

Not All Wounds are Visible: Gaslighting and PTSD among Young Adult Females

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Abstract. Gaslighting and Post-Traumatic Stress Disorder (PTSD) are both understudied concepts within the Filipino setting. Therefore, this study aimed to determine the presence of gaslighting and PTSD among young adult females. Guided by the Betrayal Trauma Theory, which explains how victims may unconsciously block awareness of abuse from someone they depend on (Freyd, 1996), and the Knot Theory of the Mind, which suggests that unresolved trauma and contradictory thoughts form emotional and cognitive entanglements (Ramírez-Burgos, 2017), this study employed a mixed-method approach. Participants were selected through purposive sampling: females aged 20 to 35 who had been in a romantic relationship for at least one year, with the relationship ending at least a month before data collection. Quantitative data were gathered from 193 respondents using a profile form, the Victim Gaslighting Questionnaire (VGQ), and the PTSD Checklist for DSM-5 (PCL-5). For the qualitative phase, semi-structured interviews were conducted with 10 participants, utilizing both face-to-face and online modes, with triangulation for analysis. Descriptive and inferential statistics using Spearman's rho revealed that a large number (86.5%) of those exposed to gaslighting suffer from symptoms associated with PTSD, thereby indicating a moderate positive correlation ($rs[193] = .48$). Additionally, common ways the participants experienced gaslighting were found to be manipulation of reality, assertion of dominance, and creation of confusion. Impact included physical, social, behavioral, and psychological manifestations—whereas, the gaslightees utilized both adaptive and maladaptive methods to deal with trauma. These findings can be used to develop better testing materials and interventions. It can also serve as a basis to implement more effective policies that protect those who have been subjected to gaslighting and are suffering from PTSD. However, the study's generalizability is limited by its focus on a specific gender, age group, and geographic area.

Keywords: Gaslighting; PTSD gaslightees; Young adults.

1.0 Introduction

"You're overreacting!"

"If you love me, you'd let me do what I want."

"Everyone agrees with me – you're just difficult."

"This is all your fault."

"It's not me, it is you!"

The phrases mentioned above are among the most frequently used in instances of gaslighting (Warren, 2023). As explained by Klein et al. (2023), gaslighting is a relatively unexplored form of psychological abuse where a

perpetrator—known as the gaslighter—deceives a rational and sane individual, leading them to doubt their cognitive abilities under pretenses. A study by Bane (2017) revealed that 32% of men and 46% of women have encountered gaslighting at some point. Alarming, research indicates that 75% of adults are unaware of the term and its implications (Paulsen, 2021). The term "gaslighting" can be traced back to a 1938 British stage play titled *Gas Light* by Patrick Hamilton, which was later adapted into a 1944 American film named *Gaslight*. Both the play and the film depicted techniques such as forcefully presenting fabricated evidence to confuse the victim, denying prior actions or statements despite clear evidence to the contrary, and invalidating the victim's emotions or perceptions by labeling them irrational or pathological.

At its core, the primary objective of gaslighting is to erode the victim's confidence in their judgment, ensuring their complete submission to the gaslighter's control (Spear, 2018). This tactic often leaves victims questioning their reality, as reflected in a survey where 47% of victims were uncertain whether they were genuinely at fault during conflicts (Linder, 2023). This uncertainty is a deliberate manipulation, gradually eroding the victim's ability to reason independently. Over time, they become increasingly reliant on the gaslighter's interpretation of events, leading to a profound loss of trust in their perceptions (Garrick & Buck, 2022). As such, Tracthler (2022) argues that gaslighting should be viewed as a form of epistemic injustice, silencing the victim's ability to offer their account of the relationship.

Stern (2022), on the other hand, explains that gaslighting unfolds in three distinct phases: disbelief, defense, and depression. Initially, minor disagreements or misunderstandings escalate during the disbelief stage, often causing confusion and self-doubt. As the victim moves into the defense stage, they attempt to confront the manipulator or defend themselves. However, their efforts often involve guilt-tripping, silent treatment, or dismissive behavior. This stage also introduces different types of gaslighters, such as the intimidator, who uses fear and aggression, the glamour gaslighter, who projects an idealized persona while blaming the victim for unhappiness, and the good guy gaslighter, who appears cooperative but leaves the victim feeling unsettled. Ultimately, in the depression stage, the victim internalizes the manipulator's perspective, relying on their validation for self-esteem and identity. Recognizing these stages is critical, as they can have long-lasting effects on the victim's mental health.

As such, what distinguishes gaslighting from other forms of psychological abuse is the victim's eventual compliance, a phenomenon known as the gaslightee effect (Kurniawan & Limanta, 2021). This compliance makes gaslighting particularly insidious and challenging to recognize within relationships. Abramson (2014) highlights that gaslighting typically unfolds over an extended period, with the manipulator gradually weakening the victim's awareness of their reality. Notably, this process does not occur at the beginning of a relationship; instead, the gaslighter first works to establish trust before launching their subtle manipulations.

Nevertheless, it is important to understand that gaslighting extends beyond romantic relationships and is prevalent even in institutional, medical, platonic, and professional settings. In schools, Alsabbagh (2023) noted that power imbalances between teachers and students can lead to gaslighting, as students' concerns are often dismissed, affecting their well-being and academic performance. Yousafzai (2023) further discussed how women in academia face gender-based invalidation from male colleagues, reflecting systemic bias. In the workplace, gaslighting often involves superiors misusing power to manipulate subordinates through withholding information, fabricating allegations, or targeting marginalized groups (Fulcher & Ashkanasy, 2023). Singleton (2022) observed that such behavior damages employee morale and can lead to trauma. Ahen (2018) referred to this as institutional betrayal—when organizations fail to address internal abuse, worsening victims' experiences.

In healthcare, gaslighting emerges when patients' symptoms are dismissed or minimized. During the COVID-19 pandemic, those with long COVID frequently faced disbelief (Au et al., 2022). Female doctors, too, have encountered dismissal from male peers, exacerbated by gender disparities (Fraser, 2021; Glauser, 2018). On the other hand, religious gaslighting involves using spiritual texts to invalidate individuals' experiences. The Bison (2020) described this as "spiritual gaslighting," where hardships are explained away or minimized by misinterpreting religious teachings. Self-gaslighting can also occur when victims internalize the manipulative behaviors they have endured. Otis (2019) described this phenomenon as the lingering self-doubt and erosion of confidence resulting from prolonged exposure to gaslighting. Victims may blame themselves for the harm they have experienced, even without external manipulation.

