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The Impact of Sexual Violence on Intimate Relationship Dynamics:

A Grounded Theory Study

by

Nicole M. Lozano

A DISSERTATION

Presented to the Faculty of

The Graduate College at the University of Nebraska

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The Impact of Sexual Violence on Intimate Relationship Dynamics:

A Grounded Theory Study

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University of Nebraska, 2015

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This study intended to develop a theory that explains the relationship dynamics of opposite-sex couples in which the female partner has been sexually victimized as an adult outside of the couple relationship. Four couples participated in the study sharing their experiences of disclosing the assault, communicating about the assault, physical intimacy, and salience of the assault to the relationship. Using a constructivist grounded theory approach the model emerged from the data. Overall, the women decided to disclose because they felt secure in their current intimate relationship. Disclosure happened for one of two reasons: (a) either to test the relationship and partner to make sure that it would last, or (b) because the women became overwhelmed emotionally thinking about the assault. The decision led to the response of both individuals in the relationship. General responses were positive for both parties, although there were nuanced pieces that were relative to the sex of the person. After the disclosure, the relationship changed, but it was difficult for the participants to define. The most salient change was in relation to physical intimacy and discussing the assault. Discussing the assault only occurred after the female partner was triggered for various reasons, including during sex. The findings are supported by previous literature in emotion focused therapy,

attachment theory, shame resilience work, and rape myth acceptance research.

Implications for counseling and future research directions are discussed.

This work is dedicated two-fold:
for the couples who were courageous enough to share their stories
and
for Avaline, may the world be a better place for you.

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My own view is that you take these things personally. You do an experiment because your own philosophy makes you want to know the result. It's too hard, and life is too short, to spend your time doing something because someone else has said it's important.

You must feel the thing yourself. -Isidor I. Rabi

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CHAPTER I: INTRODUCTION

Sexual assault. Sexual violence. Rape. These powerful words envelop the forced sexual experiences of men and women around the world. Although the language neatly covers a range of experiences, the experiences are often painful and traumatic for the victim. The short and long-term impacts of sexual violence are both physical and psychological. These after-effects influence all areas of a victim's and survivor's life, held together by the shame and stigma associated with sexual violence.

This study sought to establish a theory to explain one part of a victim's life: committed couple relationship dynamics, specifically when the female partner was sexually victimized by someone other than her current partner. The purpose was to gain a better understanding of the effect of sexual assault on the couple relationship. Previous studies have quantitatively examined the long-term impact of childhood sexual abuse on adult relationships (see DiLillo, 2001 for the most comprehensive review), but few studies have done the same with respect to adult sexual assault (e.g., Connop & Petrak, 2004; Moss, Frank, & Anderson, 1990; Orzek, 1983; Miller, Williams, & Bernstein, 1982). The current research allows for new insights regarding these types of relationships. The study utilized a constructivist approach to grounded theory to allow the participants space to share their stories without agenda (Bryant & Charmaz, 2007; Charmaz, 2000; Charmaz, 2014). This chapter begins with an overview of the context that frames this study. Also included is a discussion about the chosen research approach, as well as the author's perspectives and assumptions. The chapter concludes with a discussion of the proposed rationale and significance of this research.

Background and Context

Sexual violence (SV) is a critical problem that is pervasive in society, and frighteningly common. Approximately one in four women will be or have been victimized in her lifetime (Bachar & Koss, 2001). In addition to causing physical injury, SV is associated with both immediate and long-term consequences (Jewekes, Vundule, Maforah, & Jordann, 2001; Leserman, Li, Drossman, & Hu, 1998; Letourneau, Holmes, & Chasendunn-Roark, 1999). Its impact on mental health can be as serious as its physical impact, and may be equally long lasting (Acierno, Resnick, Kilpatrick, Saunders, & Best, 1999; Creamer, Burgess, & McFarlane, 2001; Darves-Boronz, 1997; Levitan et al., 1998). SV can also profoundly affect the social well-being of victims as survivors may be stigmatized and ostracized by their families and others because of the assault (Mollica & Son, 1989)

The intimate couple relationship is unique as it is comprised of two people who inherently become an important source of support in all aspects of the couple's life, including both the struggles and the triumphs that a partner experiences and chooses to share with his or her partner. A healthy couple relationship is comprised of many components, including healthy communication, lack of physical, sexual, or emotional abuse, a desire to share experiences with each other, and a sexually healthy relationship (Hall, 2006; Nock, 1996). Because of the effects of SV (such as sexual intimacy being difficult for SV survivors (Leonard & Follette, 2002)), the assumption, then, is that the couple relationship may be negatively impacted by the experience of a sexual assault.

Literature pertaining to disclosure of sexual assault discusses the importance of support sources for the survivor as a way for the survivor to share her experiences

(Ahrens, Campbell, Ternier-Thames, Wasco, & Sefl, 2007; Banyard et al., 2007; Fisher, Daigle, Cullen, & Turner, 2003; Filipas & Ullman, 2001). These sources range from formal, such as police officers, clergy, hospital staff, and counselors to informal sources, such as friends, co-workers, teachers, and significant others. These informal sources of support are often the most important as they provide a friendship rather than the barrier of professionalism (Ullman, 1996). Thus, it can be deduced that significant others could be the most important informal support system because of the uniquely intimate relationship between the couple.

At this point in time, there is little literature that examines how the couple relationship is influenced by the experience of adult sexual assault that is not also marital rape or marital sexual assault. There are many studies that examine the couple relationship from the lens of childhood sexual abuse (Courtois, 1988; Fergusson, Boden, & Horwood, 2008; Kirschner, Kirschner & Rappaport, 1993; Malz & Holman, 1987; Meiselman, 1990; Nadelson, 1989; Resick, Calhoun, Atekesson, & Ellis, 1981), a damaging experience that has substantial influence across the relational lifespan of the survivor. However, there is a severe lack of research that explores adult sexual assault and its impact on couples, with the majority of the research being at least 10 years old (Davis, Brickman, & Baker, 1991; Emm & McKenry, 1988; Miller et al., 1982; Moss et al., 1990; Popiel & Susskind, 2005; Connop & Petrak, 2004). I believe part of the problem appears to be the lack of direction or theory to guide the work in this line of research. Thus, a grounded theory study examining the process of adult sexual victimization and its impact on the couple relationship dynamic was conducted.

The Current Study

Through intensive interviews, the current study built a theory using data collected from participants. More specifically, the researcher used community-based recruiting (Campbell, Sefl, Wasco, & Ahrens, 2004; Martsof, Courey, Chapman, & Draucker, 2006) and theoretical sampling to identify female survivors of adult sexual assault and separately interview both partners in the couple. Inclusion criteria was comprised of the following: (a) in a committed opposite sex relationship for at least a year, (b) there had been at least six months since the assault was disclosed, (c) there was no sexual violence within the current relationship, and (d) only the female partner was sexually assaulted. This study explores the couple relationship using a constructivist approach (Charmaz, 2014), which focuses on creating meaning with the participants and incorporating their worldview.

Language. Two terms often used within this body of literature are victim and survivor. The term victim is most often used to denote someone who is in the early stages of recovery whereas survivor is used for those who are in the process of overcoming the life-changing effects of their experience. Both terms will be used interchangeably throughout this research, recognizing that those who have experienced this unique trauma are both victims and survivors.

Assumptions. As a researcher in the field of sexual violence, the assumption was made that there are problems within the couple relationship when there has been sexual violence outside of the relationship. The scant literature that exists does support this assumption, but this phenomenon has not been investigated in depth. Thus, I relied on previous counseling experiences with survivors and their voiced concerns, as well as the

literature that was examined over the course of my studies as a backdrop for this research. Congruent with grounded theory, I have attempted to stay “beside the literature” (Glaser, 1998) as opposed to within the literature available with couples when a female partner has experienced sexual violence or trauma at any point in her lifetime.

Conclusion

This chapter has asserted that there is a lack of research regarding couples and the impact of adult sexual violence. This dearