BSc in Psychology

Distress symptoms of victims of violence who disclose their experience on social media

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Foreword

Submitted in partial fulfillment of the requirements of the BSc Psychology degree, Reykjavik University, this thesis is presented in the style of an article for submission to a peer-reviewed journal.
Abstract
Emotional distress symptoms, such as those for depression, anxiety and post-traumatic stress disorder (PTSD), are common among victims of violence. When regaining mental health after being a victim of violence, it has been found important for victims to disclose their violent experience to others and, in return, receive social support. Non-disclosure has, for example, been found to be correlated with more PTSD and depression symptoms. The present research study analyzed archival data originating from the social media sites, Facebook and Twitter. The sample contained 397 Icelandic speaking abuse victims, most of whom were women ($N = 375$). The objective was to further investigate how social support and different types of violence can affect emotional distress post-violence. Results revealed that when participants disclosed their victimization to others in-person, negative social support was most frequent. That, however, did not cause more likelihood of feeling emotional distress. Furthermore, results showed that for those who experienced sexual violence, physical violence, as well as repeated violence; More than one type of violence and separate violence occurrences, were related to greater emotional distress symptoms, compared to other forms of violence. Present findings provide supportive arguments for further investigating disclosures from victims.

Key words: violence, emotional distress symptoms, disclosure, social reactions

Útdráttur
Niðurstöður styðja við rök fyrir frekari rannsóknnum á áhrifum þess að fornarlömb ofbeldis segi frá reynslu sinni.
Distress symptoms of victims of violence who disclose their experience on social media

Every day, approximately 4,400 people die worldwide because of deliberate acts of violence and many more suffer injuries. This number does not include those whose lives have been destroyed by violence, such as the traumatized families of victims, or the massive community cost of violence (Krug, Mercy, Dahlberg, & Zwi, 2002). Violence can be classified into different categories: Sexual-, physical-, emotional- and economic violence, and varies in severity (Feder, Hutson, Ramsay, & Taket, 2006). In the present study, the main focus will be on these four types of violence and how post-assault factors affect the individual. For example, victims may struggle with their mental health following victimization and, therefore, seek support from others by disclosing their traumatic experience (Ullman, 2007; Onyango et al., 2016).

Emotional distress among victims post assault is highly probable, especially among those who have been revictimized. Ellsberg, Caldera, Herrera, Winkvist, & Kullgren (1999) showed, for example, that women who experienced violence were six times more likely to suffer emotional distress than those who did not. The following symptoms have all been linked to problematic mental health states among victims of violence (Starzynski, Ullman, Townsend, Long, & Long, 2007; Krahé & Berger, 2017). The first is, depression, which is defined as a state of poor mood, lack of interest in activities and feeling worthless (American Psychiatric Association, 2013). Studies have shown an increased likelihood of depression in victims of violence (Krahé & Berger, 2017). Second, anxiety, which is defined as an emotional state where a particular situation seems uncontrollable and is followed by a fear of being powerless in it (Freels & Cook, 2016). Yama, Tovey, & Fogas (1993) found a connection between sexual abuse in childhood and anxiety in adulthood. Third, post-traumatic stress disorder (PTSD), which is
defined as a substantial functional impairment in which symptoms are linked to a traumatic experience (Sullivan, Weiss, Price, Pugh, & Hansen, 2017). Studies have shown time and again that PTSD is related to experiencing violence (Andrews, Brewin, Rose, & Kirk, 2000; Ullman & Filipas, 2001; Ullman & Peter-Hagene, 2014, 2016). Fourth, shame, which is a complicated negative feeling that includes fear of being inferior to others, as well as being judged negatively (DeCou, Cole, Lynch, Wong, & Matthews, 2017). Experiencing violence often leads to feeling shame, which has been linked to PTSD (Andrews et al., 2000). And finally, fear, which is an unpleasant emotional state where a person feels he or she is in danger (Ross, 2012). Thus, experiencing violence can lead to emotional vulnerability. When supporting emotional health, it has been found beneficial for victims to disclose to others about their traumatic experience (Ullman & Filipas, 2001; Ullman 2007).