However, although gaslighting can occur in various contexts, it is most commonly associated with romantic relationships (Maramara, 2022). Tactics such as lying, manipulation, scapegoating, and coercion are often used to destabilize and control partners (Durham & Young, 2023; Bagnoli, 2023; Maramara, 2022), reinforcing the abuser's dominance and distorting the victim's sense of reality.

Gaslighting is also deeply intertwined with misogyny, as Stark (2019) observed. The practice reflects traditional gender-based power imbalances, where men are often seen as superior to women. The gaslighter aims to oppress their target, fostering dependence to maintain control. Although gaslighting can affect individuals of any gender, it disproportionately impacts women. Gordon-Smith (2018) reported that 95% of documented cases involve female victims. Similarly, Sweet (2019) found that 74% of young adult women who had experienced domestic abuse reported being subjected to gaslighting by their partner or ex-partner.

Scholars have also proposed mechanisms through which gaslighting can lead to Post-Traumatic Stress Disorder or PTSD (Stiefvater, 2022; Ediriweera, 2021). Chronic invalidation and control, which are central to gaslighting, can foster hyperarousal, emotional suppression, cognitive dissonance, and self-blame—core symptoms of PTSD (CSI, 2016). Long-term exposure to emotional abuse like gaslighting can lead to traumatic attachment and repeated victimization, both of which significantly contribute to the onset of PTSD (Akis & Ozturk, 2021). However, much of the existing research on this connection has been conducted in Western settings, yielding mixed findings that lack cultural specificity (Iverson et al., 2013).

In the Filipino context, cultural norms such as *hiya* (shame), *pakikisama* (smooth interpersonal relationships), and *utang na loob* (debt of gratitude) often prevent victims from recognizing or resisting abuse. These cultural expectations, combined with traditional gender roles, religious pressures, and family dynamics, reinforce silence and submission in the face of mistreatment (Colet, 2021; Gaslight Guide, 2023). As a result, Filipino women may experience difficulties in identifying gaslighting, let alone addressing its consequences. These cultural barriers, coupled with the emotional toll of gaslighting, can exacerbate the psychological strain and contribute to the development of PTSD symptoms.

Therefore, this study seeks to fill these gaps in the literature by focusing on the experiences of young adult Filipino women, a group that has been underexplored in existing research. It employs the Betrayal Trauma Theory (Freyd, 1996), which explains how abuse by trusted individuals, such as romantic partners, is particularly damaging, and the Knot Theory of the Mind (Ramírez-Burgos, 2017), which describes how unresolved trauma creates cognitive-emotional loops that lead to internal conflict and psychological dysfunction. These frameworks provide a culturally grounded and psychologically nuanced approach to understanding how gaslighting contributes to PTSD in the Filipino context.

Thus, the primary purpose of this study was to determine the presence of gaslighting and PTSD among young adult females. To accomplish this, this research aimed to address the following questions: (1) What percentage of the participants have experienced a high level of gaslighting from their most recent romantic relationship, and also show probable PTSD? (2) Is there a correlation between gaslighting and PTSD? (3) In what ways have the participants experienced gaslighting from their romantic partners? (4) How does experiencing high gaslighting impact the participants? (5) How do the participants deal with the trauma caused by gaslighting?

As a result, this research's findings can be used to develop better testing materials and interventions. This study can also serve as a basis to implement more effective policies that protect those who have been subjected to gaslighting and are suffering from PTSD.

2.0 Methodology

2.1 Research Design

This mixed-method research aimed to explore the experiences of individuals who have been subjected to gaslighting and are showing signs of PTSD. This type of approach utilized the combination of both quantitative and qualitative research methods in order to fully comprehend the experiences of the selected group of participants (Schoonenboom & Johnson, 2017). The study specifically used the explanatory sequential design wherein the quantitative data collection phase is first employed before following through with the qualitative

phase. The provided order was followed to explore the statistics received from the former phase and contextualize the phenomenon using the results of the qualitative phase (Munce et al., 2021).

2.2 Research Locale

This study was conducted in Pampanga, Philippines, through online and face-to-face data collection methods. The research setting was chosen for its accessibility and the availability of participants who met the study's criteria.

2.3 Research Participants

One hundred ninety-three participants were recruited for the quantitative phase of the study. Participants were selected using purposive sampling based on specific criteria. This research employed the following inclusion criteria: participants should be (1) female, (2) 20 to 35 years old, (3) have had a boyfriend for at least a year, and (4) have had a relationship that ended at least a month prior to data collection. On the other hand, minors, individuals with medical conditions, and those who have been married were excluded. After completing the quantitative phase, ten participants who scored above 40 on the VGQ and 31 or higher on the PCL-5 were invited for interviews. This number was chosen based on Creswell's recommendation for qualitative research. The decision to select ten participants was informed by the principle of data saturation, where no new themes or information emerged from interviews. Saturation was reached when the researchers noticed that additional interviews no longer contributed substantially new insights into the participants' experiences with gaslighting and PTSD. The researchers also considered the depth of the qualitative data and the focus on understanding nuanced, personal experiences of gaslighting and trauma. This supported the idea that a smaller, in-depth sample was adequate for answering the research questions. Additionally, five participants from the qualitative phase had a close relative or friend interviewed to triangulate their experiences. This method strengthened the study's credibility by incorporating multiple perspectives on the same situation.

2.4 Research Instrument

In the quantitative phase, the researchers employed two scales to measure gaslighting and PTSD: the Victim Gaslighting Questionnaire (VGQ) and the PTSD Checklist for DSM-5 (PCL-5). The VGQ, developed by Aqeel (2021), is a self-report instrument with 14 items rated on a 5-point Likert scale, assessing the extent of gaslighting experiences. A total score below 40 indicated lower gaslighting, while above 40 suggested a higher level. The PCL-5, developed by Belvins et al. (2015), is a 20-item scale measuring PTSD symptoms, with scores ranging from 0 to 80, where 31 or higher suggests a likelihood of PTSD. As for the instruments' psychometric properties, the VGQ has been validated and has shown high alpha reliability of $\alpha = 0.934$, while the PCL-5 also demonstrated strong reliability ($r = .82$) and validity ($rs = .31$ to $.60$).

For the qualitative phase, the researchers conducted semi-structured interviews either face-to-face or via Google Meet, lasting between 15 minutes and an hour. The semi-structured format allowed for flexibility in questioning, enabling participants to provide rich, in-depth accounts of their experiences. The interview protocol included open-ended questions to elicit detailed information on how participants perceived and experienced gaslighting in their relationships. Example questions included: "Can you narrate your experience during your relationship with your ex-boyfriend?" and "What were your thoughts and feelings when the relationship ended?" Follow-up questions were used to encourage further elaboration, and the interviews allowed participants to discuss their feelings and any changes they noticed in their behaviors and relationships.

Triangulation was employed to enhance the credibility and validity of the findings by including input from close friends or relatives of the participants. These individuals were interviewed separately to provide additional perspectives on the participants' experiences. Triangulation allowed the researchers to compare and contrast accounts, ensuring that the interpretation of the data was more robust and reflective of the participants' lived realities. The triangulation process was incorporated into the analysis by cross-referencing the themes identified in the participants' narratives with those from their close friends, which provided a deeper understanding of the impact of gaslighting on both the participants and their social circles.

2.5 Data Gathering Procedure

The researchers followed a structured process to collect primary data for the study. Before data collection, participants were informed about the study, their involvement, and any potential benefits or risks. They were provided with an informed consent form to ensure ethical participation. The researchers first administered a

profile form during data collection, followed by the VGQ and PCL-5 for the quantitative phase. The data was gathered either face-to-face or online, depending on participant availability. Semi-structured interviews were then conducted for the qualitative phase, with participants' permission to audio record the sessions. The interview format was also flexible and convenient. The entire data collection process took place between July and December 2024. After data collection, an online debriefing session was held to check the qualitative participants' well-being. This session ensured their welfare and offered referrals for professional assistance if needed. As a token of appreciation, participants from both phases received a small gift.

2.6 Ethical Considerations

The researchers sought approval from the university's Ethics Review Board (ERB) and adhered to its ethical guidelines. Ethical considerations included privacy, confidentiality, informed consent, and participant well-being. Participants were given an informed consent form detailing the study's purpose, risks, benefits, and their right to withdraw. Confidentiality was ensured by storing data on password-protected computers and following ERB protocols for data deletion after three years. Due to the study's sensitive nature, a referral system for psychological support was established, particularly for participants showing PTSD symptoms. These referrals were confidential, ensuring personal information remained protected unless there was a risk of harm. The researchers upheld all ethical standards to safeguard participants' well-being and ensure the study's integrity.

3.0 Results and Discussion

This section of the research offers a comprehensive exploration of the interplay between gaslighting in romantic relationships and the manifestation of probable PTSD among gaslightees. Starting with the quantitative phase through the assessment of the proportion of individuals who reported both high levels of gaslighting and signs of PTSD, this study establishes a foundational understanding of how prevalent these intertwined experiences are within the sample, as determined by scores on the VGQ and PCL-5. The research then delves into the potential correlation between gaslighting and PTSD, uncovering whether and to what extent psychological manipulation in relationships aligns with trauma symptoms. This quantitative foundation provides critical insights that will inform and enrich the qualitative phase, offering specific areas of focus for exploration.

Table 1 presents the results of the participants on the VGQ and PCL-5. The majority (81.35%) of participants reported experiencing high levels of gaslighting in their most recent romantic relationships, as indicated by the VGQ. This suggests that gaslighting is a common experience among the study's participants. The mean VGQ score of 52.49 further supports this, indicating that, on average, participants experienced a moderate to high gaslighting. Meanwhile, a significant proportion (84.46%) of participants met the criteria for PTSD based on their PCL-5 scores, with a mean PCL-5 score of 55.11. This suggests that PTSD symptoms were prevalent among the participants, with those who experienced high levels of gaslighting being particularly affected.

Table 1. Results on the VGQ and PCL-5				
Variables	Frequency	Percentage (%)	Mean	Max-Min
VGQ				
Low level of gaslighting	36	18.65	52.49	70-16
High level of gaslighting	157	81.35		
PCL-5				
Meets criteria for PTSD	163	84.46	55.11	79-4
Does not meet criteria for PTSD	30	15.54		
High level of gaslighting and meets PTSD criteria	141	86.5		

Furthermore, an overwhelming 86.5% of participants who experienced high levels of gaslighting also met the criteria for PTSD, indicating that a large number of those exposed to gaslighting suffer from symptoms associated with PTSD. This finding aligns with prior research by Sweet (2019), who found that gaslighting is prevalent in abusive relationships and often remains unrecognized due to its covert nature.

Table 2 presents the correlation between gaslighting (measured by the VGQ) and PTSD (measured by the PCL-5) using Spearman's rho. As indicated, there is a moderate positive correlation ($rs[193] = .48$) between gaslighting

and PTSD symptoms. This means that as gaslighting experiences get more severe, the possibility of meeting the criteria for PTSD also tends to increase. Conversely, a lower level of gaslighting is associated with a reduction of this possibility. Meanwhile, the p-value being less than 0.001 suggests that this correlation is statistically significant and unlikely to be due to chance. This finding aligns with the betrayal trauma theory proposed by Freyd (2018), which posits that psychological manipulations such as gaslighting can have a particularly damaging impact when perpetrated by a trusted partner. Betrayal trauma disrupts a victim's ability to make sense of their own experiences, leading to confusion, mistrust, and emotional turmoil—all of which are key components of PTSD (Freyd & Birrell, 2013).

Table 2. *Correlation between Gaslighting and PTSD*

Variables	N	Spearman's rho	p-value
VGQ	193	0.48	< .001
PCL-5			

Now, after establishing a quantitative foundation that highlights the significant presence of both gaslighting and PTSD symptoms among young adult females, as well as the positive correlation between them, the study progresses to a qualitative phase to uncover the lived experiences behind these numbers. By capturing detailed personal accounts, this phase seeks to identify the particular gaslighting experiences that contribute to PTSD symptoms, the pervasive impact, all of which align with PTSD's core features, and the diverse coping mechanisms victims adopt to manage their trauma. This qualitative inquiry not only contextualizes the statistical findings but also provides a richer understanding of how gaslighting operates as a potent, insidious form of psychological abuse, solidifying its connection with PTSD.

As such, Table 3 below shows the profile of the participants in this phase (qualitative) to offer a clearer context for their accounts and narratives. Tables 4, 5, and 6 follow, illustrating the everyday gaslighting experiences, the impact of gaslighting, and how gaslightees deal with trauma. Table 3 provides an overview of the qualitative phase participants' profiles, focusing on age, relationship duration, breakup timeline, and psychometric scores. All participants are young adult females, and their relationship durations range from one (1) to four (4) years. The time since breakup varies widely, from three (3) months to 36 months, indicating that participants are at different stages of recovery. The VGQ scores range from 48 to 70, with most participants scoring above 60, highlighting a significant prevalence of high gaslighting experiences. Similarly, PCL-5 scores range from 54 to 72, also showing high levels of PTSD symptoms across the sample.

Table 3. *Qualitative Phase Participants' Profile*

Participant	Age (in years)	Duration of relationship (in years)	Duration of breakup prior to data collection (in months)	VGQ score	PCL-5 score
1	22	4	6	66	72
2	21	1	6	63	67
3	23	3	36	68	69
4	22	3	1	57	61
5	22	1	14	70	69
6	23	2	36	68	56
7	21	1	5	67	62
8	21	1.5	5	48	60
9	20	2	6	50	54
10	21	1	3	61	58

Note. All participants are female.

Participants with longer relationships, such as Participant 1 with four (4) years, show higher scores on VGQ and PCL-5, reflecting a greater psychological impact. However, even those with shorter relationships, like Participants 2 and 5 with one (1) year, exhibit notable scores, indicating the pervasive nature of gaslighting. The data suggest that the intensity of psychological distress is not solely dependent on relationship length but is consistent across experiences of gaslighting. The data also reveal that psychological distress remains significant regardless of how much time has passed since the relationship ended, as seen in participants with both short (3 months) and long (36 months) breakup durations. Overall, the findings underscore the profound effects of gaslighting, regardless of the duration of the relationship or the time since its end.

These results align with prior research suggesting that the intensity of psychological trauma is more influenced by the nature and severity of emotional manipulation than by relationship length (Marshall, 2012; Sweet, 2019). Furthermore, the enduring distress experienced by participants, regardless of breakup duration, supports findings that gaslighting often leaves long-term psychological scars due to its insidious nature (Gonçalves & Matos, 2016).

Table 4 presents the everyday experiences of gaslighting reported by participants. It provides a detailed definition of each theme and its corresponding subthemes, along with personal accounts from participants that illustrate these experiences. Note that only one sample was included for the personal accounts to keep the write-up concise.

Table 4. *Common Gaslighting Experiences*

Themes	Subthemes	No. of Responses
Manipulation of Reality	Invalidating personal experiences	3
	Shifting the blame	4
Assertion of Dominance	Committing physical and verbal abuse	4
	Exhibiting controlling behavior	4
Creation of Confusion	Showing contradictory words and actions	3
	Demonstrating inconsistencies	5

Manipulation of Reality

Gaslighting often begins with distorting the victim's perception of reality (Sweet, 2022). By manipulating facts, emotions, or memories, the gaslighter creates an alternate version of events that benefits them. This manipulation begins by invalidating the victim's experiences, where their feelings or perceptions are dismissed as exaggerated or incorrect. The victim starts to doubt their emotions and recollections, gradually losing trust in their judgment. Thus, the victim may become increasingly dependent on the gaslighter for validation, further deepening the manipulation.

Additionally, the gaslighter shifts the blame for their abusive behavior onto the victim, making them feel responsible for the gaslighter's actions. This tactic not only distorts the victim's perception of the situation but also deepens the feelings of guilt. Over time, the victim may start to internalize this narrative, questioning whether they are to blame for the gaslighter's actions.

Invalidating personal experiences. Three (3) participants described gaslighting experiences in their relationships, where their perspectives were consistently dismissed or invalidated during arguments. The gaslighting behavior involved their partners not listening to their viewpoints, immediately deeming them wrong without considering their explanations.

"When I have a point of view, he will not listen. He will point out his own. He will immediately say I am wrong without even hearing my explanation." (P3)

Shifting the blame. Four (4) participants reported how their partners would shift blame onto them, even when their partners were at fault. The abusers would get angry and make the participants feel guilty by claiming that their actions were justified because of the participants' behavior. The abusers manipulated situations to make themselves appear as the victims, further distorting the reality.

"He gets angry even if he is at fault. Then he blames me, making me feel guilty, saying things like, 'I did this because of you, because you are like this.'" (P3)

Assertion of Dominance

Once the gaslighter has begun to destabilize the victim's sense of reality, they often move to assert their dominance (California Prime Recovery [CPR], 2024). This can manifest as physical or verbal abuse, where the gaslighter employs intimidation, insults, or violence to instill fear and submission. Such abusive actions further cement the gaslighter's power, making the victim feel unworthy and powerless. In addition to overt abuse, the gaslighter exerts control through more subtle, but equally damaging, behaviors, such as micromanaging the victim's decisions and life choices. By taking over the victim's ability to make independent choices, the gaslighter deepens the victim's dependency, leaving them trapped in the abuser's control. Assertion of dominance ensures that the victim is less likely to challenge or question the gaslighter, creating an environment where the abuser's control is

both explicit and implicit. The victim may even come to believe that they are deserving of the mistreatment, deepening their psychological captivity.

Committing physical and verbal abuse. Four (4) of the participants recounted physical abuse from their partners, and two (2) of these victims also experienced such abuse verbally. Such incidents involve being hit or threatened in front of others. Some participants even described severe incidents, such as attempts to be run over by a car or being brutally physically assaulted, resulting in visible bruises. They were also subjected to insults, often being called ‘crazy’ and ‘a liar’.

“Sometimes he curses at me or suddenly shouts at me in front of other people. Sometimes it goes as far as him physically hurting me.” (P3)

Exhibiting controlling behaviour. Four (4) participants described their partners as being excessively possessive and controlling, especially regarding interactions with others. They were restricted from going to social places like clubs due to fears that they would meet someone and replace their abusive partner. Their partners monitored their phones, scrutinizing even innocent chats with classmates, particularly males, and reacting with anger or jealousy. These behaviors extended to controlling decisions, with the abusers insisting that their words and orders are absolute. The possessiveness was often irrational, with the participants being accused of flirting or being unfaithful without credible evidence.

“He does not want me to join clubs because he thinks I might find someone else. He is also strict about whom I chat with. Even if it is just my classmates, he checks who I am talking with.” (P2)

Creation of Confusion

As the cycle of manipulation and dominance unfolds, the victim becomes ensnared in a web of confusion (Golenkova, 2022). The gaslighters frequently contradict themselves by saying one thing and doing another, leaving the victim struggling to reconcile these mixed messages. For example, they might express affection through flowery words while simultaneously acting cold or abusive, leaving the victim uncertain about which version of reality to trust. This cognitive dissonance creates emotional turmoil as the victim tries to make sense of the gaslighter’s inconsistent actions and words. Additionally, the gaslighter’s erratic and unpredictable behavior keeps the victim constantly second-guessing themselves and seeking clarity from the abuser. One day, the gaslighter may be kind and loving, and the next, cruel and dismissive. These unpredictable shifts keep the victim on edge, unsure of what to expect. By doing so, the abuser keeps the victim off balance, ensuring they remain uncertain and vulnerable, as they seek clarity amidst the chaos.

Showing contradictory words and actions. Three (3) participants expressed how their partners would offer empty apologies during confrontations, with no real actions to back them up. Promises, like giving everything or being their only support, were made but never fulfilled, making the participants feel neglected. Their partners claimed to be their only trustworthy ally, yet their actions contradicted their words. These created a sense of emotional disconnect and frustration in the relationship.

“Sometimes, when I confront him about something, he will apologize. He would say, ‘Sorry, it was my fault,’ but then he does nothing to show it in his actions.” (P1)

Demonstrating inconsistencies. Four (4) participants described how their partners initially showed affection and effort in the relationship, but gradually became distant or inconsistent. The relationship started healthy and loving, but the partner's behavior shifted over time, showing less interest. For three (3) other participants, drastic emotional shifts became apparent, with their partners alternating between anger and sudden displays of affection, leaving the participants confused and stressed. This behavior pattern worsened as time passed, causing emotional strain and adding to existing stresses in their lives.

“At the start of our relationship, he was clingy and effortful. However, later on, he could go on with his day without seeing me.” (P1)

Table 5 illustrates the various impacts of gaslighting experienced by participants. Below is a detailed definition of each theme and its corresponding subthemes, along with personal accounts from participants that illustrate these experiences. Note that only one sample was included for the personal accounts to keep the write-up concise.

Table 5. Impact of Gaslighting		
Themes	Subthemes	No. of Responses
Physical	Involuntary bodily reactions	3
	Impaired daily living activities	2
Social	Inability to connect with others	4
Behavioral	Loss of interest	4
	Increase in alertness	3
Psychological	Intensified negative emotions	5
	Decreased sense of self-worth	3

Physical

While gaslighting is primarily an emotional manipulation tactic, the effects often manifest in tangible physical symptoms (Goldstein, 2023). Victims may experience heightened adrenaline levels as a response to intense stress or anxiety, manifesting as tremors or irregular heartbeats. Gaslighting also disrupts sleep cycles and causes erratic eating habits. This could mean insomnia, hypersomnia, or frequent waking up due to anxious thoughts coupled with over-eating or loss of appetite, as the individual struggles to regain a sense of normalcy. The prolonged emotional toll gaslighting takes can also lead to neglect of personal care, as victims may feel overwhelmed or disconnected from daily routines, including basic self-care.

Involuntary bodily reactions. Three (3) of the participants reported experiencing physical symptoms such as tremors, cold hands, facial numbness, goosebumps, and palpitations during overwhelming moments or when they encounter reminders of their former partner. They mentioned being easily triggered, stemming from intense anxiety.

"I easily tremble because I was, at that time, very anxious. I start trembling, then my hands get cold, and sometimes my whole face goes numb. I also experience palpitations." (P2)

Impaired daily living activities. Two (2) participants shared that they encountered disturbances in their daily functioning. Such disturbances include unhealthy sleeping and eating patterns and poor hygiene habits.

"I was so down, as if I could not sleep. For two or three days straight, I had no sleep. Even though my eyes were closed, it felt like my mind was still alive." (P4)

Social

As the victim grapples with the physical challenges, the strain often extends beyond their own body, influencing their relationships and social interactions (Bhandari, 2024). As the victim's trust in themselves erodes, they may pull away from friends, family, and acquaintances. The gaslightees may then distrust others, fearing that everyone is attempting to deceive or manipulate them. This mistrust can extend to even their closest relationships, making them question the motives of those who genuinely care about them and destroying their ability to engage socially.

Inability to connect with others. Four (4) participants shared that they have lost interest in socializing and have built a wall around themselves. They reported feeling mistrustful and hesitant to form new relationships. This uncertainty makes them second-guess entering new connections, fearing that past hurts could repeat or worsen.

"Then I also lost interest in socializing. It is like I have built a wall around myself with people." (P3)

Behavioral

The behavioral consequences of gaslighting naturally follow the social effects, reflecting how individuals act and react after enduring such experiences. One common behavioral change is withdrawal from activities the victim once enjoyed (Raypole & Silva, 2024). Gaslighting can cause a deep sense of apathy or hopelessness, leading the

victim to lose interest in hobbies, studies, or work. Another behavioral impact is hypervigilance. The victim may become overly alert, constantly trying to anticipate the next instance of manipulation or abuse (Bhandari, 2024). The victim might feel like they are constantly walking on eggshells, trying to avoid setting off the gaslighter, which affects their behavior. Overall, gaslighting significantly alters the way a person functions in their daily life, making it difficult for them to engage in regular activities or maintain a sense of normalcy.

Loss of interest. Four (4) participants stated that they lost interest in activities they engaged in before, such as going to school, being active, and having hobbies, as they spend most of their time confined to their rooms. They also expressed a deep sense of being unable to function, describing themselves as emotionally wilted or lethargic.

