

2022

The Experiences of Female Survivors of Sexual Assault When They Make a Police Report

Tracy L. Rainey
Walden University

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Walden University

College of Psychology and Community Services

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Tracy L. Rainey

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Walden University
2022

Abstract

The Experiences of Female Survivors of Sexual Assault When

They Make a Police Report

by

Tracy L. Rainey

MA, Spring Arbor University, 2015

BS, Evangel University, 2013

Dissertation Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Philosophy

Forensic Psychology

Walden University

November 2022

Abstract

Nearly 20% of all women will be the victim of an attempted or completed sexual assault within the United States, yet less than one quarter of victims will report their experienced crime to law enforcement (LE). Many survivors of sexual violence experience apprehension about reporting sexual assault, due to fear of social consequences, relational consequences, and fear of the reprisal from LE officers. The purpose of this interpretive descriptive qualitative study was to describe and interpret the experiences of adult, female sexual assault survivors when they make a LE report about their victimization. Resilience theory, which is the study of how individuals survive and thrive after a trauma, was the theoretical framework for this study. Nine female sexual assault survivors who reported their sexual assault at least 3 years ago were interviewed. The data collected were hand-coded and analyzed using thematic analysis. The results of the study were that each participant experienced resilience but reported negative experiences. Participants believed that the environment where they were interviewed in, the method of interview the LE officers used, as well as the demeanor of the LE officer mattered in their experience. The findings indicated that more training and experience was needed by responding LE. Understanding resilience in reporting survivors of sexual violence can create meaningful positive social change because when more is known about how resilience occurs in reporting sexual assault survivors, LE agencies, mental health therapists, and other public social agencies can create protocols and services that further promote resilience in survivors of sexual assault. Further, reporting experiences can be improved, which in turn could increase sexual assault survivor reporting.

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Dedication

I would like to dedicate this study in memory of my mom, Sharon K. Grames. Mom, our journey together of surviving violence inspired me to work on behalf of survivors and have the amazing career that I have had. Although you did not get to see me complete this journey, I know you are watching over me and proud of my work and who I have become. I will continue to work for others who are still looking for safety and healing.

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And lastly, to the survivors that I have learned from, cried with, and been inspired by throughout the past 25 years. Your courage and ability to survive unspeakable acts and move forward has always been a personal inspiration.

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Chapter 1: Introduction to the Study

Introduction

Sexual assault impacts one in five women in the United States, but only about 23% of all sexual assaults are reported to law enforcement (RAINN, 2020). This makes sexual assault one of the most under-reported violent crimes that occurs in U.S. culture. Additionally, most female sexual assault survivors experience on-going trauma-related problems that affect their physical health, relationships, mental health, and overall well-being for years after an assault (Sigurdardottir & Halldorsdottir, 2021). Sexual violence is an endemic social problem that impacts cultural health, safety, and wellness. Resilience, which is the ability to maintain or return to good psychological functioning after a traumatic event (Bonnano, 2008), has been studied in many populations. However, the research about resilience in sexual assault survivors is sparse. The current literature available demonstrates that resilience in sexual assault survivors is often mediated by the perception of social support, or lack thereof, and adaptive coping skills, such as relational connection to others, the ability to create safety for self and directly processing the sexual assault (Hirai et al., 2020). Connections between the experience in reporting sexual assault and sexual assault resilience have only minimally been explored. Understanding the experience of reporting sexual assault and resilience in survivors can create social change in our culture, as law enforcement officers and other helping professionals can develop more insight and respond to survivors in a more helpful manner. In this chapter, background information is presented about the sexual violence within the United States, law enforcement approaches to investigating sexual violence, and how reporting

procedures impact survivors of sexual violence. Additionally, resiliency theory (RT) will be introduced as the theoretical framework for the analysis phase of this study. The purpose of the study, problem statement, research question, and scope and limits of this study will be established.

Background

Youstin and Siddique (2019) conducted a quantitative study with data from the 2015 National Crime Victimization Survey and identified that survivors of sexual assault experience psychological distress at 5.88 times the rate of other crime victims and report experiencing the distress for longer than other crime victims. Sexual violence is a traumatic experience that can cause years of legal, social, emotional, and psychological injury to survivors, and the reporting experience can mitigate harm or contribute to harm the survivor experiences.

Despite the trauma associated with being sexually assaulted, this is an under-reported crime (RAINN.org, 2020). More than 730,000 individuals were sexually assaulted in 2018, yet only about 23% of the survivors reported their crime to law enforcement (Morgan & Oudekerk, 2019). One reason for low rates of reporting is believed to be the interactions with or expected interactions survivors will face with law enforcement during the reporting process. Dworkin and Schumacher (2016) conducted a systematic review of qualitative and quantitative research and found that poor interactions with law enforcement led to increase levels of posttraumatic stress in sexual assault survivors in many studies. Lorenz et al. (2019) conducted a qualitative study where survivors of sexual assault expressed experiencing substantial distress about how

law enforcement will respond to them during the reporting process. Rape crisis advocates, who often respond alongside law enforcement, report they often witness poor treatment of sexual assault survivors by law enforcement, and that rape myth adherence by officers impedes respectful and supportive actions toward survivors (Long, 2018). Law enforcement officers also recognize that they lack the training and skills needed to adequately support sexual assault survivors during the reporting process (Spencer et al., 2018).

Greeson et al. (2015) conducted study of adolescent sexual assault survivors who reported that whether they were believed and supported or disbelieved and blamed by law enforcement officers impacted their emotional well-being in the aftermath of an assault. Other researchers have found that the reporting process matters in a survivor's ability to recover or experience resilience as well. In a qualitative study conducted in Canada, researchers identified three themes in interviews with sexual assault survivors who had negative reporting experiences: loss of faith in the system/world, loss of self-worth, and negative health and social consequences (McQueen et al., 2021). The reporting process and outcome had a significant impact on the participants well-being (McQueen et al., 2021).

Most survivors of sexual violence will experience some resilience after their assault (Hirai et al., 2020). Resilience is the ability to maintain or get back to a healthy level of functioning after a traumatic experience (Bonnano, 2008). Resilience Theory (RT) has been used in the study of populations who experience trauma, including interpersonal trauma (Jose & Novaco, 2016), but the research on resilience and sexual

violence is limited. For example, Brosi et al. (2020) found that social support from family, friends, and community help with resilience in domestic violence survivors. Likewise, Sukadbi (2016) conducted a qualitative study and found that bomb survivors who were supported by police (community support) through thorough investigations, attention to the survivors' physical and mental health needs, and ongoing empowering communication positively impacted survivor resilience. The current literature supports RT as an appropriate lens to examine the health and well-being of reporting sexual assault survivors, as it has been used in learning about other types of interpersonal trauma survivors. This study is needed because it will help fill the significant gap in literature in describing and interpreting the experiences of reporting sexual assault survivors and resilience.

Problem Statement

The problem I am addressing in this dissertation is that little is known about sexual assault reporting and how survivors of sexual assault make meaning of their reporting experience. Resilience, or the ability to maintain psychologically healthy functioning after experiencing a traumatic event (Bonnano, 2008), in survivors of sexual violence, may be mediated by the interactions with and reactions of formal (law enforcement, medical professionals, etc.; Dworkin & Schumacher, 2015; Fornari & Labronici, 2018) or informal supports (peers, friends, family, etc.; Lorenz et al., 2019). Resilience is often the mediating element between those who develop posttraumatic stress and those who develop posttraumatic growth for crime victims (Lee et al., 2020). In traumatized youth, social support seeking, strongly connected relationships, and

meaning making of the trauma are some protective factors that ameliorate trauma symptoms and enhance resilience (Hamby et al., 2020). In adult populations, social supports, social skills, and the ability to prioritize and plan after a traumatic event are protective factors that may increase one's ability to experience resilience (Ponce-Garcia et al., 2015).

One barrier that sexual assault survivors face is rape myth adherence, which is defined as when individuals or institutions respond to sexual assault survivors with fixed beliefs about what constitutes sexual assault, or how sexual assault survivors should behave or react creating shame or guilt in survivors (Spencer et al., 2018). Resilience from sexual violence is often impacted by survivors' initial perception of care and support from responders (Fornari & Labronici, 2018).

When women are sexually assaulted, they often go through a complex decision-making process to decide whether they want to make a formal report to law enforcement (Kahn et al., 2018). Kahn et al. identified that those who experienced sexual assault often report law enforcement was unhelpful to them, and the process was stressful. Similarly, Lorenz et al. (2019) found that most sexual assault survivors recall their reporting experience as negative and re-traumatizing. Kahn et al. and Lorenz et al. recommend further research to understand the experiences of sexual assault reporters to identify specific attributes of a negative experience.

Reporting experiences with law enforcement can have a negative or positive impact on sexual assault survivors' resilience (Fornari & Labronici, 2018). Resilience is the ability to endure and recover, and this is often affected by social resources available

to the survivor, such as law enforcement/legal support (Grych et al., 2015). Dworkin and Schumacher (2016) found that survivors who described negative reporting experiences had higher incidence of posttraumatic stress disorder. Similarly, Greeson et al. (2015), focusing on the adolescent sexual assault survivor population, identified that positive experiences (being believed, treated respectfully) and negative experiences (not being believed or being blamed for the assault) with law enforcement affected emotional and psychological functioning. Researchers behind these studies recommend further research to understand more specifically how law enforcement responders helped or hindered psychological outcomes for sexual assault survivors (Dworkin & Schumacher, 2016; Greeson et al., 2015). Not only is there a lack of clarity on what factors were considered positive for reporting survivors within the reporting process, but it is unclear how law enforcement interviewing strategies can enhance survivor resilience (Dworkin & Schumacher, 2016; Greeson et al., 2015; Grych et al., 2015). The field of forensic psychology, which often focuses on victimology, would greatly benefit from understanding more about the female, sexual assault survivors experience of reporting.

Purpose of the Study

The purpose of this qualitative study was to describe and interpret the experiences of adult, female sexual assault survivors who reported their victimization to law enforcement. I am most interested in understanding the resilience of those women who reported their sexual assault. In this study, I used an interpretive descriptive design, with Clark and Braun's (2017) thematic analysis as a methodology. Sexual assault impacts the physical and psychological well-being of women (Hirai et al., 2021). Law enforcement

officers are not well-prepared to meet the psychological needs of sexual assault survivors (Spencer et al., 2018). There is a need for increased understanding of sexual assault survivors' experiences with law enforcement and with developing resilience (Fornari & Labronici, 2018). Understanding more about the experiences of sexual assault survivors who have reported to law enforcement could produce clarity on the specific needs of survivors during the reporting process. The central concept of this study was the reporting experience of sexual assault survivors.

Research Question

RQ1: How do adult female sexual assault survivors make sense of their law enforcement reporting experiences?

Theoretical Framework for the Study

The theoretical framework that was used in this study is RT. According to Bonnano (2008), resilience is the ability to experience a trauma and “maintain relatively stable, healthy levels of psychological and physical functioning” (p. 102). While there are few studies that connect resilience and sexual assault victimization, resilience theories have been used to study populations who have experienced trauma or criminal victimization. Kassis et al. (2018) used resilience as a lens to evaluate middle-school students who experienced physical abuse or witnessed violence in their homes and found that resilience was often connected to personal protective factors (optimism, self-regulation) and positive interactions with others (teachers, parents). Likewise, Curran et al. (2019) used the concept of resilience to identify both personal factors and community factors that increased the likelihood of resilience in teachers who had been victimized by

students. There are both personal factors and community factors that often impact one's experience of resilience after trauma (Bonnano, 2005; Grych et al., 2015). Resilience also is impacted by the level of social supports one has after victimization (Munoz et al., 2017). Interactions with law enforcement while survivors are reporting their victimization is one type of social support that may influence resilience (Jose & Novaco, 2016). RT was used as the lens to understand the reporting experience and resilience in sexual assault survivors, as RT has been applied to understanding post-trauma resilience in sexual assault survivors and other survivors of victimization.

Nature of the Study

This study was conducted using an interpretive descriptive qualitative design. In interpretive descriptive qualitative studies, the researcher seeks to comprehend the perspective of the research participant and described how the participant made meaning of the experience (Merriam, 2002). The interpretive descriptive approach was created by Sally Thorne for use in health and medical research (Thorne, 2016). The interpretive descriptive approach allows the well-informed practitioner-researcher to ask questions about the human experience of illness and injury and apply this knowledge to create more informed and accurate interventions (Thorne, 2016).

Upon collecting qualitative data through interviews, I used Braun and Clark's (2017) thematic analysis to identify patterns or themes in the data. Thematic analysis is a universally used method to analyze qualitative data, wherein codes are generated to capture critical themes that emerge from the analysis of the participants' interviews (Clarke & Braun, 2017). The goal of both the qualitative interpretive descriptive design

and thematic analysis is to not only report the experience of the research participants, but to identify key features within the data the participants provide, understand how the participants have made meaning of their experiences, and recognize if there are shared meaning-making experiences (Clarke & Braun, 2017). Qualitative approaches and methodologies have been useful in understanding social phenomena like the experience of sexual assault and meaning-making that occurs with sexual assault survivors and allows for the reflexivity of the researcher within the data collection and analysis stages (Hoover & Morrow, 2015).

The central phenomenon that was studied were the experiences of reporting sexual assault survivors. The goal was to describe and interpret their experiences of reporting and identify how survivors of sexual assault make sense of the reporting experience. This central phenomenon was examined through the lens RT.

Definitions

Rape myth adherence: When individuals or institutions respond to sexual assault survivors with fixed beliefs about what constitutes sexual assault, or how sexual assault survivors should behave or react creating shame or guilt in survivors (Spencer et al., 2018).

Rape myth culture: A culture that minimizes the harm caused by sexual violence and is based on false, stereotypical, or prejudicial assumptions about sexual assault survivors (Giraldi & Monk-Turner, 2017).

Reporting survivors: For the purpose of this study, reporting survivors are survivors of sexual assault that report their experience to a law enforcement agency for the purpose of prosecution of the crime committed against them.

Resilience: The occurrence of maintaining or returning to good psychological and physical well-being after experiencing a traumatic event (Bonnano, 2008).

Resilience theory: The study of how traumatic experiences impact individuals and mediating factors and processes (social, spiritual, ecological, psychological, and physical) that increase the likelihood that individuals will return to healthy functioning after adverse or traumatic experiences (Van Breda, 2018).

Sexual assault: The act of forcible or coerced sexual touching or penetration or the attempt of forcible or coerced touching or penetration (RAINN, 2020).

Survivor: A person who has survived a sexual assault.

Trauma: An experience that overwhelms the psychological and emotional functioning of an individual due to threatened or actual harm wherein the individual believes they may die or be seriously injured (Valent, 2012). Additionally, the American Psychiatric Association's (2013) *Diagnostic and Statistical Manual of Mental Disorders* (5th ed.; DSM-5) identifies the experience of sexual violence as a traumatic event. Trauma is an extreme level of stress that overloads the individual's brain and causes impairment to memory, thought processes, and emotional coping, which can sometimes lead to long-term impairments (Valent, 2012).

Assumptions

There are several assumptions that I initiated this study with. One key assumption is that sexual violence is a harmful, disruptive, and often impairing trauma that negatively impacts survivors. The next assumption about sexual violence is that it cannot be inspired or caused by the survivor and the responsibility for the sexual assault is on the offender. Additionally, survivors are capable of resilience, given the provision of proper supports through systems, agencies, friends, and families. As this study examined law enforcement actions, there was also an assumption that law enforcement officers, who are often called to take reports from survivors of sexual violence, want to support and protect survivors, but have not been afforded the proper training, guidance, or mentorship within their police agency. The failure of proper law enforcement interventions are often part of systemic rape myth adherence and not purposeful, intentional actions. While these assumptions may not be true about individual sexual assault survivors or individual law enforcement officers, as populations these assumptions are the foundational beliefs by which this study was conducted, and the goal was to accurately study and understand sexual violence reporting within the United States and how survivors make sense of their reporting experiences. In current and relevant research related to sexual assault experiences and reporting, these assumptions are important foundational beliefs to hold when studying this population.

In addition to assumptions regarding sexual violence, survivors, and law enforcement officers, there were several assumptions about conducting a qualitative study with participants who have experienced both reporting and sexual violence. I

assumed that the interview participants will be open and honest about their experiences. However, I acknowledge the possibility that individual perceptions about past experiences were influenced by time, the experience of trauma, and other life factors. Those who self-select to be included in the study may have experienced more resilience than others and may find themselves more interested in sharing their experiences in a study. Conversely, some participants may have felt particularly neglected or treated poorly by law enforcement who responded to their report of sexual assault and that has inspired them to participate in the study. I conducted this study with the assumption that each participant represented their experience, as they recalled it, and did so earnestly, but it represented only their individual experience.

Scope and Delimitations

I sought to describe and understand the experiences of reporting sexual assault survivors. The focus of this study was sexual violence in the United States, how law enforcement officers conducted interviews and investigations with reporting sexual assault survivors, and the experience of resilience for reporting survivors. Additionally, I hoped to identify what aspects of reporting experiences were helpful long-term to the sexual assault survivor as a way to identify helpful reporting practices versus reporting practices that were not helpful to the sexual assault survivor.

