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# Betrayal Trauma

JENNIFER M. GÓMEZ

Postdoctoral Fellow, Merrill Palmer Skillman Institute Wayne State University, MI

JENNIFER J. FREYD

Professor, Department of Psychology University of Oregon

People are relationally connected with one another at multiple levels (e.g., within the family, with needed institutions, with other members of minority groups). Abuse that occurs across these relationships that violate the trust implicit in these connections are viewed as betrayals. Various types of betrayal have been examined that can affect victims of abuse. Betrayal trauma theory focuses on abuse perpetrated by close others (Freyd 1996). Family betrayal involves familial dynamics that negatively affect victims (Delker et al. 2018). Institutional betrayal refers to institutions' roles in exacerbating outcomes of abuse (Smith and Freyd 2014). Cultural betrayal trauma theory examines within-group abuse in minority populations (Gómez 2018). In response to such betrayals, there are multiple avenues for intervention and healing.

# Betrayal Trauma Theory

Betrayal trauma theory (Freyd 1996) focuses on the social relationships in which abuse occurs. In the 1990s, accounts emerged of American adults who were sexually abused as children but had incomplete memories of the abuse. This forgetting was perplexing to many as it was in contrast to what was known of the role of memory in learning. For instance, following being attacked by a shark, it is evolutio-

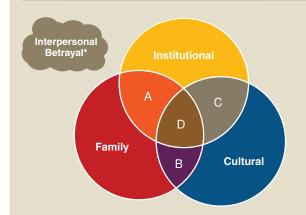
narily advantageous for individuals to remember the event in order to protect themselves from future harm. For victims of incest, however, the evolutionary pressures become more complicated. Being aware of and remembering the abuse likely would be motivation to confront the abuser or remove oneself from the relationship. Yet, these responses are not beneficial for children, as they have no way of providing for themselves. Instead, a child has the need to inspire attachment from the caregiver through approach and engagement, not confrontation or withdrawal, in order to ensure basic survival. Thus, incest and other forms of abuse in the home create a terrible bind for the victim. This interpersonal betrayal violates children's trust in and/or dependence on their caregivers.

Betrayal trauma theory proposes several key ideas. First, pain motivates change in behavior; if pain-motivated changes are too dangerous, individuals suppress the pain. Humans are dependent on caregivers, and detecting betrayal is adaptive and may mean a shift in alliances. Detecting betrayal can be too dangerous, so suppression of natural reactions to betrayal can occur. These information blockages are dissociations between normally integrated aspects of processing and memory (Freyd 1996). Exposure to betrayal trauma (i.e., abuse perpetrated by close others) is linked to many costly outcomes, including dissociation, hallucinations, post-traumatic stress disorder (PTSD), self-harm, and poor physical health (Freyd n.d.).

Additionally, a history of betrayal trauma can affect future relationships. People who have experienced high betrayal trauma in childhood report less trust in others than those who were not victimized (Gobin and Freyd 2014). Moreover, mothers' history of childhood betrayal trauma and adult revictimization is associated with their children's victimization (Hulette, Kaehler, and Freyd 2011). Therefore,

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Figure 1. Trauma in context: Case examples of multiple betrayals



- Institutional & Family Betrayal: A soccer athlete's team organization covers up abuse by a respected coach and the athlete's parents disbelieve their child's disclosure of abuse.
- B Family & Cultural Betrayal: A family member punishes a child for disclosing abuse by a parent to a doctor, as the family are undocumented and fear the consequences of involvement with social services.
- C Cultural & Institutional Betrayal: A teen is abused by a mentor in their religious organization who earned trust based on a shared queer identity; the institution lacks policies/procedures for dealing with the abuse.
- Cultural, Family, and Institutional Betrayal: A teen whose family shares the same ethnic minority identity is abused by a parent. Other family members do not intervene. School follow-up on abuse rumors is minimal due to family's high status in community.

\*Physical, sexual, or emotional abuse by trusted other(s)

Note: For clarity and applicability across contexts, largely left out of this figure are sociodemographic factors (e.g., race, class, etc.). Please use this figure as a starting point for understanding how betrayals can affect diverse individuals.

SOURCE: Courtesy of Brianna C. Delker, Sasha S. Johfre, and Jennifer M. Gómez.

the effects of betrayal trauma can be long lasting and negatively affect individuals' future relationships, as well as their mental, physical, and behavioral health.

