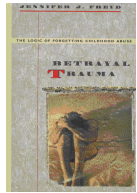


Nowhere to Turn: Institutional Betrayal exacerbates traumatic aftermath of sexual assault

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INTRODUCTION

Research has documented the profound negative impact of betrayal within experiences of interpersonal trauma such as sexual assault (Betrayal Trauma Theory; Freyd, 1994; 1996; 2009, Freyd, DePrince & Gleaves, 2007). Thus far, betrayal has largely been considered in the context of interpersonal relationships such as intimate partnerships or familial relations. However, descriptions of betrayal within a relationship with a trusted or depended upon institution appears often in literature (Freyd, DePrince & Gleaves, 2007). We posit that the harm of sexual assault may be made much worse by institutional failure to prevent sexual assault or respond supportively when it occurs -- what we call "institutional betrayal". In the current study we examined whether involvement of institutions (e.g., universities) in events surrounding experiences of sexual assault may exacerbate trauma symptomology as would be expected within a Betrayal Trauma Theory framework. Our research questions:

1. Will institutions be sources of betrayal in events surrounding sexual assault?
2. Will this institutional betrayal lead to more severe trauma symptoms?

METHODS

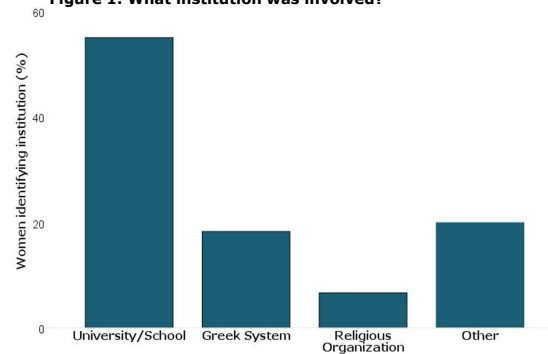
Sample: Using the University of Oregon human subjects pool we collected data from female college students (N=345). Three self-report measures were completed via an online survey:

1. Sexual Experiences Scale (Koss & Oros, 1982)
Sample item: Have you ever had sexual intercourse with a someone when you didn't want to because they used some degree of physical force (twisting your arm, holding you down, etc.)?
2. Institutional Betrayal Questionnaire (author created)
Sample items: Did an institution create an environment where [unwanted sexual] experience seemed more likely?
3. Trauma Symptom Checklist (Briere & Runtz, 1989)
Sample items: Feeling like things are "unreal" (dissociation), feeling tense all the time (anxiety), having bad thoughts or feelings during sex (sexual dysfunction)

RESULTS

Sexual Assault: 68% of the sample reporting experiencing some form of unwanted sexual experience, with many women reporting several experiences (M=3.06, SD=2.17). These experiences of sexual assault varied in coerciveness (e.g., verbal threats, use of alcohol or drugs, or physical force) and were strongly associated with increased trauma symptomology.

Figure 1. What institution was involved?



Institutional Betrayal: Of the women who had experienced sexual assault, 46% also reported experiencing at least one form of institutional betrayal. A university or related institution such as a residence hall was the most frequently identified institution (56%), see **Figure 1 above**.

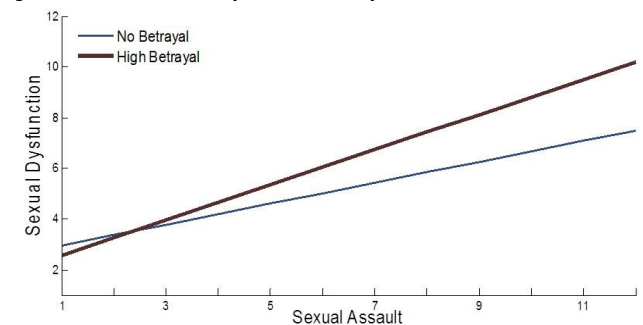
Exacerbated trauma symptoms: Institutional betrayal moderated the relationship between sexual assault and **anxiety, dissociation, sexual dysfunction and sexual abuse trauma index** symptoms (see **Table 1** for the unstandardized regression coefficients of these four models). Women who reported high levels of institutional betrayal (2 or more items on the Institutional Betrayal Questionnaire) had stronger relationships between their experiences of sexual assault and trauma symptoms than did women who had not experienced institutional betrayal (see **Figure 2** for this effect on sexual dysfunction).

Table 1. Exacerbative effects of Institutional Betrayal

	SATI (R ² =.17)	Anxiety (R ² = .10)	Dissociation (R ² =.11)	Sexual Dysfunction (R ² = .12)
Sexual Assault (SA)	.41* (.10)	.32* (.12)	.35* (.10)	.41* (.12)
Institutional Betrayal (IB)	-.46 (.36)	-.37 (.42)	-.22 (.34)	-.29 (.41)
SA x IB	.17* (.07)	.16* (.08)	.10* (.07)	.13* (.08)

Note: All coefficients are unstandardized regression coefficients expressed B (SE)
*p<.05, †p<.10

Figure 2. Institutional Betrayal and Sexual Dysfunction



CONCLUSIONS

Institutional betrayal surrounding experiences of sexual assault is a common occurrence within our sample of university women. This betrayal is associated with increased problems following sexual assault; those women who experienced betrayal by a trusted or important institution see increased difficulties in several post-traumatic areas. This pattern of exacerbated symptoms is consistent with Betrayal Trauma Theory (Freyd, 1994; 1996; 2009, Freyd, DePrince & Gleaves, 2007).

EXTENSIONS

We are in the process of extending this field of research to further understand the impact of institutional betrayal. First, this topic seems particularly relevant to understanding Military Sexual Trauma. Participants with a military history were not well represented in our university sample. Second, the experiences of sexual assault and betrayal are not unique to women. Future studies would target a military population which would naturally include a higher percentage male participants.