"Then, I also lost interest in almost all activities. The things I used to do, I cannot do so anymore, especially if they are related to my ex." (P3)

Increase in alertness. Three (3) participants noted that they have become more hypervigilant and tend to overthink. They expressed anxiety about the possibility of their partner repeating something hurtful, highlighting how increased alertness and sensitivity to perceived threats manifests in their constant worry about negative interactions.

"Now, I have become more alert and tend to worry about many things." (P3)

Psychological

At the core of these physical, social, and behavioral shifts is the psychological toll gaslighting takes. As the victim's confidence in their reality diminishes, they may experience a significant amplification of negative emotions such as sadness, fear, anger, shame, guilt, or frustration (California Prime Recovery [CPR], 2024). These intensified emotions make it harder for the victim to regain emotional stability, often resulting in prolonged periods of depression or anxiety. Moreover, the constant manipulation can leave the victim feeling inadequate or worthless, as their experiences and feelings are consistently invalidated. Over time, this erodes their self-esteem, leaving them questioning their value. This diminished sense of self-worth can have long-lasting effects, as the victim struggles to rebuild their identity and regain a sense of self.

Intensified negative emotions. Five (5) participants highlighted feeling extreme surges of various emotions as they were experiencing and reflecting on the profound impact of gaslighting. Some harbored anger either towards the perpetrator/or towards themselves. Others expressed utmost regret, questioning what they did to deserve such betrayal and feeling frustrated with themselves for allowing it to happen. A few also described a sense of heaviness and sadness, and even periods of anxiety.

"I was so enraged that I felt like wanting to kill him. I was very sad, mostly, but it is really the anger that dominates, and then regrets." (P2)

Decreased sense of self-worth. Three (3) participants reported a significant drop in their self-worth, questioning whether they deserved the treatment they received. Some expressed feelings of losing themselves due to emotional reliance on their partner, noting that they based their happiness on them. As a result, their self-confidence plummeted, leaving them feeling diminished and insecure.

"After our relationship ended, my self-worth decreased. I kept asking myself, 'Do I deserve that? Do I deserve that kind of treatment?' (P3)

Table 6 provides an overview of the coping strategies used by individuals affected by gaslighting to manage their trauma. Below is a detailed definition of each theme and its corresponding subthemes, along with personal accounts from participants that illustrate these experiences. Note that only one sample was included for the personal accounts to keep the write-up concise.

Table 6. *How Gaslightees Deal with Trauma*

Themes	Subthemes	No. of Responses
Adaptive Coping	Practicing self-care	4
	Seeking professional help	2
	Connecting with loved ones	7
	Going to church	2
Maladaptive Coping	Drinking alcohol	3
	Engaging in self-harm	3
	Avoiding triggers	2

Adaptive Coping

Gaslightees may adopt constructive methods promoting healing and resilience (Wilson, 2023). For example, self-care may involve taking time to care for physical health through rest, exercise, or mindful eating, as well as practicing mental and emotional care through activities like journaling and relaxation techniques. Another important step is reaching out to mental health professionals such as psychologists, therapists, or counselors, who provide the necessary tools. Support from family and friends is also crucial in helping the victims cope. By sharing their feelings, experiences, and challenges with trusted people, they can find comfort, gain perspective, and feel less isolated. Furthermore, going to church or engaging in religious activities offers the victims a way to connect with their faith and find solace, hope, healing, and strength. All in all, these adaptive strategies focus on rebuilding a sense of self, finding validation, and fostering resilience in the face of emotional manipulation and trauma.

Practicing self-care. Four (4) participants gave a detailed explanation on how they cope positively with trauma by doing self-care. This involved journaling, meditating, pampering, watching movies or playing video games, resting, eating, and even practicing positive self-affirmation and self-love.

“When I have thoughts that I cannot share with others and feel like I will be judged or am emotional, I write them down in my journal.”(P1)

Seeking professional help. Two (2) participants reported getting help from mental health professionals. Both were diagnosed with PTSD, with one already having recovered from it while the other still receives medication and attends therapy sessions with their psychiatrist. Due to the non-judgmental space these professionals offer, this eventually helps to alleviate the severity of their struggles over time.

“Counseling helped. It is comforting to know that someone is ready to listen to you without judgment. It is different when you are talking to a professional who is there to help you.”(P3)

Connecting with loved ones. Seven (7) participants recalled spending time with their friends and families and even having pets, which helped them deal with the challenges of being victims of manipulation. They noted that it eases their minds from stress, restores their self-worth, and makes them feel freer and at peace.

“My friends became a strong support system for me.” (P3)

Going to church. Two (2) participants described regular churchgoing as a vital part of their healing and spiritual journey. They thanked the Lord for their challenges, viewing them as opportunities for personal growth and resilience in future relationships.

“I frequently visit the church.” (P8)

Maladaptive Coping

While gaslightees may initially employ adaptive coping mechanisms to regain control of their emotions, revalidate their experiences, and rebuild a sense of self, when the emotional burden becomes overwhelming or when healthy strategies feel insufficient, they may resort to maladaptive mechanisms as a quick escape from the pain (DeWitt, 2022). Some individuals may turn to substances as a way to numb the emotional pain or escape trauma. Self-harm may also be used as a way to externalize that inner pain. This can help regain control when emotions feel too overwhelming. Preventing triggers is also one of the victims’ protective measures, which involves constantly

avoiding certain places, people, or situations to keep from reliving traumatic memories. Although these mechanisms may provide momentary release, they are all ultimately forms of destructive behavior that deepen emotional scars rather than heal them.

Drinking alcohol. Three (3) participants explained that they often resorted to drinking as a coping mechanism, either to express their emotions or escape from the pain. It has become a regular part of their lives, reflecting a reliance on such substances to navigate their lives.

"I was always out drinking alcohol." (P8)

Engaging in self-harm. Three (3) participants described a downward spiral into self-harm following emotional distress caused by their abusers. One participant even mentioned cutting their hands but reported feeling numb to the pain, indicating a deep emotional disconnect.

"But about two weeks later, I felt like I was going crazy. I started doing all sorts of things. That is when I began to self-harm." (P3)

Avoiding triggers. Two (2) participants highlighted using avoidance and distraction from any triggers relating to their former partner as their mechanism to protect themselves. One participant expressed a strong desire to shy away from thoughts, feelings, and situations related to their ex, even going as far as blocking them on social media. Another participant described keeping their mind occupied, highlighting a determination to prevent relapsing into negative thoughts about the past.

