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Experience of a Lifetime: Study Abroad, Trauma, and Institutional Betrayal

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ABSTRACT

This study is the first to expand the investigation of study-abroad risks to include a range of traumatic experiences for male and female students and to examine effects of institutional betrayal (i.e., an institution's failure to prevent trauma or support survivors). In an online survey of 173 university students who had studied abroad, many respondents (45.44%, n = 79) reported exposure to at least 1 traumatic experience while abroad, most frequently natural disasters, sexual assault, and unwanted sexual experiences. Of students exposed to potentially traumatic events, more than one third (35.44%, n = 28) also reported at least 1 form of related institutional betrayal, which uniquely correlated with posttraumatic distress in some participants, when controlling for lifetime trauma history.

An unknown perpetrator sexually assaulted "Mallory," a young woman studying abroad in Central America, while she was on a beach outing with friends (Redden, 2014). Beyond the upheaval of the assault, in the proceeding days and weeks, the actions of the study-abroad program's executive director further exacerbated Mallory's ordeal. The administrator attempted to coerce Mallory into reporting the incident to police and signing a legal waiver of liability without a lawyer present; she repeatedly made Mallory "feel uncomfortable and singled out," and confusingly, tried to praise and placate Mallory, including offering a "bribe" in the form of an upgrade to luxury accommodations (Smyth, 2014). Further, the administrator dismissed the two professors Mallory most trusted and relied on following the assault because they broke protocol when they obtained emergency contraceptives (murkily legal in the predominantly Roman Catholic country) for Mallory. The administrator might have believed her actions to be supportive, and she was undoubtedly balancing the confusing, possibly conflicting obligations to serve the institution, uphold the law, and protect the student. However, the administrator's actions left Mallory feeling it was "impossible to begin healing" until she was sure no other student would have to endure a similar experience.

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Mallory labeled the mishandled response from her study-abroad program as a "revictimization" that was "intrusive" during the time she should have been allowed to begin the process of recovery. Indeed, in an open letter to her college and the study-abroad program, Mallory stated that changes to the emergency protocol of the school and study-abroad program would be necessary "in order to make this situation right, to allow my healing process to truly begin, and quite honestly, to sleep soundly at night" (Smyth, 2014). Mallory's experience exists among a complex system of ideological and logistical problems underlying study-abroad programs: financial burdens limiting opportunities for diverse engagement in international study; travelers' unwillingness to conform to host country cultural expectations and practices; the dynamics of language politics and the global privileging of English; institutional, political, and financial obligations that prioritize enrollment quantity over program quality; young people exploring the liberty of adulthood (including alcohol and sex) under the guidance and limitations of responsible institution(s); and the fallacious belief that cultural tourism, which situates affluent, White, English-speaking Americans as the norm from which to view the global "other," will help students develop cultural competency without engaging global inequities, dynamics of racism, or histories of imperialism. We suggest that an additional frame of reference is useful: Home and study-abroad institutions influence students' expectations of safety and experiences of support following traumatic events.

Although sparse, emerging research suggests not only that exposure to some types of traumatic events while studying abroad is common, but also that the way in which institutions respond has the potential to exacerbate a student's negative reaction to that event. Given the paucity of research about study-abroad programs generally, this study employed an online self-report survey of students to further explore one component: the experience of trauma and the effects of institutional actions and attitudes on the aftereffects of traumatic experiences for students who are studying abroad.

Background

The modern U.S. university student is heavily encouraged to spend a semester or more studying outside the United States, but little research has focused on the institutions supporting these students. Over the past two decades, the number of U.S. students studying abroad during college has more than tripled to 283,000 (Institute of International Education [IIE], 2013); substantial government and private support for the idea of studying abroad indicates this trend is likely to continue. As the U.S. Assistant Secretary of State for Education and Cultural Affairs stated in November 2013, "We encourage U.S. schools to continue to … do more to make study abroad a reality for all of their students" (IIE, 2013).

Despite the increase in study-abroad enrollment, there has been little examination of the risks students face while studying abroad, the efficacy of risk-prevention efforts, or schools' support of students in the event of traumatic exposure. Colleges, universities, and independent study-abroad programs focus on the personal, professional, and cultural benefits when recruiting students to study abroad but often minimize potential risk factors and challenges (Bolen, 2001).

The sparse literature about study-abroad risks is limited to female students' exposure to sexual assault, namely that they face increased exposure to attempted and completed sexual assault while studying abroad, relative to on-campus assaults at home institutions (Flack et al., 2014; Kimble, Burbridge, & Flack, 2013). In both of these studies, participants reported high rates of exposure to unwanted sexual experiences (including nonconsensual touching, attempted or completed assault) while abroad ranging from 18.8% (Flack et al., 2014) to 38.1% (Kimble et al., 2013). This is particularly alarming given that most study-abroad programs have shorter durations than the reference periods used in the majority of domestic studies of campus sexual assault.