There were several boundaries established with this study. First, only adult, female, reporting sexual assault survivors were included in this study. Furthermore, reporting survivors who were not experiencing any impairing mental health symptoms related to their sexual assault (PTSD symptomology, impairing anxiety, etc.), were

included. Only reporting survivors who experienced sexual assault more than 1 year before the interview were included in the study. Male survivors and female survivors younger than 18 years old were excluded from the study. In addition, only survivors of contact sexual offences were included, and those who were subjected to non-contact sexual offences (e.g. revenge pornography) were excluded, as well as those who chose to not to report their sexual assault to law enforcement. These boundaries created a participant pool with some homogeneity. The transferability of this study is possible to other homogenous groups of reporting sexual assault survivors.

Limitations

This study was conducted as an interpretive study with the goal of further understanding resilience in reporting sexual assault survivors. Due to the traumatic nature of sexual assault, I took great care in screening potential participants for any active mental health impairment that could make interviewing triggering of previous traumatic responses the participant may have experienced. The study sample may have involved a self-selection bias towards survivors who may exhibit more resilience than other survivors. Resilience is an individual experience and survivors of sexual assault experience differing levels of resilience likely based on other factors in their lives. Those who have experienced more resilience may be more likely to engage in a study such as this.

Another limitation within this study was the lack of clarity of the definition of resilience and the participants' perception of resilience. While resilience has been highly researched as a psychological phenomenon, there is a lack of parity between researchers

about how to define resilience. Additionally, research on sexual violence survivorship and resilience is quite limited. The participants in the study may have had a varying understanding about what resilience is and what factors contributed to their resilience after surviving sexual violence.

There was a risk of bias in the study of such a traumatic, confounding social phenomenon, such as sexual violence. I have 25 years' experience in working with sexual assault survivors as a crisis advocate and therapist. There is a risk that I viewed the data provided by the participants with bias due to my previous experiences. In order to protect from bias, I recorded participant interviews and took great care into letting the data speak for itself with the use of thematic analysis. Additionally, I did not attempt to influence the participants in their responses and asked non-leading questions.

Transferability is defined as how accurately and specifically the results of a qualitative study can be applied to other participants or contexts (Korstjens & Moser, 2018). Transferability of this study was enhanced by interviewing only female, adult sexual assault survivors who reported their assault experience and providing thick and rich detail through interview questions. This detail will aid other researchers in identifying similar pools of participants for future study, therefore enhancing transferability of the research outcomes of this study.

Significance

The significance of this study is that it addresses a gap in the literature about the reporting experiences of sexual assault survivors. More specifically, researchers have expressed that further research should focus on what specific perceptions of sexual

assault survivors have left them with negative experiences (Henninger et al., 2019; James & Lee, 2015) that have been identified as negatively impacting resilience (Fornari & Labronici, 2018). Negative support experiences, such as poor interactions with first responders like law enforcement officers, can impede resilience in survivors of sexual assault (Fornari & Labronici, 2018). Additionally, there is a gap in the literature regarding the specific report-taking practices and approach that yield better survivor experiences (Long, 2018; Spencer et al., 2018). Acquiring an understanding of these specific factors could lead to improved relationships between sexual assault survivors and law enforcement, improved report-taking practices being taught to law enforcement officers, and potentially improved survivors' experience and resilience after sexual violence. Additionally, improving the law enforcement response to survivors could create positive social change as the public, which includes future sexual assault survivors, may have less apprehension about making reports to the police, therefore improving reporting rates of sexual assault and potentially improve the level of resilience.

Summary

Sexual violence within the United States is an endemic issue that impacts hundreds of thousands of individuals and yet remains grossly under-reported. The under-reporting, in part, may be due to lack of trained law enforcement officers who often are the first responders the sexual assault survivor will meet. Adverse experiences with law enforcement can negatively impact survivors and their resilience. In this chapter, I provided reference to some of the current literature about sexual violence, the role of law enforcement, and RT as applied to sexual assault survivors.

As presented in this chapter, the purpose of this qualitative study was to understand and interpret the experiences of adult, female sexual assault survivors who reported their victimization to law enforcement. The experiences of the participants were examined through the lens of RT, and the approach was an interpretive qualitative inquiry. While some limitations were identified, the purposive sample of participants were kept homogenous to the degree possible. There is a significant gap in the literature in examining resilience in reporting sexual assault survivors. There is potential for positive social change from this study as the information used could be applied to law enforcement officers and their training regimen and protocols to improve or positively benefit future sexual assault survivors they may encounter. Additionally, learning about sexual assault survivors' experience with resilience could help other professionals, such as therapists, community members, and the medical community, understand how to positively affect sexual assault survivors' resilience.

Chapter 2 of this study will provide an exhaustive literature review of the theoretical framework used in this study, which is the RT. Additionally, a review of current research about sexual violence within the United States, law enforcement interviewing, resilience, and sexual assault survivorship is presented. Finally, the rest of the study will demonstrate how participants were chosen, methods of collecting data that were used with the participants, and what was learned from their disclosures about resilience.

Chapter 2: Literature Review

Introduction

Sexual assault in the United States has reached pandemic levels. Nearly one in five women will be the victim of assault (RAINN.org, 2020). In only about 20% of cases, sexual assault survivors are compelled to report their crimes but often experience victim-blaming, a lack of compassion, and a lack of action in their cases, by the only system that can help their pursuit of protection and justice (Henninger et al., 2019). The purpose of this qualitative study was to describe and interpret the experiences of adult, female sexual assault survivors who reported their victimization to law enforcement.

When a woman is sexually assaulted, there is a myriad of questions that she will face, including whether she will be met with blame, will she be taken seriously, and what possible adverse consequences she will face if she chooses to report her victimization (Henninger et al., 2019). Law enforcement is poorly trained to handle sexual assault cases, as they are not often trained on trauma and victimization, the causes of sexual assault, the actual impact of sexual violence, rape myths, how to take reports, collect evidence, or interview victims of sexual violence (Venema et al., 2019). Failure to experience resilience after sexual violence can include long-term mental health, relational, and social adversities (Fornari& Labronici, 2018). Understanding resilience in reporting sexual assault survivors may begin to pave the way for an improved response.

In this chapter, the literature search strategies I used, as well as an in-depth consideration of the history and application of RT, will be provided. Many variables regarding reporting sexual assault will be reviewed, examining the current literature.

These variables include sexual assault in the United States, sexual assault victimization, rape myth culture, and law enforcement report taking of sexual assault complaints.

Literature Search Strategy

A literature search was conducted to identify seminal works on resilience and trauma. Additionally, literature searches were conducted to identify current studies about resilience, RT, sexual violence, reporting sexual violence to law enforcement, and resilience in victims of crime. Search parameters for studies were those conducted within the last 5 years and were peer-reviewed. The Walden University Library was used for the literature search that includes PsycINFO, SocIndex, Sage, ProQuest, and Taylor & Frances databases. Additionally, Google Scholar was used in the literature search. The keywords used to locate peer-reviewed journal articles and seminal works were:

resilience; resilience theory; trauma; sexual violence; sexual assault; victimization; reporting sexual violence and victims; resilience and victims of crime; resilience and sexual assault; law enforcement and sexual assault; and resilience and violence. There was limited research on resilience and sexual violence, so varying combinations of resilience and crime victims and victimization produced some results that were helpful to my study.

Theoretical Foundation

The theoretical lens this study was examined through is RT. Humans have always pondered how one experiences tragedy or trauma and how one not only survives but thrives despite the trauma. This is the study of resilience. While the definition of resilience varies by theorist, in general, resilience is the ability to experience “better than

expected” outcomes after experiencing adversity or trauma (Ungar, 2013). Resilience is not just getting back to normal functioning, but rather thriving in the face of adversity (Bonnano, 2008). As the definition of resilience has evolved, so too has RT. RT theorists surmised that depending on the adversity experienced, there are risk factors and protective factors that make it more or less likely that one will have resilience (Werner, 1989). Further development of RT not only has more clearly identified risk and protective factors but has identified both internal and external factors that impact resilience. RT has evolved through the years and has garnered the attention of many researchers as the quest for understanding how to help people live well, even after adversity strikes. Three prominent theorists were significant in the development of RT and their work will be reviewed.

There have been several resilience theorists that have contributed to RT, and each have their own conceptualization of resilience based on their individual research. Garmezy, widely considered to be the first formal researcher and theorist on resilience, initially studied children who had mentally ill mothers to understand how the children dealt with adversity (VicHealth, 2015). Garmezy (1987) constructed the theory that there were certain vulnerabilities that determined whether his subjects would be so adversely affected by their mother’s mental illness, that they would likely succumb to the adversity and not be well or productive. Conversely, he knew that other children would thrive, despite the mother having a mental illness and these factors were identified as “protective” (Garmezy, 1987). Protective factors emerged in his study, such as certain personality characteristics, healthy relationships with parents, and external sources of

support (community, school, etc.; Garmezy, 1987). While Garmezy first established seeing resilience through risk and protective factors, other theorists further developed our understanding of resilience and RT.

Emily Werner and Michael Ungar are two resilience theorists who further developed our understanding of resilience and what factors influence resilience in trauma or adversity survivors. Werner conducted longitudinal studies with 698 children that were deemed to have experienced adversity or trauma, such as poverty, divorce, and abuse (VicHealth, 2015). Werner (1989) found in follow-up studies with the original participants, resilience develops most frequently within an ecological constellation of certain personality characteristics, supportive relationships with primary family, and community or environmental support were available. Werner continued to study her participants with follow-up studies well into adulthood. This was one of the first longitudinal studies on resilience (VicHealth, 2015). Ungar (2013) added to the establishment and understanding of RT by finding, in his international studies with children and young adults, that personality characteristics and primary relationships can be protective factors that increase resilience after trauma, but social-ecological influences, such as cultural connection, identification, and acceptance highly impact resilience. This was the first time that RT was clearly identified as more than personal ability or a psychological construct (VicHealth, 2015). Ungar contributed to the understanding that resilience is greatly impacted by community and culture. Both Werner and Ungar expanded the collective understanding of resilience, taking it from a personality construct to a psycho-social, ecological, and cultural product.

The Schemas of Resilience Theory (RT)

As a result of RT being an accumulation of work by dozens of researchers versus a theory established by one theorist, several distinct schemas have emerged as theoretical propositions within RT. RT is a contextual theory and can only be defined according to context (type of population, type of adversity) in which it is being applied (Ungar, 2019). These schemas are represented by the following categories: risk factors and protective factors, internal factors, and external factors.

Most of the literature about resilience focuses on some aspect of the aforementioned categories. It is important to note that most literature I reviewed, especially seminal writings about resilience, focus on resilience in children. I surmise this is likely because resilience was originally thought to be a personality characteristic and most personality characteristics are developed during childhood (Garmezy, 1987). Garmezy (1987) theorized that resilience was a psychological trait (internal), while researchers after Garmezy identified external factors that influence resilience. As the theory of resilience has become more inclusive of external factors like connection to community (Werner, 1989) and cultural contexts (Ungar, 2013), current research reflects resilience of young adults, adults, and the elderly who have experienced various adversities and/or traumas. Due to the limited nature of research specific to sexual assault, sexual assault reporting, and resilience, studies reflective of interpersonal violence (most including sexual violence), and resilience are used in this study. RT has been used to understand adversity and trauma in many different populations. From Werner's (1989) study of children in Kauai, Hawaii, to holocaust survivors (Kidron

et al., 2019), to disadvantaged inner city youth (Ungar, 2013), to 9/11 survivors (Ryan et al., 2017), resilience is an appropriate lens to evaluate adversity and how it impacts individuals. Sociologists, psychologists, first responders, therapists, and others seek to understand risk and protective factors of survivors of adversity in order to support resilience in those they meet.

Risk and Protective Factors

RT is often centered on the belief there are risk factors and protective factors that help or hinder the ability of one to experience adversity or trauma and achieve some level of resilience (van Brada, 2018). When studying resilience, risk factors are those factors that jeopardize the ability of a trauma or adversity survivor (Werner, 1989). Protective factors that improve the likelihood that one will be ‘protected’ from negative impact of the adversity experienced, with respect to the contextual factors the individual or population has experienced (Ungar, 2013).

Risk factors that potentially impede resilience are present within any type of traumatic experience (Overstreet et al., 2017). Overstreet et al. (2017) found that being female, having a childhood history of prior trauma(s), and enacting deviant behaviors throughout adolescence were identified risk factors for sexual assault and impaired ability to achieve resilience in a sample of over 6,000 college freshmen. Within this study, already experienced interpersonal violence, such as sexual violence, was identified in nearly 40% of the respondents. Conversely, social support and healthy family relationships indicate an increased capacity for resilience in the study participants. While this study included experiences of other potentially traumatic events, interpersonal

violence was highly represented within the study. Similar outcomes for sexual assault survivors have been noted in other studies.

Contextually speaking, risk and protective factors are present for female sexual assault victims and other survivors of interpersonal violence. Childhood poly-victimization and justice involvement are identified risks that impair resilience in female, adolescent sexual assault survivors (Kerig, 2018). Black women experience high levels of both gender and racial discrimination, and these are identified as risk factors for the development of resilience; however, in this same population, having a more robust social support system is identified as a protective factor (Cataby et al., 2019).

Tsirigotis and Luczak (2018) interviewed domestic violence survivors and administered the Ego Resilience Scale (ERS) and collected demographic information. Survivors of domestic violence who had higher education (protective factor) were noticed to have more resilience after trauma. Additionally, the researchers identified that being battered by ones' father was the highest risk factor for threatening future resilience. While this study was a small study and it cannot be determined whether education created resiliency or the higher-educated participants were more willing to participant in the study, this is a possible pathway for interventionists to support survivors. Additionally, recognizing how the relationship of the survivor can negatively impact psychological/emotional functioning also informs interventionist of the level of support needed by those experiencing intra-familial abuse.

Internal and External Factors

Other studies inform us that external and internal factors that impact resilience are present in interpersonal violence survivors. Internal factors are factors within the survivor of adversity or trauma, such as coping skills (Hirai et al., 2020), emotional intelligence, ability to have meaningful relationships (Soylemuz & Dursun, 2020) etc. External factors are the factors that are environmental to the survivors, such as social support, rape myth culture, poorly trained responders, etc. Many factors can be identified as both internal and external. For example, having social support (external factor) after sexual violence is a factor that promotes resilience; however, having meaningful relationships (internal factor) within the social support system further promotes resilience (Soylemuz & Dursun, 2020).

Internal factors that impact resilience in interpersonal violence survivors are psychological, cognitive, or emotional traits that assist the survivor in achieving post-traumatic growth versus impairment (Munoz et al., 2017). For example, Munoz et al. (2017) identified with study participants (N=125) that hope and internal locus of control (internal traits) positively impacted resilience in survivors of intimate partner violence (IPV). While it is impossible for this study to exclude external factors, the participants had in common, hope and internal locus of control were clearly related to the achievement of higher levels of resilience. Similarly, in another study of resilience in adult child sexual abuse survivors (N=493), those who had more hope (psychological trait) demonstrated higher levels of resilience. Again, in this study, it is impossible to identify or exclude that other factor may also be common among those with higher

resilience, the two studies indicate that hope (internal factor) is likely related to resilience.

Researchers have also studied the commonality of external factors in populations with interpersonal violence experiences. One external factor identified in those who experience domestic violence is in being a parent (Brosi et al., 2020). Domestic violence survivors who had a child achieved resilience at a higher rate than those who did not have children, as the survivors felt a higher desire to live well for their children's sake (Brosi et al., 2020). Another study identified that social support (external factor) was correlated with resilience. Jose and Novaco (2015) interviewed and tested 136 female survivors of IPV. Those who had healthy and supportive social support described achieving more resilience (Jose & Novaco, 2015). These participants were in the process of requesting restraining orders against their abusers; therefore, the results of the study cannot be generalized to all IPV survivors.

Resilience Factors in the Sexually Assaulted Population

Sexual assault survivors are a population of individuals who face a unique but similar adversity. A sub-population of this group are reporting sexual assault survivors who experience a specific set of circumstances with interaction with law enforcement, which for many reporting survivors, causes further harm and adversity to them (James & Lee, 2015). The resilience of reporting sexual assault survivors has rarely been researched or measured in current literature exclusively, however resilience has been studied in the larger population of sexual assault survivors. When exploring risk and protective factors in the sexually assaulted population, current studies have identified

several factors that have emerged as helps or hinderances to the development of resilience.

Survivors of sexual violence experience more harm than those that report traumatic stress due to other experiences of violence (Ponce-Garcia et al., 2016). A protective factor for female sexual assault victims is social connection and support, but this protective factor may be threatened following an assault (Ponce-Garcia et al., 2016). The maintenance of social support that is meaningful for the survivor is positively correlated with resilience and reduces the likelihood that post-traumatic stress will develop (Soylemez & Dursun, 2020). In a study conducted by Therriault et al. (2019), sexual assault survivors who experienced positive social support through supportive reactions of others experienced less psychological distress following their assault. In Therriault et al.'s study of 474 adults, 16% of respondents experienced sexual violence. Of this 16% (n=49), 13 of the participants had not disclosed the violence to anyone and 15 experienced negative reactions to their disclosure. Participants who experienced negative social reactions to their disclosure incurred more distress (anxiety, depression, irritability) than both those who received positive support and those who did not disclose their assault at all. This study was significant in that disclosure and reactions to disclosure has not often been evaluated by other researchers. While the study only had a small number of sexual assault survivors who received negative reactions, there is a clear link to mental health impairment, which supports the belief that social support is important in resilience.