# Family Betrayal

In addition to the relationship between the perpetrator and victim, abused children are also affected by larger familial dynamics. A phenomenon called family betrayal, which "encompasses any family actions or inactions that serve as enabling conditions for child abuse or as harmful responses to abuse and its effects," was introduced by Brianna C. Delker and colleagues (2018, 722). Enabling conditions include making abuse seem common or normal, whereas harmful responses to abuse and/or its effects include covering up the experience. Delker and colleagues (2018) found that almost 75 percent of adult victims of child abuse reported at least one form of family betrayal; furthermore, beyond the impact of child abuse and recent exposure to abuse, family betrayal was associated with dissociation and symptoms of PTSD. Thus, in conjunction with child abuse that occurs within the home, family betrayal can negatively affect the healing process.

# Institutional Betrayal

The concept of institutional betrayal refers to actions or inactions occurring within organizations in which appropriate steps are not taken to prevent or address abuse (Smith and Freyd 2014). Whereas institutions themselves do not "act," problematic policies, procedures, and cultural norms created and perpetuated by institutional actors are implicated. Moreover, the harm perpetrated by individual

institutional actors is compounded by their identification with and roles in institutions (Smith and Freyd 2014). For instance, a friend's response to disclosure of abuse that includes victim blaming is harmful. However, a therapist who displays such a response is doing so as a mental health care professional. Thus, implicit in this behavior is institutional betrayal because the therapist is an institutional actor in the mental health care system. Research has shown that institutional betrayal exacerbates mental, physical, and behavioral health outcomes of abuse (Smith and Freyd 2014; Freyd n.d.). Thus, victims of abuse are affected by various institutions, such as the mental health care system, hospitals, police departments, and the judicial system.

# Cultural Betrayal Trauma Theory

Taken together, betrayal trauma theory (Freyd 1996), family betrayal (Delker et al. 2018), and institutional betrayal (Smith and Freyd 2014) incorporate the impact of relational, familial, and institutional contexts in conceptualizing the harms of abuse. Cultural betrayal trauma theory (CBTT; Gómez 2018) details an additional layer. According to CBTT, within-group abuse in minority populations—known as cultural betrayal trauma—violates the needed in-group (intra)cultural trust that serves as a buffer against societal inequality (e.g., increased likelihood of discrimination; Gómez 2018).

Specific to minority populations (Gómez 2018), cultural betrayal can be understood through the lenses of both betrayal trauma theory and institutional betrayal. Just as betrayal is implicit in abuse that occurs in close relationships, cultural betrayal is embedded in within-group abuse in

# INTERPERSONAL, FAMILY, INSTITUTIONAL, AND CULTURAL BETRAYAL

The following vignette of an African American family in the United States describes the complexity of various betrayals related to abuse in the home.

The Jackson family—grandmother, mother, father, and two young children-live together in a segregated community in the Midwest. The stress of the police presence in their neighborhood is compounded by police-perpetrated violence and unjust arrests. At school, the children witness White teachers punishing Black students more regularly and harshly than White students. At home, the father releases his frustration from repeated discrimination at work onto the children through physical and psychological abuse. Wanting to protect the children, the mother and grandmother reach out to trusted others within the Black community, who warn them of the ills that may befall the family and Black people as a group if they disclose the abuse to White people. They agree and never involve outside agencies, such as therapy or police. The omnipresent fear of the father is superseded only by mistrust of systems of the dominant culture. The children are ambivalent about how their Blackness is tied to their abusive experiences both within and outside of the home: They are angry that their father, as a Black man, would abuse them; they also worry that Black people do deserve the discrimination they receive from teachers and police.

#### Within this vignette is:

- 1. *interpersonal betrayal* through abuse perpetrated by the father;
- 2. *family betrayal*, by default, for not engaging with therapy therapists or police because of prejudice and discrimination within these systems;
- 3. *institutional betrayal* through racial discrimination at schools and work;
- 4. *(intra)cultural trust* with other Black people through disclosure of abuse;
- 5. *(intra)cultural pressure* not to disclose the abuse in order to protect the Black community;
- 6. *cultural betrayal* through the perpetrator being Black—a close minority other; and
- 7. internalized prejudice as an outcome of *cultural* betrayal trauma.

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minority populations as a violation of (intra)cultural trust. Similar to institutional betrayal, the perpetrator(s) are more than just an individual, as they are identified with the larger marginalized cultural group. The research on CBTT (Gómez n.d.) suggests that within-group abuse in minority populations has a traumatic dimension of harm—a cultural betrayal—that is linked with such outcomes as dissociation, hallucinations (Gómez 2018), and internalized prejudice.

