# Rape Trauma Syndrome

King County Sexual Assault Resource Center

Rape Trauma Syndrome is the group of reactions – emotional, physical, and behavioral – reported by victims of attempted or completed rape. Two therapists, Ann Burgess and Lynda Holmstrom, coined this phrase to describe the series of symptoms that are experienced by victims. They separated the clusters of reactions into two stages: an acute, immediate phase of disruption and disorganization; and a long-term process of reorganization. The length of each phase can vary, and people may move back and forth between stages. As practitioners have worked with survivors, they began to see another phase that has come to be known as the "underground" phase.

## Acute Stage

**Emotional Reactions:**

Victims describe a wide range of emotions immediately following a rape. The physical and emotional impact of the incident may be so intense that the victim feels shock and disbelief. When the shock and disbelief begin to dissipate, the primary feeling is fear – fear of physical injury, mutilation, and death. Other feelings range from humiliation, degradation, guilt, shame, and embarrassment to self-blame, anger and revenge. The range of strong feelings can result in wide mood swings.

Victims vary in the style of expressing their feelings. In the expressed style, the victim may demonstrate feelings by being restless, becoming visibly tense, or crying or sobbing when describing specific details of the assault. In the controlled style, the feelings of the victim may be masked or hidden; they may exhibit a calm, composed, or subdued effect.

**Physical Reactions:**

Many victims report a general feeling of soreness all over their body. Others specify the body area that was the focus of the assailant's force such as throat, chest, arms, or legs. Victims also report physical symptoms specific to the area of the body that was the focus of the sexual assault.

Victims forced to have oral sex may describe irritation to the mouth and throat. Victims forced to have vaginal sex may have vaginal discharge, itching, a burning sensation during urination, and generalized pain. Those forced to have anal sex may report rectal pain and bleeding in the days immediately following the rape.

Rape victims may have difficulty with disorganized sleep patterns. Some cannot fall asleep or if they do, may wake up during the night and be unable to fall back asleep. Victims who have been attacked while sleeping may awake each evening at the time the assault took place. It is not uncommon for victims to scream out in their sleep. Eating pattern disturbances are sometimes experienced by rape victims. Some may have a marked decrease in appetite following the rape. They may have stomach pains or food may not taste right. Frequently victims feel nauseated just thinking of the assault. It is important to determine whether the symptom of nausea is related to the emotional reaction following the rape or is, for women, a reaction to anti-pregnancy medication.

**Behavioral Reactions:**

As people do in other crisis situations, victims of sexual assault may react with fear and confusion. They may have difficulty in problem solving and in mobilizing the strength to accomplish daily tasks. The ability to absorb new information is greatly impaired. People may also make a quick change in living arrangements or may stay in various places, or change phone numbers.

The acute phase usually lasts from a few days to a few weeks. Victims are extremely vulnerable emotionally during this stage and the immediate response of those around them is very important.

## Underground Stage

The underground stage is a time period during which victims attempt to return to their lives as if nothing had happened. During this period, they may try to block thoughts of the assault from their minds. They may not want to talk about the incident or any of the related issues. They just want to forget about it. This period may be characterized by difficulty in concentrating and some depression. Some people may remain in this underground stage for years and may appear "over it," despite the fact that the emotional issues are not resolved. Avoidance is the common theme of this stage. The victim deliberately tries to avoid any reminders of the rape.

## Reorganization Stage

The long-term process of reorganization often begins with a return to emotional turmoil. The event which triggers the new phase of turmoil may be seeing the assailant again, the arrival of a subpoena, a dream or nightmare, or a certain smell. If an individual has past experiences of victimization (such as childhood sexual assault), this stage can be complicated by feelings connected to those events. It can be extremely frightening to people in this stage to once again find themselves in emotional pain.

Fear and phobias may develop. They may be related specifically to the appearance of the assailant or to the circumstances of the attack. Sometimes phobias can be much more generalized. Eating and sleeping disturbances can re- emerge, as can dreams and nightmares. Violent fantasies of revenge may also arise.

Despite the great difficulties, these reactions are a normal part of the process of integrating the experience and of reorganizing a life, which has been seriously disrupted.

There are a number of factors that influence the reorganization/recovery process. Some important factors are the nature of the assault, and the developmental stage, social network, and cultural background of the victim.

Each sexual assault is different. The nature of the act, the relationship with the offender, the type and amount of force used, and the circumstances of the assault all influence the impact of an assault on the person victimized.

When the assault is committed by a stranger, fear seems to be the most difficult emotion to manage for many people. Because the randomness of the attack creates an overwhelming sense of vulnerability, those victimized may move, change jobs, or otherwise alter their lifestyle in an attempt to feel safe.

More commonly, assaults are committed by someone the victim knows and trusts. In this kind of assault, feelings of self-blame and guilt can be overwhelming.