Given the dearth of research, individual risk factors for sexual assault during study abroad are unclear. Kimble et al. (2013) found a geographical correlation, with higher assault rates occurring in non-English-speaking countries. Neither Kimble et al. (2013) nor Flack et al. (2014) found that students' self-reported language fluency correlated with sexual assault victimization. The identity of perpetrators differed between these two studies. The majority of perpetrators in Kimble et al.'s (2013) study were nonstudents, usually local residents of the abroad country. Conversely, Flack et al. (2014) found the majority of perpetrators to be fellow university students participating in study abroad, from either the victim's home university or another U.S. university. Despite the lack of agreement between these studies, these findings suggest students could face some elevated risks based on individual differences. Because there have been so few examinations of traumatic exposure during study abroad, little is known about rates of exposure to the broad range of potentially traumatic events beyond sexual assault. Similarly, gender differences in trauma exposure during study abroad are unknown.

Others have begun to examine the role of alcohol consumption in the study-abroad experience, which could potentially place students at increased risk for witnessing or experiencing traumas abroad due to loss of consciousness or control when intoxicated. The increased availability of alcohol (lower drinking ages), increased independence, and novel social situations combine to create an environment where increased drinking is possible. Further, Pedersen, LaBrie, Hummer, Larimer, and Lee (2010) documented heavier drinking habits and increased alcohol-related

consequences in students who chose to study abroad, when compared with their peers who did not study abroad during the same time period. Even before going abroad, there is an indication that students perceive studying abroad as an opportunity to drink more (Pedersen, LaBrie, & Hummer, 2009). The associated impairment, especially when one is unfamiliar with the local language or culture, has the potential to increase risk of exposure to potentially traumatic events.

Given that study-abroad experiences are promoted and conducted in an institutional context, institutional representatives and systemic mechanisms play a significant role in the day-to-day experience of a student abroad. However, identifying helpful or harmful institutional characteristics proves difficult, as the complex interplay of practices, beliefs, cultures, training, funding, marketing, and political mandates influence institutional practices and attitudes.

Although no national or international standard exists to regulate student safety while abroad, many students and their families expect their college or university to act *in loco parentis* (Bolen, 2001). This expectation might arise in part due to students' inexperience in the international context, leading them to rely on university advisors and program staff for protection and support. This relationship parallels those in other institutional contexts: employees and their organization, church members and their diocese, or soldiers and the Department of Defense. In all of these cases, members place tremendous trust in their institution and rely on the institution's support in the face of adversity (Freyd & Birrell, 2013). When individuals trust or depend on an institution in this manner, there is potential for betrayal. Betrayal trauma theory (Freyd, 1994; Freyd et al., 2007) explains the unique consequences incidental to the experience of trauma within such close relationships. Although betrayal trauma theory was originally developed to understand abuse occurring in interpersonal relationships, it has also been applied to institutions (e.g., Smith & Freyd, 2013). Women who experienced sexual assault in the context of a college campus who reported institutional betrayal (e.g., an institution [college, fraternity, church, etc.] playing a role in the traumatic event by creating an environment in which the event seemed more likely to occur; responding inadequately to the experience, if reported; suggesting the experience might affect the institution's reputation; etc.) displayed significantly more severe posttraumatic distress than those who had similar sexual assault experiences but did not report institutional betrayal (Smith & Freyd, 2013). Although focused on women who were sexually assaulted, the study suggests the scope of institutional betrayal extends to populations that are more diverse and to the experience of a broader range of traumatic events.

The study-abroad setting is a notable context for potential institutional betrayal because the role of institutions is so salient. While abroad, students

are more reliant on institutional representatives (e.g., support staff, teachers, host family members, etc.) than they would be on a home campus, given their lack of knowledge and experience in the foreign country. Further, it can be more difficult to contact family or members of other supportive social structures. Given students' reliance on institutional mechanisms and members, it must be noted that the identity of institutional representatives varies widely, from staff who live and work in the foreign country of study to U.S. professors, administrators, or staff, who themselves might have limited knowledge of the host country and unavoidably carry certain cultural knowledge and biases. Students' lack of self-sufficiency and access to other support, potential risk of traumatic exposure, and the dynamics between institutional members and environment makes studying abroad a unique and important context in which to examine institutional betrayal.

Purpose of this study

This study had two main objectives. First, this study involved a preliminary analysis of traumatic experiences of students studying abroad, including prevalence and potential individual risk factors. Second, this study tested the hypothesis that, when compared with students whose study-abroad trauma did not involve institutional betrayal, students who were exposed to traumatic events while studying abroad in conjunction with institutional betrayal would exhibit more negative indicators of psychological distress.

Method

Participants

The sample consisted of undergraduate students at a large, public Pacific Northwest university who had received college-level credit through international participation in study-abroad programs, including direct enrollment in a local university, field-based study, professional internships, or a combination of these programs. This included programs of any duration, through which students might have earned any number of credits. A total of 173 students, mostly female (77.5%), White (79.3%), and young adult (age $M = 21.86$, $SD = 3.65$) successfully completed an online self-report survey. The majority of respondents had returned from studying abroad less than 1 year prior (75.7%), although some students had been back in the United States longer (1–2 years since return = 21.4%) and some students were currently studying abroad (2.9%).

Participants provided additional information about their study-abroad experience that might illuminate individual differences in traumatic

experience or institutional betrayal susceptibility. Participants studied across seven different regions: Non-English-speaking Europe (35.8%), English-speaking Europe (18.5%), Central and South America (14.5%), Africa (11.6%), Asia (13.9%), North America (4.0%), and Australia (1.7%). Students most frequently spent one term abroad (i.e., 10–15 weeks; 41.0%) or less than one term abroad (i.e., less than 10 weeks; 39.3%); less frequently, students spent more than a term but less than a full year abroad (13.9%) or more than one full year abroad (5.8%). The majority of participants described their level of fluency in the language of their study-abroad country as no proficiency (23.3%) or elementary proficiency (23.3%). Roughly half (50.9%) of the sample received funding or scholarships from a home college or university to study abroad.

Procedure

Before beginning recruitment and data collection, the study received approval from the university's Office of Research Compliance. Current students who had studied abroad were recruited through an e-mail from the university study-abroad office. Additionally, after participating in the survey, participants received a link to the survey that they could distribute to other potential participants if they chose. Using the e-mail link, participants navigated to the Qualtrics-hosted survey. Participants agreed to a statement of consent and then responded to a series of measures of trauma history, institutional betrayal, and psychological distress symptoms, as well as a brief demographics questionnaire. Participation took roughly 30 minutes. After participation, subjects reviewed a debriefing statement that included information about anonymously registering for the compensation drawing to receive one of 40 $25.00 gift certificates to Amazon.com, the study's purpose, and contact information for the study investigators and university and community counseling services, should questions from the survey cause adverse reactions.

Measures

Life Events Checklist for DSM–5

Traumatic experiences were measured using two versions of the Life Events Checklist for DSM–5 (LEC–5; Weathers et al., 2013), modified to focus participant responses to two areas of their life history: the time outside study abroad and during study abroad. This is a self-report measure consisting of 16 stressful and potentially traumatic life events (e.g., serious accident at work or school, home, or during recreational activity), with the option to write in an additional event. For each item, respondents had the option to select multiple responses, including *happened to me, witnessed it, not sure*, or *doesn't apply to*

me. Traumatic events were categorized as noninterpersonal, interpersonal, or existential. Noninterpersonal events included natural disaster, fire or explosion, transportation accident, or other serious accident. Interpersonal events included physical assault; assault with a weapon; sexual assault; other unwanted or uncomfortable sexual experience; combat exposure; and serious injury, harm, or death the participant caused to someone else. Existential events were defined as those that might confront a participant with the reality of mortality but were not distinctly interpersonal or noninterpersonal, including captivity; life-threatening illness or injury; severe human suffering; sudden, violent death; and sudden, unexpected death of someone close to the participant. Participants were coded as having experienced or witnessed each of these three categories, resulting in six categorical variables.

The LEC–5 has been demonstrated to be a good measure of exposure to traumatic events and has convergent validity with measures of trauma-related psychopathology (e.g., posttraumatic symptomology; Gray, Litz, Hsu, & Lombardo, 2004). The original LEC–5 item about exposure to toxic materials was changed to "ingestion of so much alcohol or other substance that loss of consciousness or loss of control over actions occurred." In analysis, it was determined that this item should not be included as a potentially traumatic event, so the item was evaluated separately as a measure of high use of mood-altering substances.

Participants who endorsed an interpersonal traumatic event were also asked to describe the identity of the perpetrator using the following categories: (a) *a person from your home country that you knew;* (b) *a person from your home country that you did not know;* (c) *a person from your home country that you did not know;* (d) *a host-country member you did not know;* or (e) *other*, with a write-in box for participants to elaborate on the type of perpetrator.

Institutional Betrayal Questionnaire: International study

To evaluate institutional betrayal, an augmented version of the Institution Betrayal Questionnaire (IBQ; Smith & Freyd, 2013) was used. The measure consists of 12 items that describe possible ways in which an institution might have played a role in the traumatic event or experience. Participants were directed to consider all layers of institutional representatives, from "large systems such as a university (in the U.S. or abroad), a study abroad program, an internship organization, a government, a law enforcement agency, or organized religion" to "parts of these systems such as a university department or office, a host family, or an internship team." The questionnaire was constructed such that the IBQ was displayed only to participants who previously indicated that they experienced or witnessed a traumatic event while studying abroad. Follow-up questions to indirectly measure respondents' institutional loyalty or closeness (e.g., "Would you

recommend that a friend participate in the same study abroad program you participated in?") were also included. The original IBQ was modified for this study to tailor it to the experience of studying abroad in two ways: (a) two items were added that assessed institutional betrayal unique to study abroad ("Providing inadequate training and education about how to avoid the experience" and "Indicating your lack of local cultural knowledge led to the experience"), and (b) the examples that followed items were tailored to study-abroad experiences (e.g., item: Creating an environment in which this experience seemed more likely to occur; example: "That was just a cultural experience").

Trauma Symptoms Checklist–40

Psychological symptoms related to traumatic experience were assessed using the Trauma Symptom Checklist–40 (TSC–40; Elliot & Briere, 1992) to measure participants' experiences of six subscales of challenges related to psychological trauma: Anxiety, Depression, Dissociation, Sexual Abuse Trauma Index, Sexual Problems, and Sleep Disturbances. The measure consists of 40 items describing distress found to be associated with traumatic experiences. Respondents indicated how often they experienced each symptom in the previous 2 months using a 4-point scale of frequency, ranging from 0 (*never*) to 3 (*often*), for items such as, "How often have you experienced the following in the last 2 months? Restless sleep." In this study, the TSC–40 proved a reliable measure of posttraumatic symptoms (α = .93). All items were summed to create a total score, with higher scores indicating more severe trauma symptoms.

Data preparation and analysis

All analyses in this study were conducted using SPSS. Missing responses from items assessing demographics and measures of trauma exposure (e.g., LEC) were left missing. Scores on the TSC were positively skewed (skew = 1.55, SE = 0.18), indicating that lower levels of posttraumatic distress were reported most frequently within this sample. Analyses of between-group differences in traumatic experiences were tested using SPSS's general linear model (GLM), which is conducive to testing of multiple categorical variables. In reporting the results of analyses, both p values and partial eta-squared (η_p^2) effect size have been reported. Increasingly, the social sciences are relying on this practice, and it is of particular importance with this sample because the small size could limit the utility of relying on significance testing alone.

Results

Traumatic experiences

A majority of respondents (86.78%, $n = 151$) reported personally experiencing or witnessing at least one traumatic event during their lifetime, outside of study abroad. Most frequently, outside of study abroad, participants reported personally experiencing an unwanted or uncomfortable sexual experience that was not actual or attempted assault ($n = 70$), a transportation accident ($n = 59$), the sudden, unexpected death of a close other ($n = 39$), and a natural disaster ($n = 27$). Additionally, 45.44% ($n = 79$) of the sample reported experiencing ($n = 23$), witnessing ($n = 20$), or both witnessing and experiencing ($n = 36$) a traumatic event while studying abroad. The most frequent events personally experienced while studying abroad included an unwanted or uncomfortable sexual experience that was not actual or attempted assault ($n = 54$), natural disaster ($n = 8$), sexual assault ($n = 5$), and the sudden, unexpected death of a close other ($n = 5$). Students most frequently witnessed another person exposed to unwanted or uncomfortable sexual experiences ($n = 30$), transportation accidents ($n = 16$), and severe human suffering ($n = 11$). Of the participants who reported exposure to a traumatic event while studying abroad, 28.6% reported personally experiencing one or more traumatic events, 26.2% reported witnessing one or more traumatic events, and 45.2% reported both personally experiencing and witnessing one or more traumatic events.

The length of time students were abroad significantly correlated with exposure to traumatic experiences, $F(1, 172) = 3.59$, $p = .015$, $\eta_p^2 = .06$, with students spending more time abroad experiencing a greater mean number of traumatic events. Additionally, language proficiency correlated with trauma exposure. Those who self-reported with a language fluency of no proficiency were least likely to experience trauma, $F(1, 166) = 6.328$, $p = .013$, $d = 0.352$. Those with self-described near-native levels of fluency were most likely to experience a traumatic event, $F(1, 166) = 4.44$, $p = .037$, $d = 0.664$. However, when controlling for duration of study-abroad programs, language proficiency was no longer a significant predictor of likelihood of traumatic exposure.

