How to ask about childhood abuse

The Why, Who, When and How of it

It is not news that many of our clients, therapy clients in general, and individuals suffering from trauma specifically, have experienced interpersonal violence. One would think that this would be one of the major points of focus during an initial assessment. However, as Read et al. (2007) point out, this is unfortunately not the case.

The authors cite in-patient studies in the US and UK which have found “that clinicians identify less than half of the cases of abuse reported to researchers” (p. 103). They go on to talk about the many reasons for this such as: not wanting to upset the client; more important things to cover; fear of vicarious traumatization; the client being male, and the clinician being the opposite gender of the client.

I think one of the reasons why I found this article to be excellent, aside from the suggestions they make about asking about abuse, is that it brings up a topic that needs to be discussed in clinical settings and it also mirrors my own experience. I have found that many—not all!—clinicians, 1) do not ask about abuse, and/or 2) are not really sure how to ask, 3) are not quite sure what qualifies as abuse (emotional, physical, neglect, sexual, for example) and 4) if they do, it is oftentimes with the question: “Have you ever experienced any trauma?”

This last question isn’t very effective for the fact that many individuals (clients and clinicians, alike) simply don’t know what the word trauma means, and also, the question is just too abrupt.

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1 The following template is based on the article, Why, when and how to ask about childhood abuse, (2007), by Read, J., Hammersley, P., and Rudegeair, T. in Advances in Psychiatric Treatment, 13:101-110.
The following information is meant to be a reminder of why, who, when and how to ask about childhood abuse and is not intended to be exhaustive or a replacement for any research or study.

**Why?**

- Because childhood abuse has been shown to be causally related to a host of mental health problems including:
  - depression
  - anxiety disorders
  - PTSD
  - eating disorders
  - substance abuse
  - sexual dysfunction
  - personality disorders
  - dissociative disorders
  - psychosis
  - schizophrenia

**Who?**

- Ask everyone!

**When?**

- At the initial assessment (or if the client is in crisis, as soon as the client has calmed)
- While conducting a general psychosocial history
How?

• Preface questions with a brief normalizing statement, e.g.:

  “What I’d like to talk about next is a topic we cover with every client. Sometimes it can be a bit challenging. But we’ll go slow. How does that sound?”

• The template below is taken from the Read et al. (2007) article. The article is superb because of its simplicity and the manner in which it slowly, respectfully, guides the client into an inquiry about abuse.

• Their question “funnel” below (with my own questions added) is meant to be a guide for both the clinician and client, which begins with general questions, and slowly moves to more specific inquiries.
Tell me a bit about your childhood

Best childhood memory? Worst?

On a scale of 0 to 10, how safe do you feel in your home?

How did you get along with your mother? your father?

How was discipline dealt with in the family?

Was there ever a time when someone did something to you that you didn’t like? Did anyone ever touch you and you didn’t want them to touch you?

Specific questions about abuse