Only one recent study sought to understand resilience in reporting sexual assault survivors. Fornari and Labronici (2018) conducted a qualitative study with 12, adult, female participants who received medical-forensic care after a sexual assault. The medical-forensic care was provided at a police agency in Brazil (Fornari & Labronici, 2018). The interviews were conducted 3-12 months post reporting the sexual assault and receiving medical-forensic care. Using thematic analysis, the researchers gleaned several themes that were linked to resilience for the survivors: family and community support and connection to spirituality. Fornari & Labronici (2018) found that internal protective factors that started the process of resilience in reporting sexual assault victims were positive and non-judgmental interactions with medical and law enforcement officers (external factor) and spirituality (internal factor). While the study was small the identification of how social support, including the support shown by the medical-forensic professionals was consistent among the study participants and points to a possible important external factor that influence resilience in reporting sexual assault survivors. The study was conducted in Brazil, and it should be noted that the occurrence, reporting, and recovery from sexual assault may not be generalizable to sexual assault survivors in the United States and cultural difference should be considered. However, with little being researched about reporting sexual assault survivors, the results of the study are significant.

When examining the impact of trauma in individuals, resilience is an appropriate lens to identify how people survive and thrive. Resilience Theory has evolved throughout the years and, with most types of experienced trauma, understanding how one achieves

recovery and thrives post-trauma can help individuals, families, first responders, psychological professionals, and survivors incorporate resilience strategies into their lives. There are both internal and external factors that appear to impact resilience. While the lens of resilience has rarely been used to understand the experiences of the sexual assault survivor, it is a fitting lens to identify what supports resilience in sexual assault survivors, as sexual assault is a serious trauma. The application of RT to the reporting sexually assaulted population will add to the limited research of resilience in sexual assault survivors.

Literature Review Related to Key Concepts

The experience of sexual assault has harmful effects for survivors. Sexual assault survivors who live in the United States experience unique influences of a rape myth culture, a lack of appropriate response to mental health consequences of experiencing sexual violence, a lack of understanding about trauma and victimization, and limitations of police training and investigative responses to sexual assault survivors. Each of these variables that impact sexual assault victimization within the United States will be examined and relevant research will be reviewed within this section.

Sexual Assault Reporting in the United States

Currently, sexual violence is endemic within the United States, yet reporting rates are low. In the U.S., one out of every 3 women and one out of every six men will experience sexual violence (Smith et al., 2017). The percentage of multi-racial, minority women, Native American, and Alaska Native women, that are sexually assaulted is far higher than for Caucasian women (Smith et al., 2017). In 2018, more than 730,000

experienced a threatened or completed sexual assault (Morgan & Oudekerk, 2019). In 2017, nearly 40% of sexual assaults were believed to be reported to law enforcement, however in 2018, this estimate was reduced to 25% (Morgan & Oudekerk, 2019). While there is no identifiable reason for the sharp decline in reporting rates, this decline occurred at the same time as the #MeToo movement. Sexual violence is a daily experience for many United States citizens.

Sexual violence has taken a great toll on the economy, mental health, feeling of safety within communities, and the workforce. Each survivor of sexual assault experiences more than \$120,000 in economic burden as compared to other citizens who do not experience sexual violence (Peterson et al., 2017). This economic burden comprises medical costs, loss of work productivity, loss of housing, and criminal justice costs (Peterson et al., 2017). Just in acute medical care received after a sexual assault, on average, insurance providers pay an approximate \$5,800 and survivors pay \$1,000 (Tennessee et al., 2017). The homeless community has an over-representation of sexual trauma survivors indicating there is a correlation between experiencing sexual violence and homelessness (The Women's Task Force of the District of Columbia Interagency Counseling on Homelessness, 2018). The experience of sexual violence is also correlated with various mental health impacts such as depression, post-traumatic stress disorder, and anxiety (Dworkin et al., 2020). Clearly, the experience of sexual violence creates legal, financial, health, and mental health outcomes for sexual assault survivors. These negative outcomes would not be possible if there was social, community, and legal supports and interventions that appropriately responded to the crime of sexual violence and supported

survivors. United States culture is likely highly impacted by and still operates with rape myths systemically, which creates an unfriendly and unsupportive culture by which to get help when one is victimized sexually (Venema et al.,2019a).

While most U.S. citizens would decry that sexual assault is one of the most abhorrent crimes that can be committed, rape myth culture has reduced the moral outrage of most as sexual violence often fails to meet their understanding or interpretation of sexual violence (Chapleau & Oswald, 2014). A lack of acceptance of survivors of sexual violence creates more shame and guilt within survivors, which complicates their recovery and can negatively impact their ability to experience resilience (James & Lee, 2015).

Sexual Assault Victimization

Survivors of sexual violence experience increased psychological and emotional consequences following a sexual assault. A recent meta-analysis of research occurring from 1970 through 2014 identified multiple studies that examine the connection between poor mental health outcomes and the experience of sexual violence (Dworkin, 2020). Studies representing nearly 90,000 sexual assault survivor participants indicate that depression and post-traumatic stress disorder were prevalent outcomes at a significant rate when compared with those who did not experience sexual violence (Dworkin, 2020). The meta-analysis did not specifically define what constituted sexual violence and this was an important limitation to the generalizability of this study (Dworkin, 2020). However, the author of the meta-analysis only used studies that included strong diagnostic interviews to determine mental health outcomes (Dworkin, 2020). There are

many current studies that also represent the deleterious outcomes for sexual assault survivors.

In a study of 65 sexual assault survivors who received sexual assault medical-forensic exams, nearly 68% of survivors reported experiencing depressive symptoms and acute stress (Dir et al., 2018). These survivor participants were interviewed through both phone and in-person interviewers who administered the Patient Health Questionnaire (PHQ-9) and the Post-traumatic Stress Disorder Checklist (PCL-5) (Dir et al., 2018). Statistical analysis in this study indicated that 69.7% of the participants were experiencing depressive symptoms such as hopelessness, sadness, sleep disturbances, anhedonia, and more (Dir et al., 2018). Additionally, 55% of these survivor participants met the clinical criteria for acute stress (Dir et al., 2018). While the study was small (N=65), the results were clearly significant and are likely indicative of what other survivors experience. Additionally, the PHQ-9 and the PCL-5 are reliable and valid tools for depression (Sun et al., 2020) and acute stress (Bressler et al., 2016) and were administered by psychology professionals. One limitation in this study was that the researchers did not attempt to measure psychological functioning prior to the sexual assault or whether prior traumas existed for the participant population.

Another study of college freshmen assessed the mental health outcomes for sexual assault survivors. Carey et al. (2018) recruited 438 female college freshmen and followed them for one year. The participants participated in monthly surveys to share mental health baselines. Additionally, the researchers also tracked experiences of sexual violence. The results of the study indicated that 12% of the participants experienced sexual violence

within the first year of college, and that these participants had higher levels of depression and anxiety when compared to the rest of the sample participants. While there was no way to control for other experiences that may have impacted the 12% of participants who experienced sexual assault, the fact that the researchers followed the participants for a year-long study makes the study more reliable than other studies who simply capture a moment in time. Clearly, the research indicates that sexual assault survivorship comes with higher levels of mental health impairments for many survivors.

In addition to the quantitative studies already mentioned, qualitative studies with survivors indicate similar results. In an English study conducted by Yuen et al. (2019), 15 survivors of sexual assault shared their mental health decline post assault. The survivor participants indicated that the sexual assault had lasting emotional and psychological impacts on their life and that it took a long time to recover from the assault (Yuen et al., 2019). The survivor-participants experienced depression, anxiety, posttraumatic stress, impairments within their occupations, social relationships, shame, guilt, and other negative consequences of the assault (Yuen et al., 2019). While the study participants live in England, these experiences are also represented in the U.S. population. A U.S. qualitative study conducted with 45 sexual assault survivors and one of their support persons identified similar outcomes to experiencing sexual assault (Ullman et al., 2018). The survivor-participants shared in their interviews they experienced high levels of depression and posttraumatic symptoms (Ullman et al., 2018). Many of the survivor-participants also developed substance abuse dependency in order to try to cope with the adverse mental health outcomes from the assault (Ullman et al., 2018). While both

qualitative studies were small, the disclosures of the survivor-participants provide richer understanding of the themes represented in the larger qualitative studies. Sexual assault victimization has severe mental health implications for survivors. Understanding mental health outcomes has spurred a need to understand how trauma impacts sexual assault survivors emotional, cognitive, and biological well-being.

The Study of Trauma

The acceptance that sexual assault causes harm to the survivor on a cultural level has been influenced by the scientific research, evolution, acceptance that sexual assault often results in medical and mental health impairments. Sexual assault survivors often experience a unique set of reactions to sexual violence and due to this specific set of responses, research about sexual assault trauma has evolved as well as unique support and recovery services. Early in the 1970's, trauma research specific to sexual violence began to take shape. Burgess and Holmstrom (1974) first developed Rape Trauma Syndrome as a conceptual understanding of the stress response and recovery cycle that a sexual assault victim often experiences. These researchers identified there are both an acute reaction (stress response) and long-term reactions to sexual violence and these reactions are physiological, emotional, and cognitive (Burgess & Holmstrom, 1974). Rape Trauma Syndrome (RTS) was identified as a specific stress reaction to sexual violence and began to be used by experts to explain the unique response to sexual violence victimization within the criminal justice system (Burgess, 1983). While RTS continues to provide a conceptualized understanding of trauma reactions after sexual

assault, currently acute stress disorder and post-traumatic stress disorder have become more widely accepted clinical references for post-sexual assault reactions.

Post-Traumatic Stress Disorder

In 1980, the *Diagnostic and Statistical Manual of Mental Disorders* (DSM) produced by the American Psychiatric Association, first included post-traumatic stress disorder (PTSD) as a recognized mental disorder. Within the inclusion criteria for this inchoate disorder was rape (American Psychiatric Association, 1980). PTSD gave way to a more clinical description of trauma reactions that sexual assault and other trauma survivors experienced; however, the criterion of positive symptoms is not specific to sexual assault. PTSD is believed to occur at about 3.5% in the U.S. population with women being twice as likely to experience PTSD (American Psychiatric Association, 2020). While this rate is not specific to only the trauma of sexual violence, with sexual violence occurring at a high frequency to women in the U.S., it is likely that a significant rate of PTSD that occurs for American women. In 1994, within the revised 4th version of the DSM, a new mental disorder that describes early post-trauma reaction was included (American Psychiatric Association, 1994). This disorder is Acute Stress Disorder (ASD) (American Psychiatric Association, 1994). ASD was developed as a mental health disorder so that insurance providers would cover psychiatric and psychological services to trauma survivors experiencing distress earlier their recovery as post-traumatic stress disorder cannot be diagnosed until six months, post-trauma (Fanai & Kahn, 2020). Both PTSD and ASD specifically identify sexual assault as a trauma-inducing experience

(American Psychiatric Association, 2013). This history of research and medical intervention strategies has helped legitimize the harm that sexual assault causes.

The Neurobiology of Trauma

While the understanding of sexual assault trauma has grown, so to has the understanding the neurobiology of trauma and how it impacts both initial reactions of traumatized sexual assault survivors and long-term reactions. Experiencing resilience post-trauma may even be link to neurobiological changes that occur in the brain during a traumatic event (Arnsten et al., 2015). Traumatic experience often activates the amygdala which in turn triggers the release of several chemicals such as norepinephrine and a group of chemicals called catecholamines (Arnsten et al., 2015). Catecholamines in turn can impair the functioning of the pre-frontal cortex (Arnsten et al., 2015). Catecholamines are related to the development of post-traumatic stress disorder in the long-term (Arnsten et al., 2015). Also, during a fear-inducing trauma, the body and brain respond with protective mechanisms such as fight, freeze, or flee (Roelofs, 2017). Orienting (fixating on a non-threatening object or aspect of trauma) and tonic immobility (freezing) are products of the parasympathetic system rather than decision-making or emotional choice (Roelofs, 2017).

In order to measure the acute and on-going neurobiological changes a survivor of sexual assault experiences, Quide et al. (2017) conducted a study of 27 female survivors of sexual assault and 20 control participants of the similar ages. The survivor participants experienced a sexual assault within the prior 4 weeks to the study. All participants underwent MRI evaluation, underwent other laboratory tests, and had to perform

cognitive tasks. The sexual assault survivor participants had significantly lower cortisol production, had some executive cognitive delays (decision-making/organizing), and had problems deactivating parts of the brain responsible emotional processing (Quide et al., 2017). Additionally, the more severe the differences within the brain functioning of the sexual assault survivors resulted higher the level of PTSD symptoms (Quide et al., 2017). While this study was small (n=27 survivor participants), the results reached by the researchers are consistent with other larger, similar studies. A draw-back of the study is that there were no establishment of the severity or trauma response experienced by the survivor participants at the time of the assault, so the measurements were collective outcomes even though the survivor participants could have had varying experiences. While reporting the assault to law enforcement was not specifically addressed, these measured neurological changes could impair survivor's and their ability to report the assault and/or recall the assault in full.

Specifically, Berman et al., 2018 found that negative social reactions to sexual assault and self-blame were highly correlated to changes in the lingual gyrus, a structure that regulates processing, memory retrieval, and narration of the traumatic event. The MRI study included 38 sexual assault survivor participants and 30-age matched, non-sexual assault survivor participants. In addition to the MRI participants underwent, sexually assaulted participants filled out the Rape Attribution Questionnaire which measures self-blame for their assault. Non-assaulted participants filled out a similar questionnaire about the attribution of rape. All participants also completed the PTSD Checklist and underwent de-briefing. (Berman et al., 2018)

The study revealed that the lingual gyrus cluster was affected in those experiencing high levels of self-blame and PTSD symptomology (Berman et al., 2018). Furthermore, the researchers reported that other studies support the belief that the lingual gyrus cluster within the brain is triggered during trauma recall and narration, impacting the survivor's ability to recall and narrate without deficiencies in processing semantic information (Berman et al., 2018). While this study was small, it demonstrated measurable differences in lingual gyrus region of the brain specific to sexual assault and this research has not been conducted previously in this population. While more study is needed to create concrete conclusions, it has perhaps paved the way for further study and eventual understanding of the impact of sexual assault experience on the brain. A drawback of the study is that while conclusions can be formed about the ability of survivors to recall, report, and process semantic information, that was not specifically tested in the sexual assault survivor participants, so the connection between this brain difference and verbal abilities can only be surmised. Additionally, this study was conducted in Israel and the participants were likely Israeli women. The sexual assault survivor participants likely have varied beliefs and are impacted by cultural differences in self-blame and sexual assault experiences. Nonetheless, this study contributes to other research studies that establish both acute and long-term brain functioning differences for the sexually assaulted population.

Research shows that resilience is not only a psychological/socio-emotional outcome, but also a physiological/biological outcome. Rakesh et al. (2019) proposes that an alternate definition of resilience can include, "adaptive behavioral and neurobiological

responses to trauma (p. 1269)” that arbitrate functioning outcomes. The neuro-biological history of the trauma survivor (history of poverty, abuse, neglect, injury, and their effect on the brain) and the current brain injury caused by trauma create an impact on whether the brain and body recover or become resilient (Rakesh et al., 2019). Understanding the neurobiology of sexual assault is important for a number of reasons. First, acute and long-term neurobiological reactions to sexual assault can impair the ability to report (Berman et al., 2018). Secondly, resilience from sexual assault includes neurobiological management of changes (Rakesh et al., 2019). Lastly, neurobiological differences can help explain/refute behaviors that imply untruthfulness of survivor behaviors (problems recalling, blunted affect, explanation of behaviors surrounding assault) (Quide et al., 2017) that are connected to rape myth culture.

Rape Myths and Rape Myth Culture

Born out of the feminist theory during the 1970s, researchers began to identify there were certain beliefs about sexual assault that were untrue and damaging to sexual assault victims (Burt, 1980). These myths were often victim-blaming, minimizing, and released responsibility from the perpetrator (Burt, 1980). For example, one popular myth is that woman lie about experiencing sexual violence in order to get back at men in their lives. The rate of false reporting of sexual assault is about 3% to 10% (Lisak et al., 2010), meaning that false reporting is uncommon. Another popular myth is that sexual assault is just a ‘bad’ sexual experience. On the contrary, sexual assault survivors often compare the assault to a near-death experience and suffer substantial rates of post-traumatic stress disorder as a result of sexual assault (Guina et al., 2019). Burt (1980), who first

attempted to operationalize ‘rape myths,’ found that acceptance of the myths was linked to a strong belief in gender stereotypes, adversarial sex roles, conservative sexual beliefs, and the acceptance that some level domestic and sexual violence is acceptable within U.S. culture. While research unequivocally disproves many rape myths, they continue to impact U.S. culture.

Rape Myth Culture (RMC) develops from a prevalence of such inaccurate of rape myths and is a culture where sexual assault victims are not believed, understood, acknowledged, or supported (Prina & Schatz-Stevens, 2020). RMC and its impact on U.S. culture can be difficult to measure. Using the tenets of Burt’s (1980) theory of RMC, Johnson and Johnson (2017) measured rape myth cultural beliefs and attitudes in 314 college students from the Mid-west. They found that belief in gender stereotypes, acceptance of violence within U.S. culture, and sexism were significantly present in their participants (Johnson & Johnson, 2017). While this study did not connect how these beliefs were connected to rape myth endorsement, theoretically, the study substantiated the presence of Burt’s (1980) causal factors of RMC because the researchers identified many of the same tenets of Burt’s original theory present in current times, more than 47 years later, within the United States (Johnson & Johnson, 2017).