Disclosure is defined as the act of acknowledging and exposing one’s feelings, experiences and beliefs to another person, (Kane, Slatcher, Reynolds, Repetti, & Robles, 2014) which may reduce the progression of psychosocial factors post assault (Ullman & Filipas, 2001). The health benefits of disclosing seem to be both psychological and physical (Ullman, 2007). To further demonstrate, Onyango et al., (2016) discovered that the victims who did not disclose to others where highly correlated with symptoms such as depression and PTSD opposed to victims who told others about their traumatic experience. This goes to show how important disclosure seems to be when a victim is processing their traumatic experience.

Following this, it is equally important to look at the reactions from the targets in which the victims decide to confine with (the disclosure targets). It is also important to bear in mind whether the victims receive the support they need from the disclosure targets or not. Social support after disclosure is defined as both verbal and non-verbal reactions from the disclosure
targets to the victim (Edwards, Probst, Tansill, & Gidycz, 2013). Disclosure targets must listen patiently, validate the victims experience and make it clear that the violent event was not the victims fault. It is also important not to force the victim into pressing charges or to leave the violent situation, but rather to respect the victims decision to take the action they wish to take (Feder et al., 2006). The reactions to a victim’s disclosure seem to have an effect on their recovery process. Negative reactions from disclosure targets, as opposed to positive ones, can increase the likelihood of the victim experiencing emotional distress (Orchowski, Untied, & Gidycz, 2013; Sigurvinsdottir & Ullman, 2015). The reactions from the disclosure targets have been divided into seven subcategories, both positive and negative (Ullman, 2000).

Ullman (2000) defined the positive reactions to victims as emotional support and tangible aid. Emotional support reflects empathy and affection while tangible aid refers to a material support. In addition, she defined the following as negative reactions: Blame, treating the victim differently, egocentric reactions, taking control and distraction. To further demonstrate, that could for example include the disclosure target deciding to take action based on their own ideas rather than asking what the victim wants. Past studies have showed that negative reactions can result in the victim experiencing emotional distress, and even feeling responsible for a crime that befell them (Dworkin, Newton, & Allen, 2016; Orchowski et al., 2013). For instance, negative social reactions have been correlated with PTSD symptoms as well as depression and anxiety (Hakimi, Bryant-Davis, Ullman, & Gobin, 2016; Kelley & Gidycz, 2017; Ullman & Filipas, 2001; Ullman & Peter-Hagene, 2016). In contrast, it is believed to be of significant value for the victim to perceive the support they get as positive (Ullman & Peter-Hagene, 2016) since positive support has been associated with positive psychological adjustment (Orchowski et al., 2013). In relation to the matter of disclosure and social support, most researchers have investigated in-
person disclosure (Ullman & Filipas, 2001; Chen, Lai, & Yang, 2013). Recently, however, people have started to use social media for disclosing personal difficulties, such as violent experiences. People can now seek aid from others all around the world through the Internet. This revolution has opened a whole new research area regarding disclosure to others (Bogen, Bleiweiss, & Orchowski, 2018).

Social media allows new ways for people to publicize their thoughts and feelings (Steinfield, Ellison, & Lampe, 2008). This has enabled victims of violence to disclose their experience of it, thus it is important to understand the role it plays in relation to disclosure of violent experience (Manikonda, Beigi, Liu, & Kambhampati, 2018). Facebook and Twitter are both examples of social media sites. They provide multiple methods to interact with peers (through messages, wall posts, etc.). On Twitter, people can update their status (tweets). The length of the posts, however, cannot exceed 140 characters. In contrast, on Facebook people have no limitation as to the length of the status. When posting these status updates, the individual’s friends or followers can see, read, reply, repost, comment and like the post. Consequently, they can reach quite a lot of people (Ellison, Steinfield, & Lampe, 2007; Jones, Wojcik, Sweeney, & Silver, 2016). Recently, the #metoo revolution received great awareness when people all around the world started disclosing experiences of being sexually violated, giving individuals the voice to disclose their experience of violence. This came to demonstrate how far the prevalence of violence has spread into our society (Manikonda et al., 2018).

The frequency of violence is alarming and results in harmful consequences for both victims and the communities (Krug et al., 2002; Edwards et al., 2013). The purpose of this study is to look at victims of violence, their mental state, the impact disclosing their violent experience has on them and the following social support or lack thereof. Does disclosing these matters to
another person facilitate the opportunity for them to thrive? There is a lack of research as to what happens when victims tell others of their experience on social media sites. However, the few research projects already conducted have been promising and the present study will try to fill in these gaps (Bogen, et al., 2018).