# Conclusion

Multileveled betrayals implicit during and after abuse affect individuals and families (see Fig. 1). These include interpersonal betrayal (Freyd 1996) from perpetrators that the victim trusts and/or depends on (e.g., incest perpetrated by a caregiver); family betrayal (Delker et al. 2018), such as familial dynamics that facilitate or respond negatively to abuse; institutional betrayal (Smith and Freyd 2014) from institutions, such as those providing mental health care, in exacerbating outcomes of abuse; and cultural betrayal (Gómez 2018), which is

a traumatic dimension of harm in within-group abuse in minority populations stemming from the larger context of societal inequality. Consequently, addressing abuse in families requires engaging with each of these betrayals. For instance, understanding the harm of incest requires attending to:

- 1. the context of the close relationship with the perpetrator;
- 2. familial dynamics that promote abuse and/or punish disclosure;
- 3. institutional actions or inactions, including the absence of trauma-informed, discrimination-free mental health care; and
- 4. minority within-group dynamics related to inequality, including sheltering the perpetrator from accountability in order to protect the entire minority group.

Matched with the potential for betrayal at each of these levels is the possibility of intervention. For instance, providing families with tools for effectively identifying

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and addressing abuse can prevent interpersonal and family betrayal. Moreover, training therapists in the complex interplay of minority status and within-group abuse can prevent institutional betrayal, while mitigating the harm of cultural betrayal for victims. Therefore, although the prospect of multifaceted betrayals can be daunting, the opportunities for post-traumatic growth and healing are present, possible, and powerful.

SEE ALSO Child Abuse and Neglect; Elder Abuse; Intimate Partner Violence; Sexual Abuse; Spousal Abuse/ Domestic Violence; Traumatic Grief; Trust.

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# Biosocial Influences

#### **KAYLEE SEDDIO**

Postdoctoral Fellow, Data Manager, Child Development Lab University of Maryland–College Park

### WENDY MIDDLEMISS

Associate Professor, Department of Educational Psychology University of North Texas

The exploration of biosocial influences provides novel insights into family functioning and intimate relationships.

Researchers make use of a dynamic systems theory framework as a way of understanding biosocial influences related to the family and intimate relationships. This framework takes into account family members' biophysiological responses to stress; their physical, emotional, and epigenetic health; and the biosocial interactions that support responses to broader social contexts. This information can illuminate how individuals' responses then create an ecological system of interaction that influences other family members' responses, as well as influencing the biophysiological well-being of family members including themselves (Booth, McHale, and Landale 2011; Roberts, Booth, and Beach 2016).

# Biosocial Influences and the Stress Response System

Beginning even before birth, mothers' experiences of stress impact developing stress response systems. From that point forward, the experience and alleviation of stress determine the neurological structure of an individual's stress response system (Berry et al. 2016). Stressors activate the sympathetic nervous system—that is, the fight or flight response—by triggering release of the "stress hormone," cortisol, resulting in biological responses that include increased heart rate, constriction of blood vessels, and a suppression of the parasympathetic functions such as rest and digestion. Managing or removing the stressor leads to the release of the hormone oxytocin and a calm state (Bernhard et al. 2018; Winter and Jurek 2019). This tendency for physiological systems to make adjustments to maintain balance across interdependent functions of the body is called *homeostasis*.

Healthy responses to short-term effects of stress-system activation are crucial for individual survival and adaptation. But an individual's biophysiological status can also, more broadly, influence family functioning, because the family is an interdependent system that seeks its own form of homeostasis: a family seeks balance based in positive social outcomes such as its members' capacity for executive function—that is, their ability to control attention and impulses—and in their positive levels of socioemotional and physical health.

Chronic stress, such as anxiety from family conflict or unsafe living environments, leads to deterioration of the physiological function of the stress response system of family members due to continuous fluctuations of stress hormones. Regardless of whether a stressor event is acute (i.e., exposure to stressor once) or chronic (i.e., exposure to stressor over long periods of time), the resulting physiological changes can lead to psychological distress (McEwen 2017). The consequent adaptive responses, as the body strives to maintain homeostasis, can result in overactive stress responses—that is, an individual becomes oversensitive to the possibility of threat—or it can lead to a general dampening of responses