

A Three-Month Prospective Investigation of Negative Cognitions in Predicting Posttraumatic Stress Symptoms: The Mediating Role of Traumatic Memory Quality

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Recently, several studies have indicated that trauma survivors may adopt an extreme view about dangerousness of the world and lack ability to cope with threat and stress after the trauma, thus raise their risk of chronic PTSD. Other theories have postulated that quality and nature of trauma memories may relate to the presence of pathological stress reactions. The failure to integrate traumatic memories may impart its potential to cause posttraumatic stress disorders. Traumatic memories, as a kind of cognitive representation, appears to be more related to the core symptoms of PTSD (e.g., intrusive symptoms) at psychopathological level. Hence, it may serve as a mediator between posttrauma negative beliefs and subsequent PTSD. By integrating these two lines of research findings, the present study attempted to address a framework that links negative beliefs, traumatic memory, and PTSD and investigate their associations.

Participants included 61 college students who had experienced at least one traumatic event that satisfied *DSM-IV* PTSD criteria A. They were administered the Posttraumatic Diagnostic Scale (PDS), Posttraumatic Cognitions Inventory (PTCI), and Depressive Subscale of Symptom Checklist 90-R (SCL-90-R) at Time 1 (T₁). Modified Traumatic Memory Inventory with the same above-mentioned protocol was given again at follow-up assessment 3 months after the initial assessment (T).

Results indicated that 1) PTSD symptoms at T₂ could be predicted by negative self and world beliefs but not self-blame thinking at T₁, after controlling for gender, age, as well as PTSD and depressive symptoms at T₁; 2) Reexperiencing symptoms at T₂ could be predicted by negative self and world beliefs at T₁, and the predictive effect of negative self belief at T₁ was higher than the other beliefs at T₁. Avoidance symptoms at T₂ could be predicted by negative world beliefs at T₁, and the predictive effect of negative world belief at T₁ that merely reached marginally significant level was higher than the other beliefs at T₁; 3) PTSD symptom at T₂ could be accounted for by concurrent overwhelming traumatic memory, after controlling for gender, age, as well as PTSD and depressive symptoms at T₁. However, the remaining variables of trauma memory did not account for significant variance; 4) by using path analysis; we found that overwhelming traumatic memory at T₂ mediated the relation between negative self and world beliefs at T₁ and subsequent PTSD symptoms at T₂.

Overall, it was demonstrated that posttrauma negative beliefs and traumatic memory quality may contribute to the maintenance of PTSD symptoms. These findings are parallel to recent cognitive theories of PTSD.

Keywords: PTSD, traumatic memory, posttrauma cognitions, PTCI