The present study also seeks to provide a better understanding of the emotional state victims of violence experience post violence and if social support can help in creating positive emotional outcomes. The participants’ emotional stability will be measured through their social media posts where they described their violent experience.

The study proposes three hypotheses: (1) Participants who experience negative in-person social reactions after disclosure are expected to show greater emotional distress symptoms than participants who experience positive in-person social support; (2) Participants who disclose their experience of psychological-, sexual-, physical- or economic violence are expected to show greater emotional distress symptoms then those who do not; and (3) Participants who experience repeated or multiple types of violence will show greater emotional distress symptoms than victims with only one occurrence of violence.

**Method**

**Participants**

The present research study analyzed archival data which originated from two particular social media sites, Facebook (231 entries) and Twitter (166 entries), for a total of 397 posts. These entries were posted between April 2015 and March 2017. The majority of the participants were women ($N = 375, 94.5\%$), while only 9 identified their gender as male (2.2\%). An additional 13 did not state their gender. The participants’ age was missing in most entries (62.7\%), but the participants who did reference it (125) were mostly under the age of 18 at the time of the abuse
(84.5%). The posts were all made in Icelandic and included a personal disclosure of violent abuse.

**Measures**

**Emotional distress.** This concept was assembled from the following factors, which are all considered to be of emotional distress: Depression, anxiety, fear, shame and PTSD. These particular items were all combined into one factor. If participants described feeling emotional distress it was categorized as (1), and if not, discluded (0). The purpose of this was to increase the variability of the emotional distress variable. Similar emotional distress variables have been used by Orchowski et al., (2013) who used depression, anxiety and PTSD when making their psychological distress variable, and by Ellsberg et al., (1999) who, among other variables, used sadness, fear and anxiety in their emotional distress scale. In the study, 97 participants expressed emotional distress (24%).

**In-person social reactions from others.** Reactions were arranged into ten groups: Emotional support (1), tangible aid (2), blame (3), egocentric reaction (4), distraction (5), taking control (6), treating victims differently (7), not believing the victim (8), other reactions (9) (where the reactions did not fit into any category) and more than one reaction (10) (where more than one reaction was applied). Participants however, did not always mention experiencing in-person social reactions from others (0). These reactions brackets have been used in previous studies with the exception of the last three (not believing the victim, other and more than one) (Orchowski et al., 2013; Ullman, 2000). Ullman (2000) created a measuring instrument for social reactions: Social Reactions Questionnaire (SRQ). There, she classified positive reactions as: Emotional support ($\alpha = 0.98$) and tangible aid ($\alpha = 0.86$). While she classified blame ($\alpha = 0.84$), egocentric reaction ($\alpha = 0.84$), distraction, ($\alpha = 0.89$), taking control ($\alpha = 0.89$) and treating the victim
differently ($\alpha = 0.86$) as being negative. In the data, all ten social reactions where arranged in accordance to the SRQ as either positive- or negative reactions. In addition to the SRQ, the present study decided to classify the variables “not believing the victim”, “other reactions” and “more type of reaction”, as negative reactions since those particular disclosures represented negative social reactions in the data.

**Social media reactions from others.** The same measures were used as in the in-person social reactions. Here, however, the reactions occurred online instead of in-person.

**Violent subcategories.** When participants described their violent experiences, they were arranged accordingly into four groups: Sexual-, physical-, psychological- and economic violence. If described, the appropriate violent group was chosen (1), and if not, discluded (0). Sexual violence was assessed accordingly: Whether the participant was forced to engage in sexual activities, without his or her consent (Orchowski et al., 2013). Physical violence was assessed as a situation in which the participant was intentionally harmed, resulting in physical injuries (e.g. being slapped or kicked) (Ellsberg et al., 1999; Lohman, Neppl, Senia, & Schofield, 2013). Psychological violence was evaluated as to whether the participant was controlled emotionally, for example, isolated or threatened (Lohman et al., 2013). Lastly, economic violence was assessed in the according manner: When the perpetrator had control over the participant’s economical resources (Fawole, 2008).

**Repeated and multiple types of violence.**

**More than one type of violence.** Overall, participants disclosed to the four violent categories. When a participant declared to have been violated in more than one way when assaulted, it was classified as more than one type of abuse (1) opposed to when only experiencing one type of
violence (0). That is, for example, being verbally and physically violated by the same perpetrator.

