Interpersonal Guilt and Responses to Terrorism

Two months after the terrorist attacks of September 11th, we examined the responses of 163 ethnically diverse west coast college students. Using the Interpersonal Guilt Questionnaire, the Responses to Terrorism Scale, and the Brief Five Inventory, we found that students who were high on broadly defined trait survivor guilt (worry about being better off than others), separation guilt, and omnipotent responsibility guilt suffered from PTSD-like syndromes or depression, in the wake of future terrorist attacks or other significant traumas.

Abstract

While the terrorist attacks on the World Trade Center and the Pentagon on September 11th changed the lives of most Americans, including those who neither lived near the event nor had friends or relatives directly impacted, some people appear to have suffered more extreme and protracted effects from the trauma than others who were not affected by the attacks. It was our clinical judgement that people who were high on neuroticism and exhibited high levels of depression (obsessions), emotional (fear), and/or behavioral responses, even while controlling for neuroticism, were significantly more in need of help. We discuss clinical implications and hypothesize that people who are high in guilt proneness may be more likely to develop PTSD-like syndromes or depression, in the wake of future terrorist attacks or other significant traumas.

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Methods

Participants

Participants were 163 (42 male and 121 female) college students. Participants received additional credit in their class for participation in the study.

Instruments

Responses to Terrorism Scale (OTS; O'Connor & Berry, 2001) is a 26-item self-report measure. The RTS includes three subscales: Obsession with Terrorism (OT), Avoidance of Terrorism (AT), and Emotional Inhibition due to Terrorism (ET). OT includes obsessive cognitions related to the events of September 11th and the bioterrorist attack that followed. AT includes items related to fear and anxiety in the wake of the terrorist attacks. ET includes items related to fear and inhibition of normal activities. Finally, these results suggest that people who are high in guilt proneness may be more likely to develop PTSD-like syndromes or depression, in the wake of future terrorist attacks or other significant traumas.

Responsiveness to Terrorism

The internal consistencies of the three subscales of the RTS were acceptable; IT, alpha = .73; OT, alpha = .78; ET, alpha = .87. Of the five personality factors, only neuroticism was significantly correlated with the responses to terrorism subscales (see Table 1). We found a significant correlation between survivor guilt and avoidance of terrorism subscales (see Table 2). We found significant correlations between omnipotent responsibility guilt and all three subscales of responses to terrorism controlling for neuroticism (see Table 2). Finally, we found significant correlations between separation guilt and all three subscales of responses to terrorism, even when controlling for neuroticism (see Table 2). There were no significant differences between religious or ethnic groups. Females were significantly higher than males in the obsession and emotional inhibition subscales. In coding open ended questions we found that of 134 subjects who responded, 38 described feeling locked, 30 felt isolated, 20 described feeling depressed, 16 said they felt fearful, “scared,” or paranoid, 12 described confusion as their primary initial feeling, 3 felt anger, and 4 students described feeling indifferent.

Discussion

These results may have clinical significance. As an increasing number of people are seeking mental health care in the wake of the terrorist attacks, we predict that people who are more highly prone to a dispositional tendency to take responsibility for others, that is, who are significantly higher in guilt proneness are more likely to present with PTSD-like symptoms. People who are prone to broadly defined survivor guilt are more likely to present with increased depression and inhibition of normal activities. Finally, these results suggest that women may be more likely to present with PTSD-like symptoms.

Results

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