"I avoid a lot of thoughts, feelings, or occasions that involve my ex. As much as possible, I do not want to see him. Moreover, I have also blocked him on my social media." (P3)

In addition to the key findings in Tables 4, 5, and 6, the study also includes Table 7 below, highlighting the triangulation phase results. This phase involved interviews with close friends of the participants, providing an external perspective on the gaslightees' experiences. These insights serve to validate and enrich the themes identified in the qualitative analysis, offering a broader understanding of gaslighting and PTSD.

Table 7 sheds light on the recurring subthemes gathered from interviews with the closest friends of the participants from the qualitative phase. The theme of *everyday gaslighting experiences* validates the key findings presented in Table 4. The theme *impact of gaslighting* validates the results in Table 5. In terms of the theme, *how gaslightees deal with trauma*, this validates the significant outcomes in Table 6. Below is a detailed definition of each theme, its corresponding subthemes, and personal accounts from the closest friends that triangulate the gaslightees' experiences. Note that only one sample was included for the personal accounts to keep the write-up concise.

Table 7. Summary of Findings (Triangulation)

Objective	Subthemes	No. of Responses
Common Gaslighting Experiences	Invalidating personal experiences	1
	Committing physical abuse	1
	Exhibiting controlling behavior	1
	Showing contradictory words and actions	1
Impact of Gaslighting	Impaired daily living activities	3
	Intensified negative emotions	3
How Gaslightees Deal with Trauma	Practicing self-care	2
	Connecting with loved ones	3
	Going to church	2
	Indulging in vices	1
	Engaging in self-harm	2

Common Gaslighting Experiences

This theme encompasses the strategies perpetrators use to gaslight, as experienced by the gaslightees and witnessed by their closest friends. These instances often involve invalidating personal thoughts and emotions, making victims doubt their feelings and experiences. Gaslighters may dismiss concerns as “overreactions” or claim events never occurred, leaving victims self-doubtful. Physical abuse may also occur, as it reinforces fear and dependence, creating a toxic dynamic. Additionally, gaslighters often exhibit controlling behavior, using dominance to dictate the victim's choices or actions. Contradictory words and actions are another hallmark, where perpetrators say one thing but do another, further disorienting the victim. These experiences, while varied, share the common goal of undermining the victim’s confidence and sense of autonomy.

Invalidating personal experiences. One (1) friend described the abuser dismissing the victims’ feelings and minimizing their concerns. This gaslighting behavior created a dynamic where the victim constantly questioned whether their feelings were valid, making them unsure of their reality.

“She immediately opened up to the guy about how she was feeling. However, the guy would dismiss my friend's concerns and brush off the issue. It was like he said my friend was overthinking and making up things in her head.” (S3)

Committing physical abuse. A friend recalled one of the victims hiding signs of physical violence committed by her former partner. This friend added that the victim, after ending the relationship with the abuser, often found herself drawn to aggressive men and was longing for the toxic patterns she had endured previously. This just proves how gaslighting can distort the victims’ perception of healthy relationships, leaving them more susceptible to further manipulation and abuse.

“Then she started hiding her bruises because there was already physical violence involved.” (S2)

Exhibiting controlling behaviour. A participant’s close friend recounted witnessing the controlling tendencies of an abuser. She mentioned noticing the victim becoming increasingly isolated, distancing herself from her friends. She later learned that the ex-partner influenced this separation. She added that this controlling behavior extended to the victim’s appearance and social media presence.

“And then, when I found out the truth, she told me the guy forbade her. He would get angry whenever my friend spent time with us.” (S2)

Showing contradictory words and actions. One (1) friend described how the abuser says a thing, but does another. This disconnection between words and actions fuels a cycle of self-doubt and insecurity, often leading victims to feel trapped in a perpetual state of unease as they struggle to reconcile conflicting signals from their abuser.

“The guy was lovely with his words, but his actions did not match. That is why my friend started doubting a lot... He would assure her, but you could not see it in his actions.” (S3)

Impact of Gaslighting

The impact of gaslighting, as seen by the witnesses, manifests in both functional and emotional aspects of a victim’s life, often leaving long-lasting scars. One notable consequence is the impairment of daily living activities, where victims struggle to focus on or complete everyday tasks of daily life, such as eating. This stems from the constant mental strain caused by the abuse. Gaslighting also leads to intensified negative emotions, such as heightened depression and feelings of regret, which persist long after the gaslighting ends. The cumulative effect of their experiences significantly diminishes their quality of life, eroding their sense of stability and security.

Impaired daily living activities. Three (3) friends testified having seen the victims experience weight fluctuations, appetite loss, and general neglect of basic self-care needs. These are visible manifestations of the internal struggle, highlighting how deeply psychological manipulation can affect one's body and overall well-being, which can make recovery even more challenging.

"She also was not eating properly, and it was hard as a friend because you just wanted her to be okay." (S4)

Intensified negative emotions. Three (3) friends recounted how the victims experienced extreme feelings of sadness, anger, and regret. This unveils the intense emotional upheaval that gaslighting victims often endure, as they struggle with conflicting emotions and a sense of inner turmoil.

"Sometimes she felt anger, sadness, and pity for herself. She would wonder why she allowed herself to be treated that way." (S2)

How Gaslightees Deal with Trauma

Gaslightees employ various mechanisms to cope with the trauma. Some help victims regain stability, such as practicing self-care through mindfulness and pampering. Many victims also turn to their social support systems, connecting with loved ones to validate their experiences and rebuild trust in themselves. Spirituality is vital for some, with practices like attending church offering emotional refuge and a sense of purpose. However, not all coping strategies are constructive. Some victims engage in destructive behaviors, such as indulging in vices like drinking or smoking, to numb the pain temporarily. Others may resort to self-harm, expressing the deep emotional turmoil they feel. These varied responses reflect the complexity of recovery and the unique ways individuals process and heal from gaslighting trauma.

Practicing self-care. Two (2) friends described how becoming more introspective, developing a stronger connection with oneself, and taking steps toward self-care were essential in the victims' healing process. These observations reveal the importance of self-reclamation in the aftermath of gaslighting, as victims rebuild their confidence and rediscover personal joy. Through engaging in activities that reinforce self-worth and individuality, they reclaim control over their lives, transforming moments of self-care into steps toward empowerment and emotional healing.