**Recurrent violence.** When a participant described their violent experience as recurring, the victim then endured multiple violent experiences from the same perpetrator (e.g. domestic violence). When disclosed, it was declared as such in the data set (1), compared to when it wasn’t disclosed (0).

**Separate violent occurrences.** Participants who disclosed separate occurrences of violent experience were classified as (1) opposed to those who experienced violence from the hands of the same perpetrator (0). That is, for example, if a stranger would force its victim to have sex with him and then the victim later was intentionally injured by his or her spouse.

**Social media.** Participants used Facebook (1) and Twitter (2) to disclose. The likes and comments of both social media sites were analyzed.

**Procedure**

First, the Icelandic Data Protection Authority was notified of the research project. Reporting this to the ethics board for approval however was not needed since the data was all based on public posts. When searching the entries, the keywords were linked to words and hashtags related to both violence in general and sexual violence (ofbeldi, kynferðisofbeldi, #konurtala, #þöggun, #daginneftir). The Facebook entries were conducted from an Icelandic group named “Beauty Tips”. This is a closed group but anyone can ask to join. The group was created for the purpose of women being able to share their thoughts about things such as fashion and make-up. But in May 2015, it also became a place were they could share their experience of violence. Others could then comment on the entry and/or “like” it. The Twitter entries were searched in the same way. There the entries were public for everyone to see. Before the
Facebook data review was conducted, participants were informed about the study. They then had a week to remove their entry or come forward and ask to not be included in the study (no one came forward). After conducting the data review, each entry was evaluated with the purpose of making sure that they were all related to disclosure of violence. This was conducted during the period of November 2016 to January 2017. Then each entry was carefully reviewed and arranged into the following schemas: Gender, age, sexual violence, physical violence, emotional violence, economic violence, more than one type of violence, separate violent occurrences, recurrent violence, depression, PTSD, anxiety, shame, fear, in-person social support reactions, social media support reactions, likes and comments.

Data analysis

The data set was analyzed in the statistical program, SPSS (Statistical Package for the Social Sciences). First, in evaluating the hypothesis for the present study, descriptive statistics were conducted for all variables. In processing the data, the variables were recoded. Missing variables (99), where the appropriate answer did not apply and variables where the participants answered “no” (0) were both recoded as one factor, “not experiencing ” (0) the applicable variable. This applied to all the variables in the study. Second, an independent t-test was used in comparing the dependent variable, emotional distress, to the independent variables, the social media sites (Facebook and Twitter), the social media interactions (likes and comments) and the in-person social reactions (positive- and negative reactions). Third, chi-square, was used in comparing the association between the dependent variable, emotional distress to the independent variables, the violent categories, as well as repeated- and multiple types of violence. As a criterion, the significance of  = .05 was used. It is important to note that the participants shared as
much information as they were comfortable with, so the results were based on limited information. Therefore the data does not necessarily reflect the victims overall condition.

**Results**

**Descriptive statistics**

Table 1 presents the prominence of emotional distress among the study’s participants \(N = 397\). The most common type of emotional distress was fear \(N = 97, 24\%\), but the least frequent emotional distress symptom was PTSD \(N = 12, 3\%\).

Table 1.

*Descriptive statistics for emotional distress by frequency and percent value in each group.*

<table>
<thead>
<tr>
<th>Emotional distress</th>
<th>(N)</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Depression</td>
<td>32</td>
<td>8%</td>
</tr>
<tr>
<td>Anxiety</td>
<td>35</td>
<td>9%</td>
</tr>
<tr>
<td>Fear</td>
<td>97</td>
<td>24%</td>
</tr>
<tr>
<td>Shame</td>
<td>90</td>
<td>22%</td>
</tr>
<tr>
<td>PTSD</td>
<td>12</td>
<td>3%</td>
</tr>
</tbody>
</table>

In total, there were 169 participants who experienced emotional distress. Most participants, however, did not yield any emotional distress symptoms \(N = 228, 57.4\%\).

Table 2 presents the types of violence participants disclosed having experienced. Most participants \(N = 274, 69\%\) disclosed experiencing sexual violence. In total, 47 participants mentioned that they had been victims of physical violence \(11.8\%\). There were also 47 participants who mentioned being victims of psychological violence. In addition, only 3
participants mentioned being victims of economic violence (0.8%). There were, however, 122 participants who only vaguely described their violent experience and were therefore categorized as indistinct (30.7%).