Both male and female students reported high rates of lifetime traumatic exposure outside of study abroad: 88.9% of men and 85.7% of women. While studying abroad, male and female students did not significantly differ in their likelihood of being exposed to some form of traumatic event. Within types of traumatic events, women ($M = .36$, $SD = .48$) were significantly more likely than men ($M = .14$, $SD = .35$) to experience other unwanted or uncomfortable sexual experiences, $t(74.76) = -3.08$, $p = .003$; there were no significant differences for any other type of traumatic event.

Individual differences

For interpersonal events experienced abroad, participants were asked to report the identity of the perpetrator. For personally experienced traumatic events, the most frequently reported perpetrator identity (38% of interpersonal events) was an unknown host country resident (see Figure 1 for details). For participants who had witnessed a traumatic event, the majority of participants who experienced an interpersonal event (59%) chose not to report a perpetrator.

Of respondents who had experienced a traumatic event while studying abroad, almost all (98.7%) also reported experiencing a traumatic event at another point during their lifetime. A comparison of the proportion of participants who reported experiencing additional lifetime trauma for those who reported no study-abroad trauma ($M = .77$, $SD = .42$) and those who reported any study-abroad trauma ($M = .99$, $SD = .11$) revealed a significant difference in lifetime traumatic experiences between the two groups, t (172) = −4.831, $p < .001$.

To understand the relative effects of trauma experienced outside of and during study abroad, two models were tested. The first, a univariate GLM analysis, determined that traumatic experiences outside of study abroad significantly correlated with trauma outcomes, as indicated by TSC–40 scores, $F(1, 172) = 10.20$, $p = .002$, $\eta_p^2 = .06$. In the second model, when lifetime trauma history (outside of study abroad) was controlled for, additional trauma experienced while studying abroad was predictive of more severe posttraumatic distress (TSC scores), above and beyond the effects of non-study-abroad trauma experiences, $F(1, 171) = 45.03$, $p = .03$, $\eta_p^2 = .03$. Additionally, 14.4% ($n = 25$) of the sample reported ingesting so much alcohol or other substance that loss of consciousness or control over actions occurred.
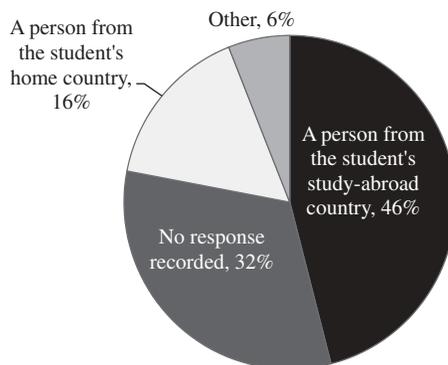

Figure 1. Pie chart depicting percentages of reported perpetrator identity for interpersonal traumatic events the participant personally experienced.

Institutional betrayal

Of the students who reported any form of traumatic experience while studying abroad, more than one third (35.44%, $n = 28$) also reported experiencing at least one form of institutional betrayal. Students did not significantly differ in exposure to institutional betrayal based on gender. Respondents most frequently indicated an institution had created an environment where the traumatic event seemed more likely to occur (54.29% of participants who endorsed any institutional betrayal) and where the traumatic experience seemed common or normal (39.29%; for further detail about institutional betrayal frequency, see Table 1). Each of the 14 types of institutional betrayal was endorsed by at least one participant, and participants had the option of selecting multiple types.

To evaluate the unique effects of institutional betrayal trauma, non-study-abroad trauma was entered as a covariate within a univariate GLM. This was done because the majority of respondents who indicated experiencing study-abroad trauma also reported additional trauma experience, which accounted for some of the variance in TSC scores. Across all trauma types, a GLM analysis controlling for traumatic experience outside of study abroad determined the difference in mean trauma outcomes between individuals who reported institutional betrayal ($n = 28$, $M = 20.64$, $SD = 14.57$) and those who did not report institutional betrayal ($n = 51$, $M = 15.12$, $SD = 14.06$). A GLM analysis controlling for lifetime traumatic experience and traumatic experience during study abroad determined that institutional betrayal accounted for some of the variance in TSC scores, $F(1, 77) = 2.00$, $p = .162$, $\eta_p^2 = .026$. In four of six models analyzing the subtypes of study-abroad traumatic events, institutional betrayal accounted for some of the variance in posttraumatic distress, when controlling for additional lifetime trauma (see Table 2).

Table 1. Types of Institutional Betrayal by Frequency of Experience.