Other studies have performed similar measurements of RMC. Using the Illinois Rape Myth Scale, researchers found that those higher in rape myth acceptance more often did not believe accusers (Klement et al., 2018). In this study, 395 participants read vignettes in which an alleged sexual assault took place, a report was made to law enforcement, and the case was taken to trial. The vignettes included elements of rape

myths, such as having a compliant victim who did not fight back, the victim was on a date and went to the perpetrator's home after the first date and included information about the victim that challenged her credibility. The participants that endorsed higher rape myth acceptance viewed the victim more culpable for the sexual assault than the perpetrator, even when they were given information that debunked rape myths (Klement et al., 2018).

Rape Myth Culture impacts the way that survivors of sexual assault view their own assaults. Even after experiencing sexual violence, survivors struggle to recognize rape myths and may use myths to evaluate their own experience (Haugen et al., 2019). Haugen et al. (2019) found that survivors who experienced a recent sexual assault endorsed a higher level of rape myth acceptance than those who had not recently experienced a sexual assault, when being exposed to vignettes about forced and coerced sexual assault. The study participants comprised 214 female college students, with the sample having nearly 38% of participants with a recent (within a year) sexual assault experience (Haugen et al., 2019). Another study found that there was no difference in rape myth endorsement between sexual assault survivors and non-sexual assault survivors, even though one would expect there to be lower level of rape myth endorsement by those who have actually experienced sexual violence (Grandgenett et al., 2020). Perhaps even survivors of violence struggle to identify victimization and have difficulty in assigning responsibility fully to perpetrators when they live in a rape myth culture. This study had significant drawbacks in that the participants viewed vignettes regarding sexual assault. How one believes they may respond and how one actually

responds to a real-life circumstance involving interpersonal violence can be very different. This difference may alter the results of the study significantly.

Even though some survivors of sexual assault are influenced by their own belief in rape myths, they often experience further harm when their family, friends, and justice system blame them for the victimization or minimize the effects of the assault (Grandgenett et al., 2020). Anderson and Overby (2020) conducted a study with survivors of sexual assault to understand the impact of rape myths on their well-being. Survivors noted often that rape myths harmed them, their legal standing, and their well-being, as they were met with victim-blaming and disbelief within both their personal life and with law enforcement and prosecutors (Anderson & Overby, 2020). While Anderson and Overby's (2020) study was small (N=21), their results were not dissimilar to both other research they conducted and other formal studies. Similarly, when survivors of sexual assault report experiences wherein they did not fight their attacker or engaged in behaviors that were related to rape myths, their friends, family, and police responders provided less helpful responses to the survivor upon their disclosure (Sit & Schuller, 2018). Rape Myth Culture has negative effects on survivors of sexual violence, which undoubtedly has harmful effects on a survivors' emotional well-being. Additionally, rape myth culture also impacts police response and criminal justice outcomes that sexual assault survivors rely on when they choose to report their assault.

Law Enforcement and Investigative Issues

Law Enforcement (LE) are often the first point of contact between sexual assault survivors and the justice system. Survivors of sexual assault indicate they are hesitant to

report their assault due to fear they will not be believed or supported by LE responding to their case (Youstin & Siddique, 2019). United States LE are influenced by Rape Myth Culture in which they live, and this often has a negative impact on how interviews with sexual assault survivors are conducted and how reports are received and investigated (Shaw et al., 2017). Sexual assault survivors reach out to law enforcement for a myriad of reasons, including safety, justice, and protection and more (Kahn et al., 2018). Higher rape myth acceptance among LE reduced the likelihood that law enforcement will respond seriously to sexual assault cases (Venema, 2019).

Several recent studies have elucidated how rape myths influence the interviews of sexual assault survivors and investigation into their complaint of sexual assault. In the UK, officers high in rape myth acceptance judged more victims as lying or magnifying their complaint of sexual assault (Hine & Murphy, 2019). In a larger study (N=517), researchers found that officers that endorse higher rape myth acceptance are less prepared to respond to sexual assault survivors and are more likely to close the case or disbelieve the survivors report of assault (Garza & Franklin, 2020). This research study was significant in that participants were recruited from the five largest U.S. studies (Garza & Franklin, 2020). The difficulty in this study was that the researchers did not fully identify what officer “preparedness” was (Garza & Franklin, 2020).

Another study into rape myth acceptance by law enforcement was conducted in the Great Lakes region of Michigan. This quantitative study revealed that the rate of rape myth acceptance appears to be diminishing over recent years but is still a significant factor within law enforcement agencies (Venema, 2018). To measure rape myth

acceptance among law enforcement, 174 LE participants were administered the Illinois Rape Myth Acceptance Scale (Lonsway & Fitzgerald, 1994) and the Subtle Rape Myth Acceptance Scale (McMahon & Farmer, 2011). Additionally, the LE participants were asked about what percent of sexual assault complaints they believed were falsely reported (Venema, 2018). The participants were of varying years of LE experience and education. The results of the study indicated that average rape myth endorsement was low, with 61% of the participants falling in the lowest category of measure for both rape myth endorsement scales (Venema, 2018). However, the same participants reported that 30%-50% of sexual assault claims were likely false reports by alleged sexual assault survivors (Venema, 2018). The results of this study are mixed, at best. While LE participants have learned that rape myths are not appropriate to endorse on a written form, they still assume a high number of assaults are fabricated. I stop to consider how a sexual assault survivor may feel in that the LE they are reporting to may believe your report has a 30% to 50% likelihood of being a lie. A drawback of the study is that the polling of participants took place in one geographic location within the United States, and it would be difficult to generalize these study results to other geographical locations.

Rape myth acceptance and living in a rape myth culture also impact LE interviews, report writing, and investigation into cases of sexual assault survivors. Reports are the first investigative step taken by a LE officer. In a study of 248 sexual assault reports from a Midwest, urban police agency, 25.4% of the reports included language that minimized or diminished the seriousness of the sexual assault based on rape myths (Shaw et al., 2017). Additionally, 16.9% of the reports reviewed included

disparaging remarks about the sexual assault survivor, such as promiscuity or sex work involvement (Shaw et al., 2017). These reports corresponded to unsubmitted sexual assault forensic examination kits and may not be representative of reports that corresponded to submitted evidence kits, but the sample is representative of sexual assault reports that met unfair judgement and barriers within LE agencies. Reports that include language of minimization of the assault or disparaging information about the victim have fewer investigatory steps assigned to them and have poorer case outcomes (Shaw et al., 2016). Sexual assault prosecution is less likely to be sought if the victim in the case went against rape myths (Hildebrand & Najdowski, 2015). These are the primary ways that LE rape myth endorsement can impact case outcomes.

Summary and Conclusions

Sexual violence is an endemic issue within the United States. While sexual assault is a heinous crime, there are low reporting rates and even lower rates of prosecution. Throughout this chapter, both seminal and current research was presented on resilience from sexual violence, sexual assault victimization, trauma, rape myth culture, and law enforcement response to sexual assault survivors. These social phenomena were researched through the lens of the experience of resilience in the female, sexually assaulted population.

The theoretical framework for this study is resilience. For this study resilience will be defined as the ability to return to normal functioning or better, post sexual violence. While resilience was first defined by Garmezy through clusters of internal skills, later seminal researchers in the field of resilience identified there were likely both internal and

external factors that create resilience in trauma survivors. Internal factors may include genetics, personality disposition, and personality characteristics such as flexibility and coping skills. External factors may include poverty, family support, and community support. The equation for possible resilience is based on the individuals internal and external factors. This study explores the external factor of reporting experiences to further understand the experience of resilience in reporting sexual assault survivors.

Sexual violence causes cognitive, emotional, and biological differences for survivors. There is a high incidence of PTSD in survivors of sexual violence as compared to other types of trauma survivors. Understanding the impact on mental health that sexual violence survivors experience will aid us in identifying ways to minimize harm caused to survivors. Recent research has identified that there is a neurobiological response that many survivors of sexual violence experiences. These neurobiological responses cause changes in the amygdala and pre-frontal cortex that may inhibit help-seeking and reporting behaviors of sexual assault survivors and also may explain the behaviors of sexual assault survivors during and post assault, that have been highly misunderstood and criticized.

The sexual assault survivor's interaction with others is often impeded by rape myth culture that exists in the United States. Rape myth acceptance often focuses on the behaviors of the victim that may have caused the sexual assault. Rape myth endorsement is based on the idea that victims will look a certain way, act a certain way if they are victimized, and that victims often fabricate reports of sexual assault in order to control or punish others. Survivors of sexual violence also experience and sometimes endorse these

rape myths as they often struggle with self-blame. Additionally, the law enforcement responders, who are often the first point of contact for sexual assault survivors, live and operate within a rape myth culture and this impacts how they interview survivors and investigate their claims of sexual violence.

The next chapter will focus on research methodology. In this study, the experience of resilience will be studied to gain an understanding of how survivors of sexual violence experience resilience and what factors they attribute their resilience to. Thematic analysis of interview content will be used to explore the experiences of resilience in sexual assault survivors.

Chapter 3: Research Method

Introduction

The purpose of this qualitative study was to describe and interpret the experiences of adult, female sexual assault survivors who reported their victimization to law enforcement. The interpretive descriptive qualitative design was chosen due to the “subjective experiential nature” (Thorne, 2016. p.118) of sexual assault reporting that is also a social phenomenon. In this chapter, the research design and rationale will be discussed as well as the role of the researcher, methodology, and data analysis plan.

Research Design and Rationale

The research question posed in this study is:

RQ1: How do adult female sexual assault survivors make sense of their law enforcement reporting experiences?

The main phenomena under study was sexual assault reporting, through the lens of RT. Sexual assault reporting was defined as when a sexual assault survivor reports the assault they experienced to a law enforcement agency. While the participant was not asked about resilience post-reporting, resilience in survivors of sexual assault was the theoretical backdrop that was used in data analysis and interpretations.

For this study, I worked in the qualitative research tradition with an interpretive descriptive research design. The interpretive descriptive design, first established by Thorne (2016), was created for nursing researchers who sought a qualitative methodology for eliciting a description of the patients’ subjective experience of an illness or treatment through an interview and interpreting this description to develop more informed clinical

understandings and practices. Reporting sexual assault reporting is an intensely subjective experience. In order to describe and interpret the experience of sexual assault reporting most effectively, through the provision of rich, contextualized detail and insights achieved by the participant, only a qualitative approach was appropriate for the research question I posed. While some researchers have used a quantitative approach to understand the sexual violence experience (Bermen et al., 2018; Quide et al., 2017) and/or sexual assault reporting (Garza & Franklin, 2020; Venema, 2018), a quantitative approach would not have been able to detail the thoughts and feelings of the survivor participants as they moved from reporting their experience to law enforcement. As a researcher, I described and interpreted the experiences of sexual assault reporters in order to inform future understanding and practice within the first responder community.

Social phenomena are often studied through qualitative approaches. Social phenomena are shared experiences that impact individuals uniquely (Teherani et al., 2015). Interpretive descriptive qualitative research is the process of posing open-ended questions to participants to understand their contextualized experience (Elliot & Timulak, 2021; Thorne, 2016). The interpretive qualitative methodology is inductive and looks to the research participant to define and share their experience, without influencing the participants' responses (Elliot & Timulak, 2021). This methodology is grounded ontologically in social constructionism, meaning that individuals construct their own meaning from their experiences that is unique to them (Allen, 2017). Interpretive descriptive is an appropriate design to understand the experiences of sexual assault reporting as sexual assault is a solitary, individual event.

Other qualitative approaches were considered but ultimately interpretive descriptive qualitative design was chosen due to the fact that the participants are encouraged to describe their own experience. For instance, the case study approach was considered. Case studies are both considered to be exploratory and allows a researcher to gain in-depth knowledge from participants about an experience (Yin, 2017). The limitation of case study research studies is that there are typically few participants and shared experiences are not identified regarding the phenomenon (Quintao et al., 2020). In case study research, multiple data sources are often used (Quintao et al., 2020), and in the current study, only the participant interviews were used. Action research was identified as a possible method to understand the reporting experience of sexual assault survivors and resilience. Action research occurs when researchers work in conjunction with participants and others with the goal of change in regards to the social phenomenon (Jacobs, 2018). Action research was not the best design for this study even though action research has been used in community response models for sexual assault response reform (U.S. Department of Justice, 2016).

Role of the Researcher

Examining and identifying the role of the researcher is an important step for qualitative researchers. As I was responsible for conducting a literature review, interviewing participants, and interpreting data within this study, it is imperative that I identify my role in proximity to the participant and to their data. My relationship with and to the participants was as a participant observer.

Currently, I am a licensed professional counselor and have experienced a 27-year career as a sexual assault program manager for a domestic and sexual violence agency. Throughout my career, I have provided advocacy and support to both reporting and non-reporting survivors of sexual assault. Additionally, I provide crisis intervention and therapy services to sexual assault survivors. I have had hundreds of experiences where I was able to observe the reporting experiences of sexual assault survivors. I am a practitioner within the sexual assault field; however, in this study I was in the role of participant observer.

Thorne (2016) admonishes practitioner-researchers to step outside the practitioner role by relinquishing their typical practitioner skills and thinking. My experiences have influenced how I view the phenomenon of sexual assault reporting and my interest in this topic was formed on the basis that I see many survivors face a problematic reporting process that further harms them in addition to the sexual assault. While my professional experiences influence my practitioner role with survivors of sexual assault, it was important to limit my biases within this research and when interviewing participants within the study. In order to limit the influence of bias I had with the current research on sexual assault and reporting, I sought out research regardless of my conclusions, and much of the research conducted does not fully support my own experiences. When interviewing participants for this study, I recorded the interviews and used the words of the participant to guide the analysis and any interpretations versus my professional observations.

While there were no personal or professional relationships with the participants, the participant could feel I hold a certain power or prestige because I am a counselor. I am a counselor that works professionally in the sexual abuse and assault field. In order to reduce the likelihood the participant felt there was a power-based relationship, I stated to the participant my role as a research and observer throughout the study and reinforced that the study is limited to interviewing and not providing any clinical support to the participants.

While I did not use any participants with whom I had a relationship, I am a practitioner in the field of sexual assault response and intervention. My role in this research study was that of a researcher. Thorne (2020) calls on practitioner-researchers to be illuminators, variance interpreters, humanizers, and challengers. These roles mean the researcher illuminates the human experience as it is, identifies variances in each participants' experience, relays the full story of a participants experience by bringing the rich detail into the research, and is a part of challenging what is already known and allowing new descriptions to emerge (Thorne, 2020). In order to fill these roles, it is imperative to reduce and regulate biases that exist and to avoid power relationships with participants.

There are a myriad of ethical concerns that emerge when interviewing survivors of sexual assault including, risk of re-traumatization, maintaining the confidentiality of participants, and reporting their data in non-biased manners (Campbell et al., 2009). In a study conducted by Campbell et al. (2009), 92 sexual assault survivors were asked how research interviews should be conducted to reduce re-victimization. The participants

reported that they should be interviewed by informed researchers and that survivors should maintain control of what they share during the interviews. To maintain ethical standards in these matters, I did not interview participants about their sexual assault, but rather, post-assault reporting experiences. Additionally, my background as a counselor and advocate has influenced me, and I have a strong and informed understanding the dynamics of sexual assault and sexual assault recovery. Furthermore, I have experienced the law enforcement reporting process and feel well-informed of, in general, how reporting processes work.

Methodology

Participant Selection Logic

Population

The population chosen for this study were nine female, sexual assault survivors who reported their sexual assault to law enforcement. In this study, those who experienced sexual assault as an adult are specifically identified and those who have experienced child sexual assault were excluded. This inclusion/exclusion criteria were established so as to not confound the adult experience of sexual assault with other types of traumas, as the experiences of reporting and resilience are likely very different, based on the literature. Walden University's Institutional Review Board (IRB) was consulted about this population and agreed that with a well-established protocol, this population could be safely interviewed about their reporting experiences.

Sampling Strategy

Purposive sampling is designed to select participants who can speak to a specific theme or identify with the content of the study (Robinson, 2014). The participant qualifications for this study presented a more homogenous participant pool, at least in regard to the stated criteria. While purposive sampling limits transferability of study outcomes, the information and context-rich data provides a greater level of insight regarding the participants and their individual experiences (Van Rijnsoever, 2017).

Participant Criteria

Several criteria were established in order to produce a more homogenous purposive sample. Participants were screened by me, and I choose participants who self-identify as females, are at least 22 years of age, were sexually assaulted as an adult, and who reported their sexual assault to law enforcement. Participants self-certified that their assault took place longer than 3 years prior to the study and they felt that discussing their reporting experiences would not cause them further emotional harm. Participants identified as living within the United States when the assault occurred, when they reported their assault, and at the present time of the study. This population was chosen specifically to align with the goals of the study in seeking a detailed description of the reporting experience.

Number of Participants to be Selected and Rationale

I consulted the writings of researchers to determine the number of participants that would be appropriate for both the research topic, design, and data collection method (interview) being used (Guest et al., 2020; Saunders et al., 2017). In qualitative research, the issues of data and theme saturation are what guide researchers in identifying when to

stop collecting data (Saunders et al., 2017). Theme saturation, which was the goal in this study, is defined as when it is likely that collecting more data will not produce new themes (Saunders et al, 2017). One hundred percent data and/or theme saturation can never be guaranteed in qualitative study, as each participant has the potential to add new or additional data and themes to the study (Guest et al., 2020). For small qualitative studies that have a somewhat homogenous purposeful sample of participants, high thematic saturation can be achieved with six to 12 interviews (Guest et al., 2020). I recruited and interviewed nine participants for this study.

