesis: Betrayal Blindness

- Human Sensitivity to Betrayal
- Dependence in Humans
- Betrayal Blindness

Human Sensitivity to Betrayal

- Ability to evaluate trustworthiness highly important to social species
- Empowered individuals are likely to be exquisitely aware of betrayal
- Cosmides proposed humans have evolved “cheater detectors”
- Typical response to betrayal is withdrawal or confrontation

Dependence in Humans

- Social animals depend on others
- Human children are extremely dependent
- Attachment system protects dependent person/child
- Baby has “job:” (love and be lovable):

Betrayal Blindness

- What does a child do when caregiver betrays?
- Betrayal blindness occurs when awareness would threaten necessary (or apparently necessary) relationships
- Example: a child abused by a caregiver would risk further mistreatment if awareness caused withdrawal or conflict
- Thus unawareness and forgetting are sometimes an adaptive response to betrayal
Betrayal Trauma theory

- Two distinct dimensions of traumas:
  - **Life-threat** may be primary for anxiety, hyperarousal and intrusive memories
  - **Social-betrayal** may be primary for symptoms of unawareness and forgetting.

<table>
<thead>
<tr>
<th></th>
<th>Low</th>
<th>High</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fear</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Social</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Betrayal</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Examples:
- some sex abuse
- some emotional abuse

Examples:
- sadistic abuse by caregiver
- Holocaust

Investigating Mechanisms

- Research Strategy:
  - High dissociators more likely to be trauma survivors
  - Select individuals with high dissociative tendencies and compare to low dissociator controls in cognitive laboratory tasks
  - Basic attentional differences between high and low dissociators observed (Freyd et al. 1998; DePrince & Freyd, 1999; Freyd & DePrince, in press)
  - Divided attention may help dissociators keep betrayal trauma information out of awareness

Investigating Mechanisms (cont.)

- High dissociators remember fewer trauma words than do low dissociators relative to neutral words (DePrince & Freyd, 1999; DePrince & Freyd, under review; DePrince & Freyd poster)

Example charged words: victim, incest, assault, rape


Investigating Motivations

- BT theory predicts that forgetting and unawareness will be greater for betrayal traumas than non-betrayal traumas
- Specific prediction: childhood abuse perpetrated by a caregiver will lead to more memory impairment than will abuse perpetrated by a non-caregiver.
- Freyd (1996) reported preliminary support for prediction by comparing memory for incestuous versus non-incestuous and parent versus non-parent perpetrated abuse based on re-analysis of extant data sets.
- Freyd, DePrince, & Zurbriggen, (under review) used a more detailed measure (the BTI) of perpetrator caretaker status and victim memory
**The Betrayal Trauma Inventory (BTI) Under Development**

- Assesses physical, emotional, and sexual abuse in childhood and some adult traumas.
- Behaviorally defined events (e.g., “Before you were the age of 16, someone held your head under water or tried to drown you.”)
- Items based on Lisak, et. al with modifications and expansions
- If participant indicates “yes” to the event, he or she is asked to answer subquestions.

**The Betrayal Trauma Inventory (cont.)**

- Many factors in subquestions, including age, relationship, severity of injuries, memory for the event, etc.
- Caretaker question regarding perpetrator: “Was the person responsible for caring for you (for example providing you with food or shelter)?”
- Memory subquestions: Series of questions regarding knowledge of the event and event details over time; single scale of memory impairment (0-1) derived for preliminary analysis.
- BTI used on college student, community, and clinical samples.

**Preliminary Results from the BTI (Freyd, DePrince, & Zurbriggen, under review)**

- College student population of 202 participants
- Abuse perpetrated by a caregiver is related to less persistent memories of abuse.
- Caretaker status significant for sexual and physical abuse.
- Follow-up regression analyses: Age and duration of abuse did not account for findings

**Concluding Remarks**

- Memory for physical and sexual abuse by a caretaker found to be less persistent than memory for non-caretaker abuse.
- Limitation: retrospective recall for abuse experiences and memory; external corroboration not obtained.
- Future studies with a prospective design and/or external corroboration would be useful.
- Implications for several controversies
  - Does not support Read & Lindsay’s (2000) claim that childhood events (including abuse) are forgotten at similar rates.
  - Does not support Terr’s (1991) hypothesis that repetition is a cause of forgetting (repetition likely co-varies with perpetrator relationship)

- Additional analysis and research is required for further disentangling of many co-varying factors
- Clinical implications include suggestion that focusing on the victim-perpetrator relationship, the role of betrayal, and healing human relationships crucial for some trauma survivors.