Type of institutional betrayal	n	%
Creating an environment in which this experience seemed more likely to occur.	18	54.29
Creating an environment in which this type of experience seemed common or normal.	11	39.29
Not taking proactive steps to prevent this type of experience.	5	17.86
Providing inadequate training and education about how to avoid the experience.	5	17.86
Responding inadequately to the experience, if reported.	4	14.29
Indicating your lack of local cultural knowledge led to the experience.	3	10.71
Making it difficult to report the experience.	3	10.71
Denying your experience in some way.	3	10.71
Suggesting your experience/s might affect the reputation of the institution.	2	7.14
Creating an environment where it was difficult for you to continue your time abroad.	1	3.57
Creating an environment where you no longer felt like a valued member of the institution.	1	3.57
Covering up the experience.	1	3.57
Punishing you in some way for reporting the experience.	1	3.57
Mishandling your case, if disciplinary action was requested.	1	3.57

Note: Percentages are from the total number of participants who endorsed experiencing any form of institutional betrayal ($n = 37$). Participants could endorse multiple items.

Table 2. Institutional Betrayal as a Predictor of Study-Abroad Trauma Distress.

Study-abroad trauma type	df	F	p	η_p^2
Noninterpersonal	8	.12	.74	.015
Noninterpersonal, witness	25	3.91	.06	.140[a]
Interpersonal	52	1.95	.17	.036[b]
Interpersonal, witness	36	3.62	.07	.094[b]
Existential	8	.01	1.00	.001
Existential, witness	17	2.07	.17	.114[b]

[a]η_p^2 = medium effect. [b]η_p^2 = small effect.

Discussion

Whereas previous examinations of traumatic events experienced while studying abroad were limited to female students' exposure to sexual assault (Flack et al., 2014; Kimble et al., 2013), this study documented high rates of male and female students' exposure to a variety of potentially traumatic experiences in the study-abroad setting. Existing literature can be used to approximate a comparable traumatic exposure rate for college students who remained on their home campus. The most direct comparison is Frazier et al.'s (2009) study of traumatic experiences in a sample of college students. That study used the Traumatic Life Events Checklist (Kubany et al., 2000), a scale that measures events similar to those on the LEC–5 that was used in this study. Frazier et al. (2009) found 21% of college students reported experiencing a traumatic event during a 2-month interval during college. Norris (1992) found 27% of young people (of college age, but not necessarily in college) had experienced a traumatic event in the past year, a longer interval than the period most participants in this sample spent abroad. This study's trauma exposure rate (45.44% overall, 36.1% men, 47.4% women) during study abroad suggests students experienced traumatic events at higher rates during study abroad than they would have had they remained on their home campus. Unpacking the subtypes of trauma within the total rate of exposure makes interpretation more difficult. A longitudinal study eliciting responses before and after a study-abroad experience, with matched controls who remained on the home campus during the same interval, would help to illuminate the relative risk of different traumatic events.

Similarly, although the data contained nonsignificant trends in gender differences, overall the results suggest that male and female students are both at relatively high risk of exposure to potentially traumatic events while abroad. Given this finding, future study-abroad research and policy should consider how students' experiences differ based on their identity markers while maintaining awareness of the relatively high risk across all students. Further, although gender nonbinary students made up only a small portion of the sample in this study, potential risks unique to that population should be explored and addressed as well.

These findings are a step toward addressing the dearth of existing literature on study-abroad trauma and the experience of study abroad more generally. Researchers have informally documented the lack of consistency in evaluating students' experiences within study-abroad institutions (McLeod & Wainwright, 2009). Moreover, there is no formal nationwide standard for evaluating study-abroad programs. The 2011 Handbook for Campus Safety and Security Reporting addendum to the 2008 Clery Act (Wesat & Mann, 2011) largely absolves U.S. colleges and universities from reporting student-involved crime that occurs abroad. U.S. colleges or universities "don't have to disclose statistics for crimes that occur in [facilities the U.S. institution does not own or control]" (Wesat & Mann, 2011). In light of the increasing number of students studying abroad during higher education and the growing "gap-year" movement of high school graduates spending a year abroad before college, there is an imperative to increase the amount of public literature about these types of international experiences.

Although not the central focus of this study, risky use of alcohol while studying abroad was noted among nearly 15% of the sample, consistent with emerging literature documenting students' increased use of alcohol and substances in the study-abroad setting. Further, an independent-samples t test revealed that students who reported drinking to the point of impairment were significantly more likely to experience or witness a potentially traumatic event while studying abroad than students who did not report such levels of intoxication, $t(1, 172) = 2.03$, $p = .044$. This suggests substance use might exacerbate risk for traumatic exposure, with opportunities for intervention and education.

