

### How do sexual assault survivors fare?

#### February 1 2018, by Diana Yates

More than 150 girls and women testified in court about how former USA Gymnastics team doctor Larry Nassar sexually abused them. This is just the latest wave of survivors stepping forward to tell their stories, the result of shifting attitudes toward sexual abuse. Whether or not survivors share their stories publicly, they often carry lifelong scars associated with the abuse, says U. of I. kinesiology and community health professor Robyn Gobin, an expert on the long-term mental health consequences of sexual trauma. Gobin spoke to News Bureau life sciences editor Diana Yates about what lies ahead for survivors.

## What common mental health issues may arise as a result of sexual trauma?

Sexual trauma impacts mental health in a variety of ways. There are emotional, physical and mental effects. Most commonly, survivors feel unsafe, nervous, fearful, sad, distrustful of others, lonely, ashamed, guilty, numb and/or embarrassed. In addition to these feelings, survivors often experience physical reactions to trauma. For example, they may have trouble sleeping or experience changes in appetite, a pounding heart, rapid breathing or difficulty concentrating. It is not uncommon for sexual trauma survivors to have repeated memories or nightmares about the experience. Sexual trauma can also negatively impact a survivor's self-image, resulting in feelings of hopelessness and thoughts that they are somehow responsible for the traumatic event. The most common mental condition after trauma is post-traumatic stress disorder.

Depression, anxiety and substance use issues are also common.



## Can disclosing that you have been abused help or hinder your recovery?

From years of research, we know that the impact of disclosure on recovery is largely dependent on how a person or institution responds to the <u>sexual assault</u> disclosure. When a sexual assault survivor's disclosure is met with disbelief, blaming or attacking, it can exacerbate the survivor's <u>mental health issues</u>. On the other hand, when sexual assault survivors receive respectful and supportive responses to disclosure, this can facilitate the healing process. My colleague and mentor, Jennifer J. Freyd, has compiled a <u>list of research-supported tips</u> for how to be a good listener.

# What role does the experience of having been betrayed play in understanding and recovering from sexual trauma?

Betrayal shatters some pretty basic assumptions that we have about relationships. We assume that people we know, love and trust will not harm us and will look out for our best interests. When this trust is broken, it causes survivors to question their sense of safety in the world, and it makes it difficult for them to trust others moving forward. It is difficult to process why someone we know and love could harm us.

Moreover, when the survivor depends on the perpetrator of the sexual assault – for example, financially – it can be extremely challenging to know how to respond. Worse mental health outcomes have been found among trauma survivors who were harmed by someone they knew, loved, trusted or depended on, compared with those harmed by a stranger or who experience noninterpersonal traumas – for example, as a result of a natural disaster or a car accident. Recovery from traumas that contain an element of betrayal is possible. Healing occurs best in the



context of a supportive, therapeutic relationship.

# How can societal responses to the issue of sexual harassment and assault influence one's ability to recover and heal?

The societal climate around issues of sexual harassment and assault can impact a survivor's likelihood of disclosing sexual assault. For example, if the trend in media coverage on sexual assault cases is that survivors are not believed or are blamed for the sexual assault, a sexual assault survivor might be less likely to disclose their trauma. Disclosure is extremely important because it opens the pathway to therapy and healing. Social movements like #MeToo can be very empowering to survivors, helping them feel less alone in their survivorship. These types of social media campaigns can also cause distress among survivors who have not yet addressed their own sexual trauma in therapy.

## Do race, gender or sexual orientation influence societal responses to survivors of sexual abuse?

In American culture, we have certain prototypes for a sexual assault survivor. If someone does not fit into this preconceived notion based on their race, gender or sexual orientation, that survivor is vulnerable to speculation, attacks, disbelief and blame for the sexual assault. For example, the myth of Jezebel carries with it the idea that African-American women are sexually promiscuous. Thus, in the aftermath of sexual assault, a black woman may face scrutiny for her behavior prior to the assault.

Regarding gender, it is often assumed that only women experience sexual assault. American gender-role socialization might make it less likely for us to believe that a man can be a victim of sexual assault.



Finally, myths that LGBTQIA individuals are promiscuous or obsessed with sex may make it challenging for those survivors to be believed. The bottom line is that no group is immune to sexual assault, and oftentimes members of minority groups are more vulnerable to sexual assault. As a society, for healing to occur, we have to move toward supporting sexual assault survivors, no matter their cultural background or past behavior, rather than questioning them if they do not fit into our fixed notions of who sexual assault survivors are.

## What advice would you offer someone who has suffered sexual trauma?

I would encourage you to find a therapist. The symptoms you are experiencing are normal after a sexual assault. It is possible for you to live a meaningful life that is not dictated and dominated by your sexual assault. There are research-supported therapies that can help you. There is no shame in seeking support from a mental health professional. Some problems are not meant to be solved alone.

#### Provided by University of Illinois at Urbana-Champaign

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