## Development Stage

The victim's developmental stage is important in understanding both the meaning of the sexual assault to the victim and his or her style of expressing feelings. It may also determine the level of involvement of 'significant others' in the victim's recovery. The meaning of an assault to a victim cannot be assumed. A young child, for example, may place little meaning on the sexual context of the assault, but much on harm and betrayal. For an older child or an adult, issues of sexuality may be the most difficult part of recovery/reorganization. Development may also influence other areas of impact. For instance, issues of trust, power, control, and independence may arise to a greater or lesser degree depending on a victim's developmental stage.

To an adolescent, the reaction of 'significant others,' both peers and parents, is of great concern. Their increased need for support because of the assault is often in conflict with their developmental need for independence. Children and teens may experience increased restrictions by parents in the aftermath of an assault. Sometimes older victims of assault lose their independence because grown children intervene to end an independent living situation.

Developmental stage also brings many variations to the "expressed" vs. "controlled" emotional styles mentioned earlier. For example, adolescents frequently respond to stress by giggling and laughing at "inappropriate" times. This response can be misleading to adults who equate emotional style with degree of trauma.

The reaction of family, friends, and institutions to a victim is clearly important to the recovery process. A family may react in either a supportive or hurtful manner. When those close to a victim respond with positive support, one potential problem is their tendency to overprotect. When a victim's disclosure is disbelieved or ignored, the healing process can be severely impeded. When significant others are unable or unwilling to be supportive, victims need help to find support and validation elsewhere.

In all cases, a nurturing response to a victim's disclosure or report of sexual assault can facilitate healing and help

Finally, a victim's cultural background also can influence the recovery process. While sexual assault impacts all victims in similar areas – such as sexuality, trust, interpersonal relationships, and self-concept – individuals' specific struggles in these areas may vary. For example, imagine that a woman whose cultural or family background places heavy emphasis on virginity is raped. Her struggles with the issue of sexuality, and how it connects to her feelings of self-worth, will be different from those of a woman for whom virginity is not important.

Cultural background can also influence the roles that community and the social service system play in an individual's recovery. Some people, for instance, particularly people of color, may feel reluctant to ask for help from predominantly white social service agencies, and turn instead to sources of support within their own community.

## Typical Statements from Victims Experiencing Rape Trauma Syndrome

### Crisis/Disorganization Phase

- I'm going crazy.
- I can't remember what I wanted to do next.
- I want to drink all the time, just to forget about it.
- I can't get to work on time or meet simple deadlines. I'm having nightmares and flashbacks all the time. I can't eat or sleep.
- I'll never trust anyone again. All I want to do is eat.
- All I want to do is sleep.
- Everything is just fine. Everyone is making such a big deal about this

### Reorganization Phase

- I'll feel safer with an unlisted telephone number.
- I am going to move. It will be safer and I will feel more secure. I dreamed that I stood up to him, said no, and he stopped.
- I don't know why God let this happen to me, but He gives me strength to cope. I am still fearful of having sex. My partner just doesn't understand.
- I keep having the same nightmare over and over again. He tries to attack me and this time I just blow him away.

## The Burgess and Holmstrom Study on Recovery

*"You're never the same after it. You never return to that peace of mind of being safe... certain parts never go away... it's very hard to deal with."*

-Rape Victim, age 22, at a re-interview

*"It was the worst thing I have ever gone through. I wouldn't wish it on my worst enemy. [The counselor asked, "How about your father's death?"] I remember my father and I remember the good and happy times. There are good memories from that but this just has horrors. Nothing can top this..."*

-Rape Victim, age unknown, at a re-interview[1]

In 1972-73, Burgess and Holmstrom documented the amount of trauma associated with an assault directly following and a short time after the assault took place. In *Rape: Crisis and Recovery* they documented victims' views four to six years after the assault by asking victims to rank their perception of the effect it had on them. The ranking was done numerically with the number ten suggesting the rape had had a major impact.

"The highest number of victims – 40 percent – ranked the rape as the most upsetting event in their lives, giving the rape a ranking of ten. One-third of these victims reported that this was the worst thing that had occurred in their lives.

Other victims stated it was the most serious crises in their lives, remarked on how the rape had "messed up" their lives or changed their lives in a dramatic manner; commented on how scared they were of dying as part of the assault; or emphasized that it would affect their lives forever as well as those of their children." (Burgess and Holmstrom, p. 408)

"Victims who ranked the rape a ten said there was nothing to compare the rape with and one victim ranked the rape with other life elements which were 'out of my control.'" (Burgess and Holmstrom, p. 409)

When 88% of the original sample was contacted again four to six years later, 37% of the victims felt their recovery time took "months," 37% felt it took "years," and 26% felt that they had not yet fully recovered from the assault.

[1] *Rape: Crisis and Recovery.* Burgess and Holmstrom, 1979, pp. 407 & 409