

Strong relationships in midlife may offset health risks for victims of childhood abuse

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Research has linked childhood abuse to many adverse health outcomes in adulthood, including premature mortality, but according to new Northwestern University research, supportive relationships in midlife

can partly compensate for the mortality risks linked to childhood abuse.

"This is one of the first studies to provide evidence suggesting that experiences long after exposure to [abuse](#) can mitigate the [mortality](#) risks associated with early abuse," said Jessica Chiang, lead author of the study.

Given the serious health consequences of [childhood abuse](#) later in life, such as heart disease, stroke and some cancers, Chiang and her co-authors wanted to examine whether there's anything that can be done to compensate or reverse these effects.

"Many of the diseases associated with childhood abuse typically emerge in middle and later stages of adulthood—decades after the abuse actually occurred," said Chiang, a postdoctoral fellow with Northwestern's Foundations of Health Research Center and its Institute for Policy Research. "We were curious as to whether [social support](#) during this 'incubation' period or interim could offset health risks associated with much earlier experiences of abuse."

Using a sample of more than 6,000 adults from the National Survey of Midlife Development in the United States, the researchers examined whether adult self-reported social support decreased mortality risk associated with self-reported exposure to three types of childhood abuse: severe [physical abuse](#), modest physical abuse and emotional abuse.

Social support was associated with a lower mortality risk, which the researchers expected given prior research.

"Importantly, however, the magnitude of the reduction in mortality risk associated with midlife social support differed between the individuals who reported childhood abuse and those who reported minimal or no childhood abuse," Chiang said.

"Specifically, more social support was associated with a 19 to 26 percent lower mortality risk depending on abuse type—severe physical abuse, moderate physical abuse or emotional abuse—in those who reported childhood abuse. It was associated with a more modest 7 to 8 percent lower mortality risk in those who reported minimal or no exposure to abuse," she said.

Chiang said the findings are hopeful, adding that it will be important for future work to replicate and build on their findings.

"For example, we'll also need to develop a better understanding of how support later in life can actually counteract the health effects of early abuse," Chiang said. "Do they act on certain biological processes that increase risk for poor health—for instance, delaying age-related increases in systemic inflammation? Or perhaps they help victims of childhood abuse overcome other negative sequelae related to abuse, such as lower educational attainment, lower earnings and poorer mental [health](#)."

"Midlife self-reported social [support](#) as a buffer against [premature mortality](#) risks associated with [childhood](#) abuse" was published today (March 5) in *Nature Human Behaviour*. Additional co-authors include Edith Chen and Gregory E. Miller, professors at Northwestern's Institute for Policy Research. The research was supported by the National Heart, Lung and Blood Institute.

More information: Midlife self-reported social support as a buffer against premature mortality risks associated with childhood abuse, *Nature Human Behaviour* (2018).
[nature.com/articles/doi:10.1038/s41562-018-0316-5](https://doi.org/10.1038/s41562-018-0316-5)

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