Table 2.

*Frequency distribution and percent value regarding the violent subcategories.*

<table>
<thead>
<tr>
<th>Violence type</th>
<th>N</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sexual violence</td>
<td>274</td>
<td>69%</td>
</tr>
<tr>
<td>Indistinct violence</td>
<td>122</td>
<td>30.7%</td>
</tr>
<tr>
<td>Physical violence</td>
<td>47</td>
<td>11.8%</td>
</tr>
<tr>
<td>Psychological violence</td>
<td>47</td>
<td>11.8%</td>
</tr>
<tr>
<td>Economic violence</td>
<td>3</td>
<td>0.8%</td>
</tr>
</tbody>
</table>

Participants who experienced diverse combinations of violence offered the following results. In total there were 57 participants who had experienced separate occurrences of violence (14.4%) and 52 who experienced more than one type of violence (13.1%). However, recurrent violence was the most common type of violence that participants had disclosed experiencing (N = 60, 15.1%).

Figure 1 presents the frequency of in-person social reactions participants received when they disclosed to others their experience to others, which are based on the SRQ. When solely looking at the participants who experienced in-person social reactions (N = 74, 18.6%), the answers ranged from 1-10. Only 20.3% of participants who experienced in-person social reactions described their social reactions as positive, either experiencing emotional support or tangible aid. While the majority of the participants who expressed in-person social reactions
experienced negative social reactions (79.7%). However, most participants ($N = 323, 81.4\%$) did not mention any in-person social reactions ($N = 397, M = 1, SD = 2.5$).

When solely looking at the social media reactions, only two of the SRQ categories where mentioned, emotional support ($N = 262, 66\%$) and more than one type of reaction ($N = 10, 2.6\%$).

The social media posts were all either from Facebook ($N = 231$) or Twitter ($N = 166$). Combined likes and comments from both social media sides were assessed. There, likes ranged from 0-2300 ($M = 153$) and comments from 0-256 ($M = 17.8$).

When examining the social media posts in relation to emotional distress, the following results were observed. There was a significant difference between disclosing on Facebook or Twitter in relation to emotional distress ($t(374) = -10.212; p < 0.001$). Disclosing on Facebook ($M = 0.6, SD = 0.49$) was connected to increased probability of expressing emotional distress than on Twitter ($M = 0.18, SD = 0.38$).

**Figure 1.** Frequency distribution and percent value regarding the in-person social reactions, which are based on the SRQ.
Social media likes ($N = 213, M = 106, SD = 158$) and comments ($N = 213, M = 12.35, SD = 20.36$) in relation to emotional distress were also examined. There was a significant difference between the likes and comments when emotional distress was expressed ($t(374) = -10.212; p = 0.002$). Disclosing emotional distress was connected to more likelihood of receiving more likes ($N = 163, M = 214, SD = 289$) and more comments ($N = 164, M = 24.89, SD = 31.24$).

**T-test**

The first hypothesis was that participants who experienced negative in-person social support after disclosure were expected to show greater emotional distress symptoms than participants who experienced positive in-person social support. Hypothesis one did not receive support. The difference between the groups of receiving positive ($N = 15$) or negative ($N = 59$) in-person social support was not significant ($t(72) = -0.514; p = 0.609$). Receiving negative in-person social support ($M = 0.59, SD = 0.49$) did not cause more likelihood of feeling emotional distress than receiving positive social support ($M = 0.66, SD = 0.48$).

**Chi-square**

The second hypothesis was that participants who disclosed experiencing psychological-, sexual-, physical- or economic violence showed greater emotional distress symptoms than those who didn’t. This was partially supported. As shown in Figure 2, participants who mentioned experiencing sexual violence were associated with experiencing emotional distress symptoms ($\chi^2(1, N = 397) = 14.521; p < 0.005$). In total there were 274 participants who disclosed being victims of sexual violence, of which 48.9% disclosed emotional distress symptoms. Therefore, enduring sexual violence was related to greater emotional distress.
DISCLOSING VIOLENCE ON SOCIAL MEDIA

Figure 2. Percentage value showing emotional distress among those who either did or did not experience sexual- and physical violence.