"She started going out, eating, buying the things she liked. She began caring for herself and becoming more confident, and it seemed like she developed a deeper self-acceptance." (S1)

Connecting with loved ones. Three (3) friends noted how a strong support system was instrumental in offering victims a safe space to express their repressed emotions. With friends and family as compassionate witnesses to their struggle, the victims can confront their trauma openly, fostering a sense of relief and understanding that significantly contributes to emotional resilience and recovery.

"She started going out and spending time with us again. She was also able to share what happened to her. She opened up." (S2)

Going to church. Two (2) friends revealed that attending the church was one of the turning points in the victims' path of recovery. This underscores the role of spiritual guidance as a powerful source of solace and resilience for victims coping with trauma. By turning to their faith, victims find a safe space to process their pain and regain a sense of inner peace, drawing strength and comfort that supports their journey toward healing and stability.

"Whenever she needed to vent, she would go to the chapel to cry it out." (S4)

Indulging in vices. One (1) friend stated that the victim started to drink alcohol and smoke cigarettes more frequently. This testimony proves how destructive gaslighting is, driving the victims to seek escape or relief through risky habits and maladaptive behaviors.

"She picked up some vices, like smoking. Moreover, what was concerning was that she would hide in their bathroom to smoke. She would drink alcohol too." (S4)

Engaging in self-harm. One friend (1) recalled how a victim resorted to harming themselves as a method of relieving the pain. This temporary bandage ultimately left them feeling more trapped and disconnected, as the physical pain only provided a brief distraction from the underlying emotional turmoil. Over time, the self-harm became a cycle, reinforcing feelings of helplessness and deepening the victim's sense of despair.

"She also has a past where she used to engage in self-harm. That was one of her coping mechanisms." (S2)

4.0 Conclusion

The quantitative phase of this study revealed the widespread presence of both gaslighting and PTSD symptoms among young adult females, establishing a foundation for understanding the pervasiveness of these issues within this demographic. The data confirmed a significant correlation between the intensity of gaslighting behaviors and the severity of PTSD symptoms, suggesting that higher levels of gaslighting lead to more pronounced trauma responses. This correlation underscores gaslighting as a potent risk factor for developing PTSD, reinforcing the importance of recognizing this form of abuse as a serious mental health concern. Furthermore, this study revealed that the effects of gaslighting on young women are not strictly dependent on the length of the relationship or the time passed since it ended. This finding emphasizes the need for increased awareness of the long-lasting impact of gaslighting and the development of specialized interventions that support survivors across varied relational contexts.

In the qualitative phase, this study explored specific gaslighting experiences, providing insight into the common tactics that participants endured, such as manipulation of reality, assertion of dominance, and creation of confusion. These behaviors appear to be critical contributors to the development of PTSD symptoms, as they create an environment of chronic stress and self-doubt. Such tactics destabilize victims' sense of reality and self, mirroring aspects of trauma that are central to PTSD. By illuminating these experiences, this study links specific gaslighting behaviors with the psychological mechanisms that trigger and sustain PTSD symptoms, further validating the observed correlation.

Meanwhile, the impact of gaslighting on victims' daily lives closely mirrors the diagnostic criteria of PTSD according to the DSM-5. Victims in this study reported experiencing involuntary bodily reactions, impaired daily living activities, inability to connect with others, loss of interest, and increased alertness. They intensified negative emotions, all of which align with PTSD's core features. These parallels further establish gaslighting as a severe, trauma-inducing experience with various effects akin to those seen in conventional forms of PTSD-inducing events. The core symptoms of PTSD identified in this study—such as avoidance, hypervigilance, and emotional numbness—indicate significant distress across multiple life domains and emphasize the need for broader acknowledgment of gaslighting's long-term consequences.

Finally, the coping mechanisms identified provide a deeper understanding of how victims respond to and manage the trauma associated with gaslighting. Participants employed both adaptive strategies—such as practicing self-care, seeking support from professionals and loved ones, and engaging in faith-based practices—as well as maladaptive responses, including substance use, self-harm, and avoidance. This array of coping methods highlights the resilience of survivors while also underscoring the urgent need for targeted support, as maladaptive responses can exacerbate long-term mental health challenges.

Taken together, this study makes a significant contribution to the growing body of literature on emotional abuse and trauma. It provides empirical evidence linking gaslighting to the development of PTSD, particularly among young adult Filipino women, and offers a clearer understanding of how specific gaslighting tactics lead to trauma. These findings have far-reaching implications for mental health professionals, educators, and policymakers, underscoring the urgent need to recognize gaslighting as a legitimate and severe form of psychological abuse.

Given these insights, future research should explore the long-term psychological impact of gaslighting across diverse populations, including men, LGBTQ+ individuals, and older adults. Longitudinal studies would be especially valuable in tracking the progression of trauma symptoms over time. Researchers should also examine the role of sociocultural factors in shaping gaslighting experiences and trauma responses, as well as evaluate the

effectiveness of specific therapeutic interventions tailored for gaslighting survivors. Additional studies might investigate how early identification and intervention can prevent the escalation of trauma-related disorders.

From a practical standpoint, this study's findings can inform the development of trauma-informed mental health interventions that are sensitive to the unique experiences of gaslighting victims. Educational campaigns should be implemented to increase awareness of emotional abuse and to help individuals recognize the early signs of gaslighting in relationships. Counseling services, school programs, and community support initiatives can all benefit from incorporating the knowledge gained through this research. Moreover, policymakers should consider broadening the legal definitions of abuse to include psychological and emotional manipulation, ensuring that survivors receive the protection and mental health resources they need.

In conclusion, gaslighting is not merely a manipulative behavior—it is a deeply damaging form of emotional abuse that can lead to severe and lasting psychological trauma. This study sheds light on the lived experiences of young adult females who have endured gaslighting and developed PTSD symptoms as a result. By deepening the understanding of how gaslighting manifests and affects its victims, this research advocates for greater recognition, earlier intervention, and more compassionate care for those who have suffered in silence.

5.0 Contributions of Authors

All authors contributed to the study's conceptualization, data collection, analysis, and writing, ensuring the research's accuracy and integrity.

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