Procedures for Contact and Recruitment

To identify participants, I sent a flyer (Appendix A) to rape crisis agencies throughout the Great Lakes Region of the United States, by email, with a request that rape crisis case managers and therapists post the flyer within their agencies and inform past clients about the study opportunity. I posted flyers on three Facebook groups dedicated to sexual assault survivors. The flyer and Facebook postings had my email address, and interested potential participants were encouraged to contact me for information about the study.

Saturation and Sample Size

Saturation in a qualitative study occurs when the data collection is not adding any additional meaningful information to the study (Guest et al., 2020). In qualitative studies with homogeneity, saturation can often occur when six to 12 interviews are completed (Guest et al., 2020). The projected sample size goal was to complete enough interviews to reach saturation of themes presented by the participants.

Instrumentation

As this is a qualitative study, I created an interview protocol and an interview guide (Appendix C). The interview guide was developed and based on the interpretive descriptive model. After a few demographic questions, the participants were asked to “tell me about your reporting experience.” This was followed with several prompts to describe more of the reporting experience and their experiences post-reporting. An audio-recorder was used to record a verbal record of the interview, and the interviews took place on Doxyme.com, a HIPPA compliant video conferencing platform.

Procedures for Recruitment, Participation, and Data Collection

Strict recruitment, participation, and data collection procedures were followed during this research study. No recruitment, participation, or data collection occurred until after the IRB of Walden University approved the study. Once the study was approved, flyers (Appendix A) were sent to rape crisis agencies within the Great Lakes Region (Michigan and some surrounding states) of the United States of America. I asked these agencies to post the flyer in their waiting room area and ask therapists to inform their clientele about the study. I identified three Facebook groups for survivors of sexual assault. I posted the flyer on these webpages.

The data were collected only by me and the participants’ interviews occurred using Doxyme, a HIPPA compliant video conference program, and only an audio recording was saved. The transcripts were not sent to a transcription company, as I decided to transcribe the interview data. I completed the participant interviews one at a time and continued to schedule interviews as participants contacted me to participate in

the study. Interviews were scheduled after I screened the participants at the frequency in which participants appeared, but no more than one per week. The snowballing sampling method was used, as there was difficulty in recruiting enough participants for the study. Snowball sampling is used to generate more study participants by asking current participants if they know of others who may be interested in participating in the study (Parker et al., 2019).

Once a prospective participant contacted me to participate in the study, I screened them by email to determine their eligibility. If the prospective participant met criteria for inclusion in the study, I provided them a digital copy of the Informed Consent and scheduled the interview. Interviews were conducted using Doxyme, a video conferencing program. The video conference platform allowed personal contact that is not restricted by the participant or researcher's geographic location. The participant was texted or emailed a link.

At the day and time of the video interview, the participants were sent an invitation from the video conferencing program via text or email, to connect for the scheduled interview. The project was explained to the participant, and they were asked if they had any questions. The participant was then asked if they agreed to the conditions of the participation, as established on the consent form. The consent form was returned by email with the participants response of, "I consent," prior to the interview. If the form had not been previously sent by the participant, the participant was asked to send the emailed response before the interview could commence. I confirmed the receipt of the emailed response before beginning the interview. In addition to the video conferenced interview,

the entire interview was audio-recorded with a separate recording device. I recorded each video by use of a digital audio recorder that produces MP4 digital files.

I then used a semi-structured interview guide to ask the participants questions. Follow-up questions were posed to the participants to evoke additional information, especially if something was unclear. The interviews were scheduled to last for 60-90 minutes. The participant was encouraged to let me know if they would like to take a break at any point during the interview. At the end of the interview, I reminded the participant of the member checking process and gave them an estimated time before the transcript of their interview would be provided to them by email. The participants were also asked whether they were comfortable being contacted if there is anything that needed clarification in their interview. I provided the RAINN hotline number and encouraged the participant, should they feel any distress about the interview process, to contact RAINN at 1-800-656-HOPE. After the interview I emailed each participant a copy of the transcript and they were given the opportunity verify that the transcript was a true representation of the thoughts they wanted to relay during the interview.

Data Analysis Plan

The Interview Guide (Appendix C) was created based on the research question. After collecting data from the interviews, I used thematic analysis to interpret the data. Thematic analysis is method to identify and interpret themes within qualitative data (Clark & Braun, 2014). While sexual assault reporting is an individual experience, sexual assault survivors have reported similar experiences with law enforcement (Kahn et al., 2018; Garza & Franklin, 2020), as well as similar emotional and psychological outcomes

(Rakesh et al., 2019; American Psychiatric Association, 2013). I believed the data collection process (interviews) captured individual experiences of reporting and thematic analysis captured similar or shared experiences that constituted themes or patterns of similarity.

Thematic coding was used to analyze the data produced from the interviews. Clark and Braun (2014) established a clear and reflexive process for conducting thematic analysis or coding. First, the researcher should become familiar with the data. The researcher has a number of ways to do this, such as transcribing the interview data which includes reading and re-reading data. Secondly, the researcher should develop some initial codes, which are meaning units. Next, the researcher conducts a search for themes within the data set. Themes can be similar expressed thoughts or feelings the interview participants expressed or insinuated. Then, the researcher reviews, defines, and assigns a name for various themes identified. Lastly, the researcher interprets what the themes tell us about the data and reports their results.

Following this process, my data analysis process began by transcribing the interviews directly from the audio file. Then I continued to familiarize myself with the data by reviewing the transcriptions. The transcript of each interview was be created within a month of the interview. Next, I developed a preliminary set of codes from the data to organize the information and started to compare what was similar and different from each of the interviews. I hand-coded the transcripts by using different highlighters and assigning codes and colors to the data. Then I identified themes within the data. For example, a possible theme could have been the participants' impression of the officer

taking the report from the participant or how the participant felt when reporting the sexual assault.

After identifying themes within the data, I defined and assigned a code or label to the theme. This allowed for categorization, a definition, and labeling of the themes that helped with comparison between interviews. In Chapter 4, I will report and produce a written summary of the data explaining themes and participant description of the reporting process. Themes within the data represent the participants experience and meaning-making descriptions. In Chapter 5, I will summarize and interpret the themes and report what the data can help us understand about the participants experience and how the data can illuminate their experiences and can inform the report-taking process. Discrepant cases sometimes are identified when conducting thematic analysis (Creswell, 1998). The themes that appear discrepant were included within the final report as they represent a participant's description and experience are a part of the data derived from the study (Creswell, 1998).

Issues of Trustworthiness

Trustworthiness in qualitative research is the standard of using specific and clear methodology to ensure that data collected in a study, reflects in a valid manner, the accurate depiction and interpretation of data (Williams & Morrow, 2009). According to Lincoln and Guba (1985), trustworthiness in qualitative study is reflected through standards of credibility, transferability, confirmability, and confirmability. Additionally, a trustworthy researcher needs to demonstrate the user of ethical procedures. This section will review how these elements will be considered and attempted in the current study.

Credibility

Credibility is defined as whether the findings of a study are truthful (Cohen & Crabtree, 2006). Prolonged engagement with the research and data, triangulation, and peer debriefing are processes used to improve and increase credibility in qualitative research (Cohen & Crabtree, 2006). Following are methods I followed to improve credibility into this study of the experiences of reporting sexual assault survivors.

Prolonged Engagement

Lincoln and Guba (1985) assert that having a prolonged engagement with the phenomena being studied will result in a more credible study. In order to ensure high credibility in this study, I have had a prolonged engagement with the social phenomena of sexual assault, reporting, and resilience in survivors. This means I have taken the time to understand important factors both culturally and individually that impact this study. I have worked in the field of sexual violence intervention and treatment for many years and explored other current research sufficiently to understand relative thoughts, beliefs, and impact of sexual violence, and can establish what data that may emerge from the data collection that is relevant. Also, I engaged in peer debriefing throughout the research process and have explored my own biases which could affect the data collection and interpretation of the data.

Member Checking

Member checking is a process by which the researcher validates the data with the participants (Birt et al., 2016). I emailed a transcript of the interview to each participant for their review. This ensured the accuracy of the transcript and participant intention.

Reflexivity

Reflexivity in qualitative research is the practice of understanding and acknowledging the influence of the researcher on the data and influence of the participant on the researcher (MacBeth, 2001). To remain reflexive is the process of remaining pliable to the data and adjusting interpretations based on what is learned versus what the researcher believes they already know. I remained reflexive through data collection and interpretation by opening my mind to not only what I believed the literature told me about sexual assault reporting experiences but accepted the participants own description of their experiences.

Transferability

Transferability is the likelihood the results of a qualitative study can be representative of similar populations and contexts (Cohen & Crabtree, 2006). This study may be transferable to other similar participants being studied. I had strict criteria for this study and I was looking to understand the broad experience of sexual assault reporting. The purpose of the study was to describe and interpret the experiences of reporting sexual assault survivors. To increase transferability, I established specific criteria for the study, and detailed the specific procedures used in the study. I provided a rich and thick description of reporting experiences of the survivor participants and their experiences with resilience. Rich and thick descriptions include collecting contextualized, detailed information from participants who describe their experience (Ponterotto, 2006).

Dependability

Dependability in qualitative research is the belief that results could be reproduced by other researchers (Cohen & Crabtree, 2006). In order to produce dependability in this study, I used the experiences of other researchers and followed ethical procedures throughout the study. The processes of conducting qualitative data established in this study are being reviewed by experts in qualitative research. The use of an audit trail, or method that provides description of the researchers' logic, use of others' research, and data derived from participant interviews is important to build dependability (Carcary, 2009). To document the audit trail, I will keep a journal throughout this study that can be audited by other researchers to show integrity of the processes used.

Confirmability

Confirmability is the truthful depiction of data that is not influenced by the researcher's bias (Cohen & Crabtree, 2006). While it is impossible to remove research bias, I have worked hard to identify my biases as I approached the work of understanding the experiences of reporting survivors of sexual assault. In addition to identifying my biases, to improve confirmability, I practiced reflexivity. Reflexivity is the practice of willingness to respond to research participants and their data, allowing for the participants to define their own reality, therefore impacting presuppositions about the social phenomena being studied (Barrett et al., 2020). I kept a journal throughout the study to document reflexivity to the data as they are collected and coded.

Ethical Procedures

Ethical procedures were followed at every step of this study in order to protect the participants and to protect the integrity of the research process IRB approval was gained before any research participants were recruited. Since this study utilized human subjects, I completed a training course on the protection of human subjects in research. The certificate of completion of this course was provided to Walden University's IRB. Additionally, since this research project involved a vulnerable population, I consulted with IRB about ethical procedures that protected the survivor participants throughout the interview process. The IRB recognized how the research participant was protected. For example, I recruited only adults as participants, I planned to discuss the risks of participating clearly to the participants, and I required the participant who was assaulted to not participate unless the assault and reporting experience was a minimum of at least three years prior. I did not question the participants about their sexual assault, but rather their reporting experience. Finally, the IRB was satisfied that a crisis hotline would be offered to the participants during the interview. Committee members have been consulted in the establishment of ethical procedures for this study. During the recruitment phase of participants for this study, participants were encouraged to consider whether they believe discussing their reporting experience would cause them harm or discomfort. If a prospective participant felt they would experience harm, I encouraged them to reconsider participation in the study and provide them with the RAINN Hotline phone number.

As a matter of ethical consideration, all attempts were made to protect the anonymity of the participant by not detailing any description of the participants likeness,

or demographic information, including the name of any agencies they may have interacted with. The participant was assigned a number for contact purposes. The risk of distress due to discussing reporting experiences was addressed at the recruitment phase, at the commencement of the interview, and conclusion of the interview. The participants were given the RAINN crisis hotline number and encouraged to follow-up with the hotline should any distress occur.

No power relationships existed between myself and the participants. The participant could have felt influenced by the fact that I am a counselor and work within the field of sexual assault intervention and treatment. I informed the participant that my role within this study was as a researcher and not counselor and that our contact would be only in regards to the research interview and transmission of transcripts post interview.

All participant information and data collected from the participants will be kept confidential and records will be stored safely in my home, in a locked filing cabinet, for at least 5 years, post study. No one besides me will have the ability to open the filing cabinet. No identifying details will be reported, and participants' identity will not be disclosed. Participants were assigned a number and their phone number and email will be kept out of the report on the study. No video recording was conducted. An audio file was used for the purpose of transcription and the audio file will be stored in a locked filing cabinet only accessible by me.

An incentive was provided to the participants of the study. The participant received a \$30.00 digital Amazon e-gift card that was emailed to them at the conclusion of the interview. The gift card was not based on the type or quality of the interview, but

rather was used to compensate the participant for their time of interview and in reviewing their transcript.

Summary

For this study, an interpretive descriptive qualitative design was chosen to explore the experiences of reporting sexual assault survivors. This design was appropriate for exploration of sexual assault reporting as a social phenomenon and as an individual experience as sexual assault survivors construct their own interpretations of their experiences. The methods of recruitment for survivor participants reflect ethical practices when utilizing human subjects were reviewed and because sexual assault survivors often experience trauma, procedures that protected survivor participants have been established. Trustworthiness was attempted to be attained by use of reflexivity and recognition of bias I hold regarding sexual assault and reporting experiences was identified. The next Chapter will highlight the results of analysis of the data.

Chapter 4: Results

Introduction

The purpose of this study was to describe and interpret the experiences of adult, female sexual assault survivors who reported their victimization to law enforcement. The RT was used as a theoretical lens for the study. What had been established through the literature review is that the sexual assault reporting process was often intimidating and difficult to navigate for survivors of sexual assault (Youstin & Saddique, 2019). Furthermore, sexual assault survivors and law enforcement officers who take reports of sexual assault often had different goals (Garza & Franklin, 2020). Complicating the process of sexual assault reporting was the fact that often report-taking law enforcement officers were untrained in sexual assault trauma and approached report-taking ascribing to rape myth beliefs (Shaw et al., 2017; Venema, 2018). The research question established for this study was:

RQ1: How do adult female sexual assault survivors make sense of their law enforcement reporting experiences?

In this Chapter, I will report the setting in which the participant interviews took place and the demographics of the participants. Additionally, the data collection process will be described. The data analysis method used was fashioned after Braun and Clark's (2017) thematic analysis. The steps I used to analyze the data were inductive and started with codes that were used to identify themes within the data. Several methods were used to increase the trustworthiness of the data and analysis. Finally, the results of the study

will be presented and the whole methodological approach will be summarized in this chapter.

Setting

The setting for this research study was on online video conferencing platform called doxyme. This video platform was offered the participants and is HIPPA-compliant, meaning there is no recording of the video conference. Each of the participants chose this online video platform when they were offered it. The participants followed a link and did not have to download any programming that would remain on their phone or computer. A separate audio recording was made of each interview with the participants' consent. Each of the participants were in a private setting when they participated in the interview. Most participants were in their home, while two participants were sitting in their vehicle. When conducting the interviews, I was in a private setting as well. My setting was either in my home environment or my workplace office.

The participants were asked about their reporting experiences; however, each of the participants gave a detailed description of the circumstances around their sexual assault as well, including who their perpetrator was in relationship to themselves and where they were sexually assaulted. This description of the sexual assault they experienced was offered spontaneously. This caused some tearfulness for two of the participants, but when asked about continuing to participate in the study, both wanted to continue. It should be noted that the recounting of traumatic experiences can impact memory (Quide et al., 2017) and all the participants were reporting experiences that occurred at least 3 years prior to the interviews.

Demographics

The goal established for this study was to interview at least nine participants. For this study, 10 participants were interviewed. Late in the interview, one participant disclosed that she was sexually assaulted as a 16-year-old, which fell outside of the parameters of the approved study. This participant stated upon screening that she was assaulted and reported as an adult. I later learned that she believed that “adult” referred to “age of legal consent” for sexual contact. In subsequent screenings, I used the clarifier of “18 years of age.” This participant’s data were not included in the data analysis. Of the nine participants that were included in this study, the ages of participants ranged from late 20s to mid-50s. Included in a description of the demographics important to recognize in the study are the approximate age of the participants, region of the country they reside in, number of years since the report was made, the relationship to the perpetrator, and whether the report was made to civil authorities or military authorities. Participants 3 and 8 had two different reporting events. Table 1 provides demographics for the participants included in the study.

Table 1*Demographic Information on Participants*

	App. age	Region	Yrs. since rep.	Perp rel.	Military/ civil rep.
Participant 1	30s	East	5	Co-work.	Civil
Participant 2	30s	East	6	Co-work.	Civil
Participant 3	30s	West	7/3	Acquaint./ partner	Civil/ civil
Participant 4	20s	East	5	Acquaint.	Civil
Participant 5	40s	West	5+	Spouse	Mil.
Participant 6	50s	Midwest	10+	Spouse	Civil
Participant 7	50s	West	20+	Co-work.	Mil. & civil
Participant 8	50s	West	30+/20+	Partner/ acquaint.	Civil/ civil
Participant 10	50s	West	5+	Co-work.	Civil

App. Age= Approximate Age
Perp Rel = Perpetrator Relationship

Yrs. Since Report = Years Since Report
Military/Civil Rep. = Military Police or
Civil Police

Data Collection

I obtained Walden University IRB approval on October 8, 2021 and was provided an approval number of #10-08-21-0748083. IRB approval was granted until October 22, 2022. I submitted entry to the Walden University Student Participant Pool for participant recruitment. Also, I emailed the flyer announcing the study and study content to approximately 50 rape crisis agencies throughout the state of Michigan and surrounding states. Additionally, I emailed three Facebook page administrators for permission to list the flyer on their Facebook Page. Each of these three administrators were responsible for administration on Facebook sites that were open or closed groups for survivors of sexual violence. I received permission by each of the three administrators to post the flyer. I subsequently posted a brief introduction of myself to the group members and posted the flyer (Appendix A). From October to December 2021, I reposted the flyer on the Facebook sites three times to continue recruitment.

