

Why many people don't talk about traumatic events until long after they occur

August 3 2016, by Joan Cook

When longtime former Fox News anchor Gretchen Carlson filed suit July 6 for sexual harassment against the network's former boss, Roger Ailes, the public response was less than kind. There were [expressed disbelief](#) and [rebuttals](#) that she was [fabricating her story](#) in retaliation for being fired.

Many asked: If it was so bad, why didn't she come forward earlier?

As a trauma psychologist, I know her behavior was consistent with many women who experience various forms of [sexual assault](#). Many women [don't tell anyone](#) for a long time, if ever. And they typically don't report these experiences publicly or to authority figures like the [police](#).

People should remember that this type of delay is normal when they experience or hear about [traumatic events](#). That applies to sexual assault, harassment and many other traumatic events.

Affirmation is comforting, blaming is not

When something bad happens, from an argument with a loved one to a flat tire or an unfavorable review at work or school, many of us want to reach out and tell someone we love. We look to them for confirmation of our perspective and occasionally for help in problem-solving. We particularly like it when that person tells us this was a crummy event and we're [not to blame](#) for its [occurrence](#).

But after traumatic events, such as physical or sexual assault, [domestic violence](#) or combat, that threaten to rob us of our dignity and spirit, people [typically don't tell others](#). In fact, many trauma survivors either never speak to anyone about what happened to them or [wait a very long time](#) to do so. The reasons for this are multi-fold and likely include shame, perceived stigma of being a "victim," past negative disclosure experiences and fears of being blamed or told that the event was somehow their fault. And when it comes to reporting [sexual harassment, women fear for their jobs, promotions or placements](#).

This is demonstrated in the findings from a nationally representative survey of women on trauma and [mental health](#), in which more than a quarter who had been raped as children never told anyone before [disclosing](#) it in the research interview. In fact, almost [50 percent](#) of women who had been raped did not disclose their sexual assault for at least five years afterwards.

For some, talking about their trauma is an initial step toward healing. But for others, sharing an experience and then having the response be negative can harm recovery. It can shut them down and lock the psychological vault, if not for forever, then at least for a long time. Directly experiencing terrorist events like those in Nice or shootings in Dallas and Baton Rouge can have a similar effect.

I had the pleasure of working with World War II former prisoners of war years ago. One told me that shortly after his release from captivity, an acquaintance asked him, "Why'd you surrender to the Germans?"

This seemed like an accusation to the former POW, a threat to his judgment and behavior. It resulted in years of silence and solitude for him.

Nearly five decades later, this incredible man who had so bravely fought

for our country sat in group therapy. He was visibly shaken and screamed, "I should've said, 'You would've gone too, if you had a German luger pointed at your head.'"

'I know just how you feel!' – not so much

Sadly, insensitive responses to [traumatic disclosure](#) are common. My patients tell me that frequently the first words out of people's mouths are statements like, "Oh, that's no big deal," or "It's in the past, leave it there," or "Did that really happen?" or "[Eh, get over it.](#)"

Of course, it's not just what people say that can make a disclosure experience harmful. [Nonverbal messages](#) such as poor eye contact, disapproving body postures and physical distance are also impediments to disclosure. They, too, can [thwart recovery](#).

In addition to verbal and nonverbal messages we receive from others, there are other barriers to disclosure. For example, children who experienced various forms of abuse, including physical, sexual or emotional, or who experienced neglect or witnessed domestic violence report [shame, fear of losing social support](#) and uncertainty as to how and to whom to disclose their experiences.

Most children reported that they preferred to disclose such traumas to parents or siblings as opposed to professionals, but many did not have [family members](#) with loving ears and hearts. And if an abuser was a [family member](#), this presented the victim with even higher hurdles in finding a person to disclose to as well as to the receptivity and reception they'd receive.

For members of the Armed Forces returning from the wars in Iraq and Afghanistan, having a positive attitude toward disclosure was the most [powerful predictor](#) of positive psychological growth. Veterans willing to

discuss their traumas were far more likely to eventually work through their experiences than those who refused to share. This reinforces what the field of trauma studies has known for a long time, that there are physical and mental health benefits to [supportive disclosure](#) of trauma, even if these events had previously been disclosed.

Listening: a sign of love and understanding

One of our tasks as researchers is to determine what makes up a supportive response to trauma disclosure and then teach family members and friends how to provide such a response to those in need. Is there a way to script a response that is both genuine and effective when faced with a friend or family member disclosing an awful event?

In an innovative study design, psychologists at the University of Oregon examined the impact of [skills training](#) on responses to disclosures of maltreatment. Over 100 pairs of friends were randomly assigned to a role (discloser or listener) and a condition (experimental or control).

The disclosers were asked to tell their friend about a time in which they felt mistreated by someone close to them, someone with whom they trusted, cared for, depended upon. The listeners in the experimental condition were coached on evidence-based ways to verbally and nonverbally support their friend. These included things like refrain from changing the topic, allow for silence, focus on the other person's experience and not your own, and point out their strengths.

Listeners who received this short, easy-to-administer intervention exhibited significantly fewer unsupportive behaviors than listeners in the control condition.

Talking about a specific trauma isn't easy, whether we're on the sharing or on the receiving end. To not disclose or not to be supportive to those

disclosing is likely bad for our well-being and unhealthy for our families and communities.

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