Figure 2 also displays the relationship between physical violence and emotional distress. Participants who mentioned experiencing physical violence were associated with experiencing emotional distress symptoms ($\chi^2 (1, N = 397) = 11.928; p = 0.001$). In total there were 47 participants who disclosed being victims of physical violence, of which 66% disclosed emotional distress symptoms. Therefore, enduring physical violence was related to greater emotional distress.

There was however no relationship between psychological-, as well as economic violence and emotional distress symptoms. Participants who were victims of psychological- ($\chi^2(1, N = 397) = 0.884; p = 0.347$) or economic violence ($\chi^2(1, N = 397) = 0.718; p = 0.397$) were not associated with greater emotional distress symptoms.

The third hypothesis was that victims who experienced repeated or multiple types of violence would show greater emotional distress symptoms than victims with only one occurrence
of violence. Hypothesis three received support on most fronts, which is further demonstrated in Figure 3.

![Figure 3](image-url)

**Figure 3.** Percent value showing emotional distress among those who either did or did not experience repeated violence: More than one type of violence and separate violent occurrences.

First, experiencing more than one type of violence was related to greater emotional distress ($\chi^2(1, N = 397) = 19.999; p < 0.005$). In total there were 52 who disclosed that particular type of violence, of which 71.2% disclosed emotional distress. Second, there was a significant association between experiencing separate violence occurrences and emotional distress symptoms ($\chi^2(1, N = 397) = 6.394; p = 0.011$). In total there were 57 who disclosed that particular violence, of which 57.9% of those who disclosed being victims of separate violent occurrences had emotional distress symptoms. Last, however, the variable “recurrent violence” was not significantly related with emotional distress symptoms ($\chi^2(1, N = 397) = 0.378; p = 0.539$).
Discussion

This is, to the author’s knowledge, the first study to investigate the role of disclosing violent experience on social media in Iceland, and among the first worldwide (Bogen, et al., 2018). Therefore, the central aim of this study was to extend knowledge in this particular research area.

Social media disclosures were measured through the emotional state of the participants. The main findings showed that those who experienced physical and sexual violence were more likely to disclose emotional distress, as well as those who experienced more than one type of violence and separate violent occurrences.

Hypothesis one regarding the in-person social reactions stated that participants who experienced negative support were expected to show greater emotional distress symptoms than participants who experienced positive support. This was not supported by the data. Emotional distress was not related to receiving negative in-person social reaction compared to receiving positive reaction. This could, however, be explained by the fact that there were not enough participants who expressed experiencing in-person social reactions, thereby creating gaps in the data set. This is speculated since earlier studies have found correlations between emotional instability, such as PTSD and depression, correlated with negative reactions opposed to positive in-person social reactions (Ullman & Peter-Hagene, 2016). In the present study, depression and PTSD were the least mentioned emotional distress subcategories. This could be the reason that emotional distress was independent from the negative and positive in-person social reactions. That is, that the two subcategories (depression and PTSD) are the most important in reflecting on emotional distress. It should also be noted that two of the most common social reactions were negative, while emotional support yielded third place. Another interesting finding regarding the
social reactions was that the present study discovered two new social reaction groups that earlier studies have not detected: Other reactions that varied in form and not believing the victim.

Interestingly, not believing the victim, was the most frequent reaction measured. Another differential factor from previous studies was that egocentric reactions were never mentioned in the present study (Orchowski et al., 2013; Ullman, 2000). This could mean that social reactions in Iceland differ from other social reaction norms in other countries. Future studies would need to further explore that possibility. But, if that is the case, it is a matter of grave concern as not believing the victim could possibly foster emotional distress.

Hypothesis two, which observed the relationship between experiencing specific violence types and emotional distress, was partially supported. When looking at the subcategories of violence, physical- and sexual violence were connected to emotional distress, but not psychological- or economic violence. Previous studies have demonstrated that enduring sexual violence (Yama et al., 1993) as well as physical spousal abuse is associated with later emotional distress symptoms (Ellsberg et al., 1999). This is consistent with the present study. The lack of connection to the economic variable is most likely explained by the fact that there were not enough participants who described enduring that particular violence type. However, there were similar number of participants in both physical- and psychological violence categories, so that does not explain the difference between these particular groups. This could indicate that physical violence compared to psychological violence is more likely to evoke emotional distress. Future studies would need to analyze that issue with a larger number of participants.