From these methods, I recruited 10 participants. The potential participants were instructed to email me at my Walden University email if they were interested in participation. Each of the participants did this. After receiving an email from a potential participant, by phone or email, I would verify their suitability for inclusion in the study. I asked if they were adult, identified as female, experienced a sexual assault they had reported at least 3 years ago or longer, and believed that participating in the study would not be detrimental to their well-being. If the potential participant responded affirmatively to these guidelines a digital copy of the Consent Form was forwarded to them through their email address and a date and time for the video interview was scheduled. I asked

each of the participants to review the Consent Form and respond to my email with the words, “I Consent,” if they were comfortable with the agreement. Additionally, I explained to each potential participant that I could use any video conferencing program they felt comfortable with, including Doxyme, which was HIPAA encrypted and they would not need to download any program onto their device. All participants were comfortable with and opted to use the Doxyme platform for their interview.

On that day and time of the scheduled interview, I sent an invitation link personalized with my name for easy identification. This link is a pre-established link and is unique to my account with Doxyme. Each of the 10 participants followed the link and established a video conference with me at their scheduled time. Before each of the interviews, I confirmed that I had a response email that they consented to participation in the study. Upon linking with the participant, I reviewed the Consent Form and offered to answer any questions they may have had. No participants had any questions about the Consent Form. The Consent Form, was sent to participants that were from recruitment from Facebook or through the rape crisis agencies that were contacted. A slightly different Consent Form, entitled Consent Form Walden Participant Pool, was sent to participants that were current Walden Students and learned of the study through the Research Participant Pool through Walden University.

After the Consent Forms were verified and the participants stated they did not have any questions or concerns, I began the interviews of the participants. In order to capture the most accurate depiction of the interviews, I used an audio recording device. The participants were informed this device would be used to capture an audio-only

recording of the interview. Additionally, I used a blank copy of the Interview Guide in which I kept notes. No video recording of the participants was captured through Doxyme video conferencing program. I conducted each interview in a private location within my home or office. Each of the participants declared they were also in a private, comfortable location, which was typically their home or within their vehicle. Ten interviews were conducted and typically lasted between 35 and 90 minutes. There were no variations in data collection other than those that were planned for and approved by IRB. Each of the participants audio recording were digitally sent by connecting a USB to my personal laptop and were given password protection, which only I have access to. Each of the 10 video interviews were conducted October 2021 through the 1st week of January 2022.

On the 9th interview conducted, at the very end of the interview, the participant stated that she was 17 years of age when her report was made. I clarified that she was not an adult at the time of her report. She stated that she was “practically an adult” and considered that she met criteria for the participation because she was “practically an adult” when she reported. The video interview was near the conclusion, and I offered the RAINN organization as a contact for any emotional difficulty she experienced as a result of the interview, just as with each of the other participants. I notified both my committee chairperson and my second committee member by email that this participant did not meet the standard of “assaulted and reported as an adult.” Both committee members provided recommendation that this participants data are not included in the data analysis as she did not meet criteria approved by IRB. This participant’s data were subsequently not used in this study.

Data Analysis

After data collection was completed, I began data analysis using Clark and Braun's (2014) six step process for thematic analysis, including becoming familiar with the data, develop initial codes, identify themes, review, and further define the themes with supporting data, and finally interpret what the themes mean. My data analysis journey began with listening to each of the audio recorded interviews and making notes within a few days of the initial interview. Next, I personally transcribed the interviews and created a verbatim written record of the interview. Originally, I had thought that I would send the audio recordings to a transcription service but typing each of the transcripts helped me relive the interview and focus on the actual words and phrases used by the participants. I sent the completed transcript to each of the participants and asked them to review the transcript to identify any errors or additional comments they had about the interview questions. I received one response with additional clarifications and three additional responses that they received and reviewed the transcript but had no further comments to offer. I did not receive a response from the other five participants. Participating in the interviews and taking notes in vivo, listening to the audio files of the participants, and transcribing the interviews helped me become immersed in the data creating a familiarity.

After this first step of data analysis was completed, I produced a set of codes and possible themes based on my overall impressions of the data. To do this, I reviewed my notes taken during the interview and skimmed through the transcripts I generated from the audio files and reviewed notes I had made on the transcripts of each of the interviews.

Table 2 shown below demonstrates the initial codes and subsequent themes generated.

The purpose of the study was to describe and interpret the experiences of sexual assault survivors when reporting to law enforcement and the codes and themes identified relay this information about their experiences.

*Table 2**Initial Codes and Themes Generated from Review of the Data*

Theme 1: Participation Important

- Need To be heard
- Creating change for other victims
- Telling the whole experience
- Re-traumatized by system

Themes 2: Negative Reporting Process

- Harsh environment/ No safety
- Interrogation vs. interview by police
- Feeling responsible for poor case
- Believing gender of officer to blame
- Rape Myth Barriers

Theme 3: More Understanding and Training Needed

- Belief there was lack of understanding
- Belief that this as a specialty is necessary
- Belief no understanding of trauma reactions
- No justice

Theme 4: Consequences of Assault

- Living with lack of safety
- Lack of family/friend help
- Lack of trust in others
- Isolation/Post-trauma life

Theme 5: Consequences of Reporting

- Re-traumatization/Shamed
- Let down by system
- My fault
- Accused of other motives
- Barrier to safety and justice instead of pathway

Theme 6: Resilience

- Telling Story
 - Expressing experience
 - Volunteerism
 - Activism
 - Validation
-

After the initial codes and themes were identified, I reviewed the data even more closely. Question by question, using different highlighter colors, I reviewed the transcripts. I used a yellow highlighter to identify within the transcript my first question and meaningful words and phrases the participant used in responding to the Question 1. Then using a blue highlighter, followed the same process with Question 2. I followed this process with different color highlighters for each of the questions asked from the Interview Guide (Appendix C). At the end of this process there were six themes identified in the data: participation important, negative interview process, more understanding and training needed, consequences of the assault, consequences of reporting, and resilience.

Evidence of Trustworthiness

Trustworthiness in qualitative research is a standard that assures the researcher has followed specific and reliable methodology and ethical standards. Lincoln and Guba (1985) describe trustworthiness in qualitative research as research that is credible, transferable, dependable, and confirmable. In this section, I will demonstrate how I applied Lincoln and Guba's (1985) standards of trustworthy research to this study.

Credibility

Cohen and Crabtree (2006) define credibility as when the findings of a research study are truthful. To achieve credibility, I utilized prolonged engagement with the research and data, reflexivity, and member checking. I had a prolonged engagement with both the research and data as I completed an exhaustive literature review of what other researchers have identified as potential elements of understanding of sexual assault, law

enforcement reporting experiences of survivors of sexual assault, and the potential consequences of both that survivors experience. This was done prior to doing my study and gave me context as to what questions I developed for the interview guide and for what I may learn from the participants. Additionally, I work professionally as a sexual assault advocate and have witnessed and participated in hundreds of reporting experiences of survivors of sexual assault. This also gave me context for this study. My prolonged engagement was also achieved as I listened to the audio recordings several times, typed the transcripts of the participant interviews word-by-word, and have read the transcripts several times in entirety. The prolonged engagement with both the research and the data produced from the interviews has improved my ability to represent truthfully the analysis of the data.

I approached the data collection and analysis with reflexivity. Reflexivity is the acknowledgement and identification that the researcher influences the collection of the data and how the data are analyzed (MacBeth, 2001). As I have had prolonged exposure to research about sexual assault reporting and professionally with reporting survivors of violence, I ran the risk of influencing the participants and the analysis of the data in a biased fashion. To improve my reflexivity, I based my research question to be neutral as this is a descriptive interpretive study. My research question is focused on collecting a description. My interview guide was based on current, relevant literature and the gap in current literature. As I received data from the participants, I remained warm but neutral to their responses, recorded their responses accurately, and checked their responses. I also

analyzed the breadth of their responses, whether the responses were what I expected to hear or if they or different.

I also used member checking in this study. After I completed the transcripts, with permission of the participants, I emailed a copy of the transcript to them. I encouraged each participant to review the transcript if they wanted to and write any corrections or additions to their comments and email them back to me. While most of the participants acknowledged the email, only one participant had any significant additional comments and a few minor fill-ins for phrases or words that I had transcribed “inaudible”, which I have also included in the data analysis. This process has also increased the credibility of the data and the subsequent analysis.

Transferability

Transferability is the likelihood that this study could be redone with other similar participants and yield similar results (Cohen and Crabtree, 2006). In order to improve transferability of the study I had specific criteria for participant qualification. The criteria were that participants had experienced a sexual assault as an adult and subsequently reported this assault to law enforcement. Additionally, participants needed to identify as female and believe that participating in the study would not cause harm to them. Participation in the study was voluntary and likely produced a group of individuals who had something of value to share about their experience. One interviewed participant disclosed late in the interview that she was assaulted and reported this assault before she was 18 years of age. This participant’s data was not included in the analysis. Because the sample used in this study was homogenous to these criteria, transferability is increased.

Additionally, the interview guide included questions that elicited a rich description from the participants about their sexual assault reporting experiences. This contextualized description contributed to my ability to interpret the data and also increases the transferability to other studies that would yield similar results.

Dependability

Dependability in research methodology means that the study results can be reproduced by other researchers (Cohen & Crabtree, 2006). The procedures and ethical standards of this study were clearly delineated in Chapter Three of this study. I have also kept an audit trail of my data analysis, including the steps I took to interview participants, code the data, and report the results. Therefore, another researcher would like be able to conduct a similar study and reproduce the data analysis and results.

Confirmability

Confirmability is established when the research provides a truthful description that is not altered by the researcher's biases (Cohen & Crabtree, 2006). My prolonged exposure to both research and my own professional experiences create a bias about my beliefs and influence how I understand the issue of the reporting experiences of sexual assault survivors. Therefore, I resisted the urge when interviewing participants in providing my own professional experiences and I asked the participants follow-up questions to gain accuracy and clarity about the participants data. Additionally, I utilized member checking and offered the participants the ability to add to their comments if anything was mis-represented. While it is impossible to eliminate bias, I am aware that many of the participants' experiences align with things I have witnessed professionally.

Therefore, when analyzing the data, I was sure to rely only on the data provided. To interpret the data, I used the participants words, directly from the transcripts, to develop codes and in the development of themes. Codes and themes were not pre-determined based on personal experiences or the literature. However, the results were representative of what was found in the literature but are offered with richer, contextualized expressions provided by the participants.

Results

The purpose of this study was to describe and interpret the law enforcement reporting experiences of sexual assault survivors. This study was approved by Walden's University's IRB and subsequently nine participants were identified and interviewed using the interview guide (Appendix C). One participant was not included in the data analysis as she did not meet criteria for inclusion in the study. The participant excluded was asked about whether she met criteria and was an adult when assaulted and when she reported and she responded affirmatively. Near the end of the interview, she commented on only being about 17 years old when these events took place. I believe there was some confusion in the word "adult" upon screening for participation. In subsequent screening, I used the phrase, "at least 18 years old when assaulted and when reported" to avoid this from occurring again. All interviews took place on Doxyme, a HIPPA encrypted video conferencing site that does not require users to download any programming. While other video conferencing programs were offered each of the participants chose Doxyme. The interviews took place at a time and day the participant chose. The interviews last between 35 minutes and 100 minutes. On average, interviews were approximately an hour long.

While two of the participants were slightly tearful during the interviews, no one displayed or reported any distress during their interview. At the conclusion of the interview, I encouraged participants to reach out to RAINN for support if they experienced any distress and provided the RAINN contact number.

During the analysis of the data, I realized that the interviews were not linear in fashion. While I followed the order of the interview guide (Appendix C), each of the participants within the beginning half of the interview spontaneously told me about the circumstances surrounding their assault and reporting experience. This typically occurred during or just after the second question was asked. It was as if the participants wanted to answer the questions but had a larger desire to tell their story first. What I have grown to understand is that for the participants, answering questions about elements of their reporting experience without explaining the context was not safe for them. Most stated something to the effect of, “well let me explain what happened first,” or “this won’t make sense unless I explain further.”

The interview sessions were not linear in other ways as well. Often, I would ask a question and the participant would answer but would go back to previous questions to clarify or explain something further or provide an answer to a future question. This non-linear process that occurred in every interview is very similar to one of the impacts that occur due to post trauma brain influences and is seen during law enforcement reporting often. While the interviews I conducted were minimally 3 years prior to the interview it was almost like the same impact occurred as I was asking questions. Between this possible influence and the psychological drive to understand, by telling their story in full,

none of the nine interviews being addressed in this analysis occurred in a straight-forward linear fashion and responses to questions did not solely fall under each question.

Due to these occurrences, which are important to document, I will cover the results by the eventual themes that I chose, based on the codes that I identified. There were six themes found in my analysis of the participant interviews. They are participation important, negative reporting process, more understanding and training needed, consequences of assault, consequences of reporting, and resilience. As I describe each of the themes, actual data and the interpretation I derived from the data will be discussed.

Theme 1: Participation Important

The first type of codes that I started to recognize in the data was a myriad of reasons the participant chose to participate in the study. Several codes were identified under the theme of Participation Important. They need to be heard, creating change for other victims, telling the whole experience, re-traumatized by system. In question two on the interview guide I asked each of the participants why they wanted to participate in the study. This question was included so the participant could relay their own reasons, without any assuming from me during data analysis. While Question Two from the Interview Guide was a specific place this was answered, many of the participants reiterated these answers throughout the interview process. Two sub-themes were identified in this theme.

Subtheme 1.1 Part of my recovery and resilience. This first subtheme identified was that the participants viewed their participation within the study as helping themselves in their healing and recovery, both from the sexual assault and from the negative

reporting experience. Several participants found that speaking about their story is part of how they overcome shame and receive validation about what they experience when they reached out for help from law enforcement. The phrase, “telling my story” was recurrent throughout the interviews and seemed to have an important meaning for the participants, as if it was part of their own process of coping and seemed to be related to resilience in the participants.

P2: “I also think its helpful to be able to like, tell my story and I think just, I don’t know, I feel like it’s helpful to sort of go on record and be like, this is a thing that happened to me.”

P7: “I think it is important to know how police officers treat assault victims... and it would be interesting to see. My experience wasn’t the best. So, it would be interesting to see if other people have positive experiences. It might change my view a little bit too...”

Subtheme 1.2 Helping other survivors. Another subtheme identified was in the hope for helping other survivors. Many of the participants shared a belief that in sharing their story the experience of law enforcement reporting could be changed for other survivors of sexual violence. Being part of change and helping others was important to most of the participants.

P6: “I’m trying to use my experience to help as many people as I can.”

P2: “I think I don’t precisely know how to solve it but I do think that right now even getting clear attention on it and sort of what the problems are. Like framing

it, like what are the big problems here because I don't think the general public is aware because it's something that is so stigmatized to talk about.”

Theme 2: Negative Reporting Process

The second theme identified within the data was Negative Reporting Process. All the participants identified that their reporting process was in complete a negative experience for them. A few participants had brief comments on positive aspects of the reporting process but in general identified the reporting process as negative. Several codes were identified during analysis that fell under this theme, they were: harsh environment/no safety, interrogation vs. interview by police, feeling responsible for poor case, believing gender of officer to blame, and rape myth barriers. Environmental factors and the experience, gender, and attitude of the law enforcement officers were the main elements identified as contributing factors influencing the negative reporting experience.

Subtheme 2.1 The 'where' matters. While the environments may be different in which they made their report, every participant reported that at least one environmental were adverse. The environment the participant was interviewed in clearly impacted their experience. One participant shared that she made her initial police report in the 'back of a police car, where criminals sit' and she 'could only see the back of the law enforcement officers heads' throughout her report. Another participant shared that she had to 'meet an officer in the parking lot of Walmart,' affording her no privacy. Other participants gave their initial reports in a hospital room, one only clothed in a hospital gown while two officers interviewed her. Even when participants were interviewed at a law enforcement

agency, a traditional interrogation room made the participant feel poorly about their experience.

P7: “And we were basically in an interrogation room, and we had to fill out this form.”

P4: “I don’t even remember what they (law enforcement officers) looked like cause I sat in the back of the car, looking at the back of their heads the whole time.”

Another participant offered this, when asked about how the reporting experience could have been better.

P10: “I was shivering, like maybe a blanket would have been nice. Maybe something warm to drink. It was just very cold and uncomfortable, so I would say the atmosphere, if the atmosphere was a little more warm. Not so sterile. Like business-ee. It would have made me feel a little bit more comfortable.

Subtheme 2.2 The ‘how’ matters. A recurrent subtheme throughout the participants interviews was that they were often approached with skepticism, a lack of understanding, and with doubt about the veracity of their statements and motives. This subtheme was perhaps the most consistent shared experience between the participants. Several of the participants made a delayed report about their sexual assault-meaning it was days to months after the assault. This led to what was believed by the participants as skepticism about why they were reporting and if their reports were motivated by some other desire than help-seeking behavior by the participant. Several participants stated over and over that they were ‘not understood.’ In the participants experience, many of the law

enforcement officers were not clear on the legal definition of what is required for a sexual assault offense.