This study's findings on perpetration of interpersonal events are most consistent with Kimble et al.'s (2013) study, where perpetrators were most frequently host country residents. However, these results should be interpreted with caution. Although not intended to minimize participant experience of these events as stressful or potentially traumatic, it must be noted that students' ethnicity and gender (the sample was predominantly White and female), culture of origin, and socioeconomic status as U.S. citizens able to travel abroad undoubtedly informed their perception of the events they endorsed. For example, given that the most frequently experienced event was an unwanted or uncomfortable sexual experience, differences in cultural expectations around sexual harassment must be acknowledged. Further, the small sample size precluded analysis of perpetration of the specific interpersonal events. The complexity of interpreting these results underscores the difficult position of students and study-abroad program staff at all levels. Investigations of perpetrator identities might better inform study-abroad programs and students about the source of potential interpersonal trauma, but should be interpreted with careful consideration of context.

It is difficult to generalize beyond this study's demographic information about regional differences in students' experiences of traumatic events because of the small sample size and unequal representation across regions. Such a regional analysis might be helpful in providing specific training based on students' destinations, but this study should not be used as such a tool. Rather, this exploratory analysis begs further research into whether students face different risks based on region of travel. Any such investigations must be accompanied by an awareness of the potential racist interpretations, and region-based risks should be balanced with an understanding of the role of programs' and students' identities and cultural knowledge.

The high prevalence of lifetime trauma experienced by all members of the sample (86.8%) was surprising. Research into lifetime trauma exposure in college-age individuals suggests rates from 66% (Read, Ouimette, White, Colder, & Farrow, 2011) to 84% (Vrana & Lauterbach, 1994). In this sample, lifetime trauma exposure (outside of study abroad) was even more prevalent for the group who experienced study-abroad trauma (98.7% had a history of trauma outside of study abroad). Child sexual assault literature suggests that individuals who are victimized multiple times exhibit more severe posttraumatic distress, suffer greater self-blame, and are more likely to engage in maladaptive or high-risk coping mechanisms such as risky substance use (e.g., Filipas & Ullman, 2006). In comparing students' experiences of traumatic events outside of and during study abroad as a predictor of posttraumatic distress, the group that had experienced traumatic events in both domains displayed the most severe trauma symptomology scores. This group also experienced significantly more instances of trauma, which is consistent with research on cumulative trauma exposure. Martin, Cromer, DePrince, and Freyd (2013) found that exposure to additional traumatic events exacerbated trauma symptomology, with high-betrayal traumas (e.g., emotional, physical, or sexual assault by a close other) having the strongest effect. Study-abroad trauma might have some unique characteristics, but much of the effect of traumatic experiences during studying abroad appears to stem from the accumulation of traumatic experiences.

Of students who indicated a specific institution involved in their experience of institutional betrayal ($n = 40$), the majority (62.5%, $n = 25$) listed their school as the source of betrayal. In some cases, participants specified an abroad or U.S. institution, but most often it was unspecified. This is unsurprising, as most students and parents view their school as a stand-in parent during the study-abroad experience. Given that the measure of institutional betrayal was designed to capture participant perceptions of any institution (or constituent part of an institution) playing a role in their experience of trauma, the list of other institutions included third-party coordinating programs (e.g., American Institute for Foreign Study, etc.), law enforcement, employers, intern site staff, and insurance companies. The most commonly

endorsed form of institutional betrayal was "creating an environment where the traumatic experience seemed more likely to occur." Interpreting participants' understanding of this item is difficult; the institution might have taken specific actions (or inactions) that students perceived as increasing the traumatic event's likelihood, or (when the study-abroad program or school was identified as the institution) participants might have perceived the institution's role in enabling the student to be abroad as playing a role in the traumatic experience. In either case, the students' perceptions affect their posttrauma distress. The second most frequently endorsed institutional betrayal item was "creating an environment in which this type of experience seemed common or normal." It is interesting to note that participants most frequently endorsed actions the institutions could have taken before the traumatic experience occurred. As Smith and Freyd (2013) suggested, the sense that an institution could have done something but did not protect the individual might be even more damaging than actions taken afterward.

Consistent with betrayal trauma theory (Freyd, 1994) and the extension of that theory to include betrayals by institutions (Smith & Freyd, 2013), institutional betrayal did account for a portion of the variance in posttraumatic distress. Among subtypes of study-abroad trauma, institutional betrayal was more likely to predict posttraumatic distress for witnessing items. This might connect to Rausch and Knutson's (1991) finding that participants with histories of childhood abuse were more likely to characterize their siblings' childhood experiences as abusive than to characterize their own in that manner. Rausch and Knutson linked this to the likelihood of participants attributing actions directed toward the self as deserved: It was easier to identify an experience as abusive when one had witnessed it, rather than experienced it. The same might be true for members of an institution. Future research should examine the ability of victims to self-identify as having experienced institutional betrayal versus third-party observers.