Hypothesis three, that victims who experienced repeated or multiple types of violence would show greater emotional distress symptoms, was, partially supported. Participants who expressed experiencing repeated or multiple types of violence were more likely to endure
emotional distress when they experienced more than one type of violence and separate violence occurrences. Past studies have found a relationship between emotional distress and revictimization (Krahé & Berger, 2017; Ullman & Peter-Hagene, 2016). However, in the present study, emotional distress was not connected to experiencing recurrent violence. Consequently, there was not a relationship between all revictimization categories. This outcome could be explained by the fact that when a person endures the same pattern of violence repeatedly they start to normalize the behavior, perhaps to cope with it. However, these assumptions are speculative. In conclusion, the severity of the violence seems to matter and is connected to emotional distress (Ellsberg et al., 1999), but does not seem to have the same affect if experienced recurrently from the hands of the same person.

Bogen et al., (2018) found that social reactions on social media were more commonly positive than negative. In the present study, social reactions were most commonly positive, giving the victims emotional support. Reflecting on that, this could mean that social media disclosure would, in some ways, be a safer environment for disclosure than in-person disclosure, at least as a first step to disclosing. In addition, emotional distress was more likely to occur on Facebook than on Twitter. Facebook appeared to be a safer venue for disclosing emotional instability. That could, however, also be explained by the fact that word count on Facebook is boundless while, on Twitter, word count cannot exceed 140 characters. On Twitter, you can only express yourself to a limited amount and, as a result, cannot have enough space to talk about emotional distress. Another interesting social media finding was that, when the emotional distress disclosures were greater, the likes and comments on both Facebook and Twitter were higher. Disclosing emotional distress doubled both the likes and comments and, therefore, evoked more reactions on social media. The victims whose condition was psychologically worse
received the most support. When comparing these results to in-person social reactions, Ullman & Peter-Hagene (2016) reported similar outcomes. The more serious the disclosure, the more in-person reactions participants received. Whether that changes the victims emotional state in the long run we still do not know. It is important, however, to be cautious about these speculations because many of the comments were superficial, that is, only expressing emojis (symbols) as a way of emotional support. Putting hearts in the comment sections was, for example, the most common way of expressing emotional support on the social media sites. Future research would need to investigate that.

The present study was subject to a number of limitations. First, the participants were mostly young women, so the ability to generalize the results was restricted thereby limiting the external validity of the study. Second, the disclosures were all voluntarily constructed and, therefore, not written specifically for the cause of the study. Consequently, the answers were not standardized and deviated greatly from each other. Because of this, there were a limited number of participants who disclosed according to the study’s variables, leading to a failure in catching important data. Third, this was an analysis of self reported data, which always presents a certain risk of dishonesty and/or the lack of capability to be introspective. Fourth, since the design of the study is cross-sectional, it inhibits in finding causal relationships. It would be better to conduct a longitudinal study where the participants’ emotional state could be measured over time. Last, the participant pool was determined from earlier established hashtags. Therefore, disclosures that did not use these particular hashtags might have been overlooked.

The study also had strengths that enhance the capability of drawing meaningful conclusions. First, this was the first study to analyze disclosures on Facebook where people can express themselves using as many words as they like (Bogen et al., 2018). Second, the study had
a large sample ($N = 397$) and involved a group that can be hard to access. Third, the study is among the first to explore social media disclosures and was able to demonstrate the importance of further investigating this as well as in-person disclosures. Moreover, the timing couldn’t be better since #metoo has permeated our society, challenging researchers on these matters.

Future studies would benefit from submitting standardized questions as a longitudinal study of victims of violence, pursuing participants after social media disclosures as well. This would help in understanding the potential benefits of social media disclosures. The present study fell short in comparing in-person social support and social media support which future studies would also benefit from examining.

In conclusion, the present findings provide supportive arguments for further investigating disclosures from victims, both in-person and on social media. It would be of great benefit to educate our society on the importance of a proper responding to a victim’s disclosure. The importance of seizing the momentum in which the #metoo revolution has brought upon on the awareness of violence, cannot be underestimated. If disclosing violent experiences can have a positive effect on victims, we could be better equipped when dealing with this widespread social problem. Social media disclosures have the potential of supporting victims who endure painful violent experiences. Some people have the advantage of a good social network, while others do not. Studies have shown that the lacking of a social network can have an effect on emotional distress (Ellsberg et al., 1999). For them, it could arguably even be a lifesaving venue for them to express their hardship on the internet. Future studies will hopefully shed a light on that.
References