P2: “And he’s (law enforcement officer) like, ‘listen, the prosecutor’s office isn’t going to take this because you were drunk and he didn’t have a weapon, so you know, this isn’t going to get prosecuted.’”

P7: “I don’t remember all the questions, but I do remember one, it said, “did you say no?” And I didn’t. I told the police no, I didn’t say no and they told me it was my fault.”

P3: “When they (law enforcement) are dealing with someone, they kind of victim blame. Victim blame and shame. The first, when I went to the police, he’s like, ‘you showed up, you must have wanted it.’ No, I didn’t. Just because I showed up doesn’t mean that I wanted this done to me.”

Subtheme 2.3 The ‘who’ matters. A significant finding within the study was that the participants overwhelmingly believed that the gender of the law enforcement officer impacted how they experienced. All of the participants had male officers for the initial reports, except for one participant who had a female and male law enforcement respond to the hospital where she provided the initial report. All participants expressed feeling like a male officer ‘cannot know’ or ‘understand’ their experience. A few participants had female detectives that followed up with them later and believe their interactions were better because there was a female law enforcement officer involved.

P1: “First, I feel like if it would have been a woman, she would have understood my pain.”

P7: “These were all men and these men who were probably in their mid to late 40s. And they were like part of the good boy’s club. And of course, if there had been women doing the interviewing, that might have made all the difference in the world.”

P8: “Call somebody in if they’re a woman officer. I mean, that would make the biggest difference.”

Most of the participants described many parts of their experiences they deemed negative. On the converse within the interviews all the participants offered suggestions on what elements would have made their reporting experience more tolerable. Most of these suggestions were about creating a better, warmer interview space and process, having female officers, asking questions in a more trauma-informed manner, and having better trained officers that understood more about sexual assault dynamics and trauma responses. For all but one participant, a great deal of time during the interview was spent in their description of the adverse reporting experiences, detailing carefully what went wrong within the reporting process. Suggestions about what needs to change also warranted a great deal of time during each of the interviews.

Theme 3: More Understanding and Training Needed

The third theme was identified as More Understanding and Training Needed. This theme was identified with the occurrence of the codes that emerged from various beliefs about the reporting process and how the reporting process could be improved. The participants identified beliefs that there was a general lack of understanding from officers, that this type of law enforcement response should be a specialty or provided by

pecially trained officers, that responding officers had no understanding of trauma reactions, and that they received no justice in their cases. All nine participants responded with examples of how the report taking officers had a lack of understanding, not only about the dynamics of sexual assault but also demonstrated a lack of understanding about how the sexual assault affected them individually.

P1: “Something that really pissed me off, because it felt like they were already saying that was me who was a whore and me who was throwing myself onto him.”

P8: “I think we need more training for officers, to be actually trained, in mental health, because it’s a mental health thing too, that victims go through. I mean it’s going to affect them mentally, physically, emotionally for a very long time.”

With these two examples, provided above, P1 a better trained officer would have understood her pain and P8 shared that officers that she encountered did not understand the impact that sexual assault had on her and likely others. Additionally, all but one of the participants who reported their sexual assault had their cases dropped within the system and they received no justice in their case. One participant did have charges successfully pressed on the person who sexually assaulted her, and her perpetrator was found guilty but was later exonerated in the appeal process. No justice in their cases started with the reporting process being flawed and difficult to tolerate.

Theme 4: Consequences of Sexual Assault

It was clear throughout the interviews of the participants they each recognized that there were consequences from the sexual assault that could not have been mitigated by officers. Many of the participants wished that the officers understood and that others in their lives understood that experiencing sexual assault was harmful to them as individuals. The fourth theme of Consequences of Sexual Assault was derived from several codes throughout the interviews that demonstrated basic harm that was experienced. These codes were: living with lack of safety, lack of family/friend help, lack of trust in others, and isolation/post trauma life. A consistent finding throughout the participant interviews is that each of the participants stopped the interview questions to tell the story of the sexual assault. They each wanted to explain what happened with their sexual assault before they would answer questions about their reporting experience. This seemed to be a way to state that there was harm first caused by the experience of sexual assault experience before the law enforcement reporting experience. Table 3 lists the negative effects identified by the participants as resulting from the experience of sexual assault. The identifiers that are listed in Table 3 are descriptions provided by the participants.

Subtheme 4.1 Mental health Impact. Each participant described specific mental health impacts as a result of the sexual assault they experienced. These include post traumatic stress, anxiety, shame, sleeplessness, and fear.

Subtheme 4.2 Economical Impact. Each participant described specific economic impacts they experienced as a result of the sexual assault they experienced. These include

loss of employment, loss of productivity, loss of time/effort/attendance at work due to fear of perpetrator or mental health stress.

Subtheme 4.3 Relational Impact. Each participant described impacts to their relationships with others. These impacts range from loss of family support, isolation from others, loss of comfortability with being with males, and fear of males in public. These three subthemes identified are supported by current, relevant research about the losses of sexual assault survivors.

*Table 3**Participant Identification of Harmful Effects from Sexual Assault and Harmful Effects from Reporting*

Effects from Sexual Assault	Effects from Reporting
Fear	Fear of law enforcement
PTSD	Shame/blame for assault
Loss of family	Loss of confidence in self
Isolation	Feelings of guilt
Sleeplessness	Disappointment
Nightmares	Loss of dignity
Fear of others	Loss of sense of importance
Promiscuity	Lack of general safety
Loss of sexual comfort	Anger
Loss of employment	Loss of trust
Loss of income	Responsible for assault
Loss of housing	Re-traumatized
Anxiety	
Shame	
Fear of men/Fear of relationships	
Loss of identify	

Theme 5: Consequences of Reporting Process

Theme five was derived from adverse consequences the participants identified specifically from going through the reporting process. Codes within this theme were: re-traumatization/shame, let down by system, my fault, accused of other motives, and barrier to safety and justice instead of pathway. Specific effects experienced by the reporting process are listed in Table 3. As covered in other themes, participants believed they could reach out to a system for help and safety and instead felt like they received just as harsh of treatment as from their perpetrator. The harmful effects felt by the participants were consistent among them and were reiterated throughout the interviews. There was almost a sense of shock that was still present when recounting the reporting process and for many of the participants, the reporting process took place several years ago.

While some participants had apprehension about law enforcement before reporting, none of them anticipated to be met with doubt, accusations, and judgments about the nature of their report. Their experiences with law enforcement during the reporting process had specific and harmful impacts on their trust in systems, their general feeling of safety, and made them question their own value and identify.

Subtheme 5.1 Re-traumatization and further traumatization. This subtheme was identified by the rich descriptions provided by the participants about how the law enforcement reporting experience impacted them. Many described re-traumatization or a reinforcement of the fact that they were to blame for what they experienced, and they have would not be safe or protected.

P1 “The reporting process has even traumatized me more.”

“They should have not judged me.”

P7 “I was very independent before. Came back very dependent. And them telling me it was my fault, honestly, thinking it was my fault because if I had been stronger I could have gotten away.”

Subtheme 5.2 Change in belief of safety and importance. As stated earlier there was a sense of shock about the lack of support or acceptance by law enforcement when the participants made a police report. Subsequently, there were notable changes in personal beliefs about the participants sense of being able to trust law enforcement and their sense of importance to law enforcement, as women.

P5 “I needed more than just their word. I needed action. I needed follow-up.”

“It just wasn’t worth it. I regret reporting to anyone.”

P3 “I feel like I can’t trust the police. They don’t take you seriously...so, I don’t have faith in the police when it comes to stuff like this. I don’t. I don’t trust them.”

Theme 6: Resilience

The last theme identified in the data was resilience. The theoretical lens used in this study was resilience and understanding if resilience was achieved by survivors of sexual assault and understanding what the participants believed about how they developed resilience. While the participants were not asked about resilience or if they experienced resilience, I listened for evidence of resilience during the interviews. Several codes emerged from the data, which were: telling story, expressing experience,

volunteerism, activism, and validation. Spontaneously, throughout the interviews the participants expressed how they have emerged from the harmful effects of the sexual assault and the harmful effects of the reporting process. Each participant demonstrated resilience which is defined by Bonnano (2008) as the ability to maintain or return to good psychological functioning after a traumatic event. For some participants, resilience is still in process within their lives for others resilience has been achieved and surpassed.

Following are excerpts from each participant that demonstrate resilience.

Subtheme 6.1 Resilience through telling my story. All of the participants both described their experience of being sexually assault and described their reporting experience. For many of the participants, telling their story is part of how they are experiencing resilience.

P1 “I just wanted to air out my views and contribute some insight onto that topic. Being that I have experienced it and I just wanted to share my experience.

P8 “I wrote a book of poetry about the things I experienced.”

Subtheme 6.2 Resilience through moving forward. While each of the participants demonstrated resilience, just being able to move forward in their lives was how they thought of resilience. Being able to do things that others who may have not experienced the trauma of sexual assault or reporting were evident for each participant.

P2 “I’m getting married.”

P3 “I earned a bachelor’s degree and I work as a teacher.”

P7 “It’s pretty much what encouraged me to get my Master’s in Social Work.”

Subtheme 6.3 Resilience through activism. An interesting finding that was evident in the participant descriptions was that many participants found activism as part of their recovery. Their activism often centered on the issue of sexual assault survivorship but, more specifically their activism centered on working with the systems that survivors of sexual assault rely on for reporting. Protecting other survivors who want to report their assault is of the utmost priority for some of the participants.

P2 “I remember slowly stepping into like, ‘how do I step into more of like, the activism/advocacy work in a way that maintains my mental health?’

P4 “I used to volunteer on a rape crisis line.”

P5 “I’ve talked with the military about their process of addressing the needs of sexual assault victims.”

P10 “So, we are working with tribal governments and agencies, so they can be more trauma informed.”

Stretched throughout the interviews were many declarations that indicate that each participant was in the process of or has achieved a level of resilience since experienced sexual assault and reporting their experience to law enforcement. I believe as a researcher writing about sexual assault reporting, looking through the lens of resilience, it is important that signs of resilience, shared by each participant should shine through, more than the harm caused by sexual violence and the harm caused by law enforcement inadequacies with officers who still believe rape myths, show through this study.

Summary

In this chapter, six themes were identified through data analysis and the words of the participants were documented that support those themes. The first theme of participation important represented that the participants had altruistic feelings about how participation could help them share their story and help change this experience for others. Two subthemes were identified, and they were that participation was part of their own recovery and that helping other survivors was important. The second theme of negative reporting experience demonstrated that overwhelmingly the participants in this study experienced adverse reporting experiences. Three subthemes were evident based on the descriptions of the participants. The 'where' or the environment the reporting took place in was important. Also, the 'how' and the 'who' was identified as significant for the participants. The environment, method of interviewing, and perhaps the gender of the report taking officer have a profound impact on reporting survivors. Additionally, the reporting process left the participants feeling responsible for presenting a poor case to the law enforcement and they believed that many of the systems and officers encountered believed in rape myths.

Theme three was more understanding and training is needed. Every participant believed there was a lack of empathy and understanding they felt from their reporting process and that training was needed to improve these experiences for others. Themes four and five demonstrated the harm that the participants incurred by experiencing sexual assault and harms incurred by the reporting process they experienced. Subthemes identified as harm created by the sexual assault experience were in mental health,

economic losses, and relational losses. These harms included mental health difficulties, loss of safety, living in fear, loss of trust in other individuals, men in particular, and loss of trust in law enforcement, among other harmful effects. In particular, the participants believed there were specific harms created solely by the reporting process. Subthemes identified here were re-traumatization and further traumatization and harm to their belief about safety and importance. Lastly, a theme of resilience was identified as each of the participants have experienced a range of resilience. Clues to this resilience were the fact that participants were in or had been in treatment, they had a desire to share their story, and many through education, volunteerism, and activism, were working to support survivors and change the public understanding and dialogue about sexual violence. Three subthemes were identified within the theme of resilience, and they were telling their story, moving forward, and activism.

The next chapter will focus on further the interpretations of major findings, limitations faced in this study, and recommendations for social change and implications of the findings in this study.

Chapter 5: Discussion, Conclusions, and Recommendations

Introduction

The purpose of this study was to describe and interpret the experiences of sexual assault survivors who reported their assault to law enforcement. More specifically, I wanted to gain a deeper understanding of the reporting experience and gain insight into what seemed most relevant about the reporting experience, to the participant. These descriptions from the participants included a description of their sexual assault circumstances, how they came to be in contact with the law enforcement system, what they experienced (sights, sounds, types of questions, type of treatment by law enforcement officers, etc.) during this reporting experience, and their thoughts and feelings about the reporting experience and how these thoughts and feelings have changed since the time of reporting. This study was important to conduct, as there is sparse recent research about sexual assault law enforcement reporting experiences.

There were six themes and several sub-themes that were identified in data analysis. The themes were participation important, negative reporting process, more training and understanding needed, consequences of sexual assault, consequences of the reporting process, and resilience. In this chapter, I will offer my interpretation of the themes or key findings of the study. Additionally, the limitations of this study, recommendations for future research, and implications of this study will be reviewed.

Interpretation of Findings

This study was completed using an interpretive descriptive design. In Chapter 4, a rich description of the participants' data was provided. Next is provided the interpretation

of the results. Each of the six themes will be reviewed and discussed in relation to current relevant research supporting the interpretations.

Participation Important

The first theme that is a notable finding within the data is that participation in this study was important to the participants. The participation was important due to the ‘telling of their story,’ which represented some type of validation of their experience. Additionally, many of the participants highlighted that the ‘telling’ was important to be part of social change and what happens to other reporting survivors of sexual assault. The aim of the study was to highlight and understand the reporting experience. While every participant wanted to tell their story of sexual assault, all the participants included in their story the reporting experience as if it was just as important to share as the actual sexual assault experience. My interpretation is that the participants saw their reporting experience as part of the total experience and felt compelled to share it as it is part of their resilience. This possibly creates validation of the experience, and may lead towards social change, which is supported by other research.

This finding supports similar findings by other researchers. Kirkner et al. (2019) found that when sexual assault survivors who participated in a survey about the effects of research participation were asked about how the research impacted them, 92% of respondents believed that their participation had a positive impact on them. Additionally, the respondents felt like participating in research led to higher levels of insight about their own experience of sexual assault (Kirkner et al., 2019). An earlier meta-analysis study by Jaffe et al. (2015) found that trauma survivors viewed research participation as a positive

event in their recovery, although these participants were not solely sexual assault survivors.

Additionally, all of the participants explained that they saw telling their story as important and wanted to change the experience of reporting to law enforcement for others, as their experience harmed them. There has been limited research about sexual assault survivors and seeking social justice or social change; however, one recent study supports the notion that activism or social change is part of healing and developing resilience. Swanson and Szymanski (2020) found that sexual assault survivors who become involved in social change efforts benefitted higher post-trauma growth and more positive mental health functioning. Positive mental health functioning after trauma is the definition Bonnano (2008) identified as resilience. A survivor's choice to tell her story and get involved in social change efforts leads to greater resilience. This was true for the participants in this study and is supported by other researchers' findings.

Negative Reporting Process

The participants reported negative law enforcement reporting experiences. A few of the participants could recall certain elements of the reporting process that were not unpleasant, but overall recounted elements that caused them to have continued fear, feel shamed, feel under suspicion, feel incompetent in reporting, or they were faced with a law enforcement system that did not understand the laws about sexual assault, investigative issues, or the elements that cause sexual assault to occur. In examining the environmental factors that the participants interviews were conducted within, a key finding is that the negative reporting experience included the environmental factors of

their reporting experience. The participants had negative feelings about their recall of the environments they were interviewed in. There was description of interrogation rooms, parking lots, hospital examination rooms, and back of the police cars as the actual environment. The environment mattered to the participants.

Additionally, the method by which the participants were interviewed and the attitude of the responding law enforcement officer was often described as creating a negative feeling for them. Many responding law enforcement officers appeared to be distrusting of the participant and asked questions reflective of rape myths. Most participants had male responding officers, sometimes multiple male responders, and expressed beliefs that indicated this contributed to feelings of shame and lack of compassion and understanding about their experience of sexual assault. My interpretation of this finding is that the where, how, and who mattered to the participants and their resilience.

While the current study extends knowledge about negative reporting experiences of sexual assault survivors who report, other similar research supports the findings. Murphy-Oikonen et al. (2022) conducted a qualitative study with 23 sexual assault survivors who reported the sexual assault they experienced but were not believed by law enforcement. The researchers found similar descriptions of the environments the participants were interviewed in just as in this current study. Participants described being interviewed in hospital rooms, outside environments, and in the back of police cars and recounted these environments as detrimental to them in their reporting experience (Murphy-Oikonen et al., 2022). Additionally, their participants described interactions

with law enforcement that made them feel they were responsible for their attack, that they were not being truthful, and that the officers acted as though they believed rape myths.

The participants in this study also described feeling interrogated and intimidated by male responding officers. The results of the Murphy-Oikenon et al. study mirror the results of my current study. For the participants of both studies, the environmental factors mattered to their overall reporting experience and contributed to negative feelings and outcomes in their cases.