Implications

Participant responses to institutional betrayal items must be interpreted with consideration of the complex systemic factors that contribute to institutional lack of preparedness in preventing and responding to potential harms. The current sample of students is commenting on their experiences abroad that occur within the larger context of their university experiences. As much research on campus violence has indicated, there is no simple solution for institutions seeking to improve student safety and maximize learning and growth at home, much less abroad. Yet, institutions must accommodate the present reality of students experiencing a variety of traumatic experiences abroad, from sexual harassment and assault to the sudden death of a family member in the United States. In the case of sexual assault, program staff

might have an opportunity to prevent the experience from happening through student education (e.g., around bystander intervention, substance use precautions, and nuanced cultural understanding).

There is also an obligation to respond in a supportive manner if a student were to experience a potentially traumatic event and thereby avoid institutional betrayal and added harm. The barriers to such a response could include benevolent ignorance, which is more readily addressed by staff orientation to the appropriate trauma-informed responses. Yet unsupportive responses might also arise when institutions or representatives mishandle their authority out of fear of repercussions, as in suggesting the student's experience might affect the reputation of the institution and not disclosing rates of violence or other risks. These types of responses themselves must be treated as counter to the well-being of the institution if they are to be avoided. The continued occurrence of traumatic events should be responded to as a threat to student participation in study abroad, not students reporting these experiences and asking for help.

One step that might bolster all levels of study-abroad program administration would be to transition to a trauma-informed approach. Beyond the potential for harm abroad, those involved in administrating study-abroad programs at all levels should be aware of the likelihood their students have experienced a traumatic event earlier in life. This has implications at various levels of study-abroad programming. First, administrators should prioritize preventing students' exposure to traumatic experiences where possible. Of course, not all events can be foreseen or prevented, but staff can certainly bring expertise in a region or country to bear to provide culturally relevant education to students who might only be beginning to develop awareness of their place in global society. Race, privilege, and entitlement intersect as risk factors for trauma exposure that could vary in the United States versus abroad. Thus, a study-abroad staff that is completely homogenous and similar to students in these regards is likely to provide incomplete preparation for the experience abroad generally, particularly if issues of privilege and prejudice are not part of their expertise. Second, it is important to design programs (including classes and outings) to be trauma-informed, such as avoiding victim-blaming language or assessing continued risk factors such as substance use. This is of particular importance for individuals with a history of exposure to traumatic events, for whom additional trauma would constitute revictimization. Finally, those charged with responding to students who experience trauma while studying abroad should be aware of and prepared to accommodate the variety of traumatic experiences. The rate of traumatic exposure reported by students in this study indicates that this is a necessity, neither an added specialty nor the job of a special staff member.

Although this investigation sheds light on the potential for students' exposure to traumatic events while abroad, it also illuminates the current

state of study-abroad programming. Numerous motivations have driven the proliferation of study-abroad programs. Although genuine desire to expose U.S. students to global cultures remains at the public forefront, a responsible analysis cannot overlook the lucrative nature of study-abroad programming, nor the political nature of sending young U.S. students abroad considering the country's imperialist international approach—especially in developing nations. If anything, this preliminary analysis reveals the complexity of international education and the importance of mindful administration of such programs.

Limitations

As with any measure of self-reported traumatic experience, this analysis had the potential of not detecting experiences the participants did not report—either because they did not want to report, they are not able to fully or properly recall the events, or because they were actually "blind" to the experience having occurred (Freyd & Birrell, 2013). In addition to the typical issues of self-selection bias for Internet self-report surveys, this study faced issues specific to institutional betrayal. Because the Study Abroad Office sent the recruitment message directly to potential participants, it is possible that students who had experienced institutional betrayal were less likely to engage with an institution that betrayed them. Conversely, there might have been students with particularly negative experiences who were eager for an opportunity to hold institutions accountable and to improve the experience of future study-abroad participants. Future studies should aim to recruit a more representative sample. The limitation of our population to students from a single university could have resulted in overrepresentation of a particular experience shared by students at that university. However, the fact that the university is not the only institution potentially perpetrating institutional betrayal curtails the possibility of biases. The analysis would have benefited from detail about institutional representatives, including their identity markers and role within the institution.

Conclusion

In facilitating international education, members of the numerous, layered institutions supporting students abroad must navigate the complex global context of racial, gender, economic, and other inequalities. That environment offers students an invaluable opportunity to learn and grow—but this investigation suggests that students might also face significant challenges while abroad. Institutional betrayal could provide a meaningful framework for understanding students' study-abroad experiences, particularly in analyzing how traumatic events affect students' mental health and well-being. Given

the risk for trauma exposure while abroad, as well other challenges like navigating language, culture, and novel experiences, it is unrealistic to expect that every student have a fully positive "experience of a lifetime." Yet, because institutions play such a central role in students' time abroad, it is vital that they strive to promote students' health and safety while supporting rich and dynamic study abroad experiences.

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