The Ethics of Asking and Not Asking About Abuse

Kathryn Becker-Blease
Crimes Against Children Center, UNH
kblease@cisunix.unh.edu

Jennifer J. Freyd
University of Oregon

Benefits of Asking about Abuse

• Benefits to science/humanity
  – Reduce costs related to outcomes of abuse
  – Improve well-being
• Benefits to participant population
  – Prevent others from being abused
  – Assist those who have been abused
  – End stigma
• Benefits to actual participants
  – Provide information and support to research participants who disclose abuse
Risks of Asking about Abuse

- Sometimes, although rarely, participants may become upset by research on abuse.
- Researchers and IRBs should focus on response plans when asking participants to disclose abuse.

“What would happen if one woman told the truth about her life? The world would split open.” -- Muriel Rukeyser

Why do some not ask about abuse?

- “We’ll lose longitudinal participants”
- “The IRB won’t let us”
- “Our staff isn’t trained to deal with those people”
- “I don’t feel comfortable asking people those questions”
Belief 1: Asking about abuse requires reporting abuse.

- Researchers may not be mandatory reporters (depends on jurisdiction, Liss, 1994).
- Ethical debriefing is possible without reporting.
- Anonymous research methods avoid need to report.
- Confidentiality certificates MAY protect researchers from reporting.

Belief 2: Reporting abuse means losing participants.

- Researchers who do longitudinal research and ask about abuse do not report a problem (e.g. Putnam, Liss & Landsverk, 1996).
- Participants deal with mandatory reporters in everyday life (e.g. teachers, benefits workers, etc).
- Researchers can assist with self-reporting.
Belief 3: Asking about abuse exposures participants to upsetting stimuli beyond what they experience in everyday life.

• Talk shows, movies, classroom activities, required readings, etc. routinely discuss abuse and other trauma.

• Media is much more graphic than survey questions.

• Traumatic reminders tend not to be straightforward questions about trauma. Seemingly innocuous stimuli, like smells, are more likely triggers.

Belief 4: Asking about abuse causes psychological harm.

• Reports of distressed participants in trauma research are rare (e.g. Park and Blumberg (2002), C. L. Park, personal communication, September 2, 2003).

• Questions do not cause harm, trauma causes harm.

• Distress is not necessarily the same as psychological harm.
Belief 5: Survivors are emotionally unstable, unable to assess risk of participation or seek help if necessary.

- When asked, most participants in abuse research say they accurately predicted how upset they would be, and
- Even most of those who experienced more upset than predicted did not regret participation (Walker, Newman, Koss and Bernstein, 1997; Newman, Walker and Gefland, 1999).
- Treating survivors as overly weak and vulnerable is not ethical.

Belief 6: Asking participants about abuse has no direct benefits to participants.

- IRBs and researchers sometimes overemphasize risks to parents if researchers report abuse while underestimating benefits to child.
- When asked, most participants in abuse research report that they were neutral or agreed with the statement that they “have gained something positive” from the research. (Walker, Newman, Koss and Bernstein (1997); Newman, Edward and Gefland (1999)).
- Therapists may underestimate their clients’ reports of positive benefits of participating in a research study (Marshall and colleagues (2001)).
- Sex offender comment: “This was a helpful survey. It shows me where I’ve been, versus where and what I am today...This survey also shows me how careful today I need to be as not to fall back into those old behaviors anymore. Thank you for this survey.” (Becker-Blease & Freyd, in prep).
Belief 7: There are no costs to NOT asking about abuse.

• Science loses information.
  – When statistical models fail to include abuse, variance attributed to other predictors is inflated.
• Society loses information necessary for social services, public policy and therapy.
• Survivors lose: a “don’t ask, don’t tell” policy reinforces feelings of shame.

Conclusions

• IRBs and researchers need better data
  – on the frequency and types of harm that results from participation in abuse and a control group of those participating in other forms of research.
  – AND on the harm from NOT asking about abuse.
  – Best ways to report abuse in research settings, and the outcomes of reporting abuse.

• We need the perspective of survivors and research participants.