Having negative social reactions to sexual assault reporting, including law enforcement reactions and response, has a negative effect on mental health and resilience after the experience of sexual assault (Dworkin et al., 2019). The participants of the current study expressed that the negative reporting process they experienced was harmful to them both at the time of the reporting and during their recovery from the sexual assault. Kahn et al. (2018) found that survivors of sexual violence reach out for justice and safety. This mirrors the descriptions of the participants in this study and why they decided to report. The participants in this study described feeling as though they needed protection from their perpetrator and deserved justice for themselves, or for their perpetrator to be held responsible for the crime they committed. Another research study also mirrored the participants description of what fears they had about reporting sexual violence to law enforcement. Youstin and Saddique (2019) identified in their research that survivors of sexual violence fear not being believed by law enforcement even before they report and have concern about their reports of sexual violence being minimized. My current study supports Youstin and Saddique's findings.

Lastly, my current study yielded results that indicate most of the participants felt their claim was treated as suspicious when they reported law enforcement officers, and they were thought to have ulterior motives or that what they experienced was not as detrimental to them as what they were reporting. This is supported in other recent literature in part as we see that other studies have identified that law enforcement officers have a high endorsement of rape myths, which include beliefs that sexual assault is falsely reported at high rates (Venema, 2018) and that experiencing sexual violence is similar to and minimized to resemble a 'bad sexual experience' (Shaw et al., 2017). While both recent studies measured law enforcement conduct and beliefs, it does match how the sexual assault survivor participants in this study felt they were met by their reporting law enforcement responders.

In addition, although there are no recent studies evaluating how the gender of the responding law enforcement officer was received by reporting survivors, this was also a key finding within my study. Participants almost unanimously felt their reporting experience or part of their reporting experience was negatively impacted by male officer response and was slightly improved when they had female law enforcement officer response. Murphy-Oikonen et al. (2022) found their participants, female sexual assault victims, who reported and did not feel believed, often noted in their interviews that male responding officers were less sensitive to them and treated them poorly.

These key findings within this study are significant in that they give us a description of the factors that contributed to having a negative reporting experience. Simply put, the 'where,' 'how,' and by 'who,' mattered to the participants in this study.

These identified factors could indicate how to change issues that keep reporting rates of sexual violence low and what survivors of sexual violence need when reporting the crime. As discussed above, these findings are further supported in additional research.

More Training and Understanding Needed

Another key finding is that the participants believed that more training specific to sexual assault for law enforcement officers would create a deeper understanding to the experience of sexual assault survivors. This is important, as the participants did not necessarily believe that law enforcement officers were bad, but rather not sufficiently trained. The participants' belief also mirrored what Venema et al. (2019) found, in that law enforcement officer are often poorly prepared or trained on rape myth culture, how to interview victims of sexual assault, and what reporting victims of sexual assault are seeking by making their report. This finding is a confirmatory finding of recent, peer-reviewed literature.

Consequences of Sexual Assault

While the consequences of experiencing sexual assault was not the focus of this study, the results of this study support much of what other researchers have identified regarding experiencing sexual assault. Sexual assault is harmful to a women's mental health (Dworkin et al., 2020; Guina et al., 2019), financial stability (Peterson et al., 2017), sense of safety (Kahn et al., 2018), and to their relationships with both individuals (Yuen et al., 2019) and within their community (Kahn et al., 2018). These widely accepted conclusions within the research and clinical communities were supported by this study.

Consequences of Reporting

Another key finding of this study was the identification of specific consequences of reporting sexual violence. The participants in this study described consequences specifically connected to their involvement with law enforcement and their reporting of the sexual assault. Participants in this study identified feeling re-traumatized by the reporting experience, a sense of disappointment about the interaction with law enforcement and that their case was not investigated or taken seriously, and a continued lack of safety they felt could have been restored by law enforcement officers or the law enforcement and justice systems. The participants often reported that these consequences specifically related to the reporting experience were long-lasting and impeded recovery, healing, and resilience from sexual assault. This finding is confirmed in recent literature, in that survivors are dissatisfied with the law enforcement reporting process and find it harmful (Anderson & Overby, 2020; Grandgenett et al., 2020).

While we understand and accept that sexual violence harms women, little has been studied to identify what influence the reporting process has on survivors of sexual assault. Murphy-Oikonen et al.'s (2022) similar recent study is the only other study found that described and interpreted the experiences of reporting sexual assault survivors. In their study, participants self-declared that they were not believed by law enforcement, which was part of the inclusion criteria. Similar to this current study under review, participants identified specific consequences resulting from the reporting process. In both studies, the participants identified re-traumatization, shame, feelings of responsibility for their victimization, social stigma, lack of sense of safety in their community, and loss of

justice. Continuing research to understand the specific consequences of the reporting process is paramount to compelling law enforcement agencies to consider the harm that can be caused by lack of training or lack of concern about the reporting processes sexual assault survivors experience.

Resilience

The last key finding of this study was that all of the participants have experienced resilience. Resilience was the theoretical backdrop for this study. Bonnano (2008) described resilience as the capacity to “psychologically maintain healthy function” after a traumatic experience. RT, developed through a compilation of the works of several resilience theorists, purports that there are likely risk and protective factors that influence who experiences resilience after trauma (Unger, 2013; van Brada, 2018; Werner, 1989) and that there are likely both internal and external factors that influence the process of resilience (Hirai et al, 2020; Jose & Novaco, 2015; Munoz et al., 2017). Specifically, Werner (1989) identified that resiliency was likely also impacted by ecological factors such as personality constructs, supportive relationships, and environmental supports. Unger (2013) further identified that resilience after trauma was a socio-ecological phenomenon that can be highly positively impacted by community connections and acceptance from others. Additionally, recent research informs us that resilience in sexual assault survivors may be mediated by interactions with both formal (law enforcement, justice system; Dworkin & Schumacher, 2015; Fornari & Labronici, 2018) and informal (family and friends) support systems (Lorenz et al., 2019).

The results of this study are that the participants each experienced eventual resilience as they collectively have moved forward with life events such as subsequent romantic and marital relationships, and moved forward with education and careers, or, even if minimally, have seen an improvement in their mental health functioning over time. For the participants in this study, resilience has been a process, not an event, and they are still working towards healthier personal wellness. Some of the participants are further along in achieving resilience. Sexual assault is a trauma unlike other types of traumas, that causes serious harm to an individual, and, at least for a time, causes a severe disruption in thinking, feeling, and living a normal life (Carey et al., 2018; Cataby et al., 2019; Dir et al., 2018; Dworkin et al., 2020). Many of the participants reported severe interruptions withing their functioning due to the experience of violence, and most reported serious interruptions in establishing resilience due to the lack of support, comfort, and safety they received from law enforcement they reported their assault to. Both the harmful effects of surviving sexual assault and the reporting process are supported by recent literature, as previously stated, but this study adds to the literature that in fact resilience in the sexually assaulted population is often influenced by the response of formal community supports, like law enforcement officers (Dworkin et al., 2019; James & Lee, 2015; Murphy-Oikonen, 2022). It is hoped that this small study, from the lens of resilience in the sexually assaulted population, will help to extend the knowledge and recognition that law enforcement response matters in the journey of resilience for sexual assault survivors.

Limitations of the Study

There were limitations to the study. Sexual assault reporting experiences as described by the participants were being recounted from a historical perspective which can impact the accuracy and exactness of specific details the participants remembered. Participants were describing experiences that were historical experiences with the range of five to 20 years prior to the interview. Although this study was focused on participants' experiences, rather than historical detail, the passing of time may have dulled some important memories. Additionally, sexual assault reporting experiences are also intimately connected to the primary trauma of the sexual assault. This was evidenced by each participant telling their story of the sexual assault before they described their reporting experience. This was the process in each of the nine interviews conducted even though I never asked about their sexual assault experience. The reporting description was so closely connected to the original trauma that there is the potential that the reporting experience was confounded with the feelings and thoughts of the primary trauma. However, none of the participants displayed distress during the interview process and identified with great distinction specific aspects of the reporting process and details about their thoughts and feelings about the reporting process specifically. While this is a possible limitation of research with any trauma survivor, it is unclear and unsubstantiated that this serves as an actual limitation in this study.

Self-selection was also a limitation of the study. Only nine interviews were included in this study. The notification of the study was seen by hundreds of likely eligible participants. Originally, I believed that it was more likely that only those that

experienced resilience since the reporting experience would be more likely to participate in the study. This appeared to be true but additionally, the participants that self-selected for inclusion in the study also had additional reasons for participation, including a desire to help other survivors of sexual assault reporting and to impact the law enforcement reporting process by revealing what they believed harmed them. There are likely many sexual assault survivors who had reporting experiences that were supportive, validating, and helpful in establishing safety after their assault. Self-selection may have been driven by those with particularly difficult and harmful reporting experiences.

Recommendations

There are several recommendations for further research that I have identified resultant to this study. First, more research should be conducted from an interpretive descriptive model on resilience in the sexually assaulted population. The interpretive descriptive design allows for thick and rich description by survivors, in their own words, from their unique and singular perspective. This research approach allows for the participant to tell their story in an individual and personalized way. Secondly, more research should be conducted about the specific outcomes that were related to the sexual assault reporting experience. The participants in this study were eager to tell their story about the sexual assault but additionally, they were eager to talk about how they were received and treated by the law enforcement community. This act, speaking out about the law enforcement response was seen as a personal form of activism and many of the participants in this study want to impact the sexual assault reporting experiences for other survivors of sexual violence-as it is that important for them. While there are likely many

reporting survivors of sexual violence that had good interactions with law enforcement, those that have not experienced good interactions were very willing to participate in the study and share their perspective.

There were several limitations of this study that may be avoided with additional research. First, this study was small and potentially through self-selection bias, only represented a small sector of participants that had negative experiences. Further study should include a broader representation of sexual assault victims who reported as to law enforcement, and this may better represent similarity or dissimilarity to the results of this study.

Lastly, in general, there is limited research on the phenomenon of sexual assault law enforcement reporting experience. There was only one other recent, peer-reviewed study that identified the environmental elements of survivors reporting experiences such as the physical space where the law enforcement interview took place, which contributed to how the participants felt during the interview. Additionally, how the participants were interviewed, which often felt like an interrogation and the approach and demeanor of the responding law enforcement officer. These elements are noteworthy and more research about these specific factors of sexual assault reporting could lead to very easy protocol changes that increase the level of sensitivity to this population. To understand low sexual assault reporting rates within the United States and the real harms caused by sexual assault reporting the focus of further research should reflect the actual experiences of sexual assault survivors reporting experiences.

Implications

There are some potential implications on social change and public policy that can be influenced by the results of this study. The data the participants shared is valuable and worthy of further study. This research extends the knowledge that we had already acquired within research community which told us that there were likely many factors that contribute to low sexual assault reporting rates in the United States. Specifically, the most valuable thing the participants of this study told us is that the ‘where,’ the ‘how,’ and the ‘who,’ mattered their law enforcement reporting experience. This study points future researchers into the direction of starting to gain a basic understanding on the reporting process as seen through the eyes of a victim entering the system.

In addition to being the impetus for other researchers to continue the process of understanding and identifying the needs of the sexually assaulted person who reports, this data, although limited, should inform law enforcement agencies, victim advocates, and other first responders that how victims of sexual assault are received and engaged with has serious implications to their well-being. One of the key takeaways from this study is that officers untrained in victim interviewing and they do not have appropriate space and time for victim interviews which results in victims not feeling understood or accepted, which harms the individual and the community. Based on this study, there are very small and simple things that law enforcement officers and other first responders can do to protect the investigative process and the person reporting a crime. These changes can be as little as having an appropriate interview room, approaching victims of sexual assault with belief before distrust, and learning about the basic dynamics of sexual assault and

false rape myths. The participants of this study were forthcoming about the perceived harm caused solely by the reporting process. Changes to the reporting process could have instilled their hope and sense of safety in their community. If sexual assault reporting rates, that are currently believed to be below 25%, are to increase, serious and profound changes to the reporting process should be made. Law enforcement officers need more training about sexual assault and how to support sexual assault survivors when they seek safety and justice.

Most importantly, I hope that social change can be inspired by this topic becoming a dialogue with sexual assault advocacy agencies and law enforcement agencies. While this study fills in the gap a bit more in understanding the sexual assault victims experience, I hope that law enforcement agencies and sexual assault advocates will initiate these types of conversations with victims in their communities so victims can share their own perspectives to create social change-as that is what many survivors of violence want to do as they achieve resilience-share their story.

Conclusion

The goal of this study was to describe and interpret the experiences of sexual assault victims when they reported the crime they experienced to law enforcement. There was a gap in the literature that provided victim descriptions and experiences. Through an exhaustive literature, I identified that victims of sexual assault often describe negative reporting experiences that were harmful to their mental health, physical safety, and justice. Additionally, I was able to identify through the literature review that sexual assault victimization is a trauma like no other type of trauma and victims often face a

culture that is driven by rape myths. Law enforcement officers are often poorly trained to encounter sexual violence survivors and have policy and practice that are often based on rape myths. There was definitely something more to learn about the victim's experience and what they experienced and needed during the reporting process that would have helped them.

Nine participants openly shared their experiences of reporting sexual assault to law enforcement officers. Through their rich and detailed description's themes were identified. These themes included: participation important, negative reporting process, more training and understanding needed, consequences of sexual assault, consequences of reporting, and resilience. The data the participants shared was individual, yet yielded similar experiences, thoughts, and feelings about their reporting experience. Through their words, I was able to find consistency in their experiences of reporting to law enforcement. The most important takeaways from this study was that victims of sexual assault, from different parts of the country, with differing reporting times spanning 20 years, were often met with disbelief, disrespect, and interviewed in styles which left them feeling unsafe and isolated.

While it would be easy to read this study and leave the burden of change to law enforcement agencies, however, law enforcement policies and practices are encased in rape myths, just like the culture in which they operate. A dialogue needs to begin about the damage that rape myths cause in our nation. Incredibly, even though rape myths have been disproven time and time again, they persist. Changing the public dialogue about rape myths will influence law enforcement agencies to change as well. Public dialogue

and advocacy about studies such as this one and studies from other researchers can create social change through individuals, institutions, and communities, especially if take the time to ask victims what would have made the reporting process better for them.

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Appendix A: Flyer to Recruit Participants

Study Seeks Female participants who reported sexual assault to law enforcement.

I am looking for participants willing to share their experience of reporting sexual assault to law enforcement. This study could help inform law enforcement, friends, and other allies about how to support someone who has experienced assault. For this study, you are invited to describe your experience in reporting and post-assault experiences.

This study is part of the doctoral study for Tracy L. Rainey, a Ph.D. student at Walden University.

About the study:

- A brief phone call to conduct screening which will take 20 minutes or less.
- One 60–90-minute live video interview that is only audio recorded.
- To protect your privacy, you will be assigned a number to be identified by.

Volunteers must meet these requirements:

- 22 years old or older
- Experienced a sexual assault as an adult and reported this assault to law enforcement.
- Attest that it has been at least 3 years since reporting the assault.
- Sign a consent form for participation and attest that you understand the risks of the study and how your identity will be kept confidential.
- Believe that participating in an interview about reporting experience will not cause any emotional harm.
- Willing to share reporting experience (**no questions will be asked or discussed regarding the sexual assault**).

To participate in the study contact me through email or by phone.

Email: or

Call:

*If you are interested in participating in this study, I strongly encourage you to consider whether describing your reporting experience will be distressing or harmful to your emotional well-being. If you feel the interview will be too distressing, I encourage you to not participate in the study. **Thank you for your consideration. Tracy L. Rainey***

Appendix B: Transcription Company Confidentiality Agreement

Confidentiality Agreement for Transcription Services Confidentiality Agreement

Transcriptionist I, _____ transcriptionist, agree to maintain full confidentiality in regards to any and all audiotapes and documentations received from (researcher's name) related to his/her research study on the researcher study titled (name of research study). Furthermore, I agree: 1. To hold in strictest confidence the identification of any individual that may be inadvertently revealed during the transcription of audio-taped interviews, or in any associated documents. 2. To not make copies of any digital audio or computerized titles of the transcribed interviews texts, unless specifically requested to do so by the researcher, (Tracy L. Rainey). 3. To store all study-related audio and materials in a safe, secure location as long as they are in my possession. 4. To return all audio files and study-related materials to (Tracy L. Rainey) in a complete and timely manner. 5. To delete all electronic files containing study-related documents from my computer hard drive and any back-up devices. I am aware that I can be held legally responsible for any breach of this confidentiality agreement, and for any harm incurred by individuals if I disclose identifiable information contained in the audiotapes and/or files to which I will have access. Transcriber's name (printed) _____ Transcriber's signature _____ Date _____

Appendix C: Interview Guide

Date: _____

Time Interview Started: _____

Time Interview Ended: _____

1) Please tell me a little about yourself.

2) What prompted you to participate in this study?

3) How were you thinking at the time you of your report? What were you considering at the time you decided to make the police report?

4) How would you describe the interaction with law enforcement at the time of the report?

Potential Follow-Up Questions:

a) How did the officers seem to you as far as their experience and/or knowledge.

b) How would this experience have been different if they had a higher level of knowledge or experience? Does this affect how you feel now?

5) Now that time has gone by since you've made the report how do you think about your decision to report?

Potential Follow-up Question:

a) Would you have changed anything about the reporting experience you had with the law enforcement officer?

6) In the years since reporting the sexual assault to law enforcement, how do you think the reporting experience has impacted you?

Potential Follow-up Questions:

a) What feedback from others about your decision to report the sexual assault?

If so, what was that feedback?

b) What actions could law enforcement taken that would have resulted in changing the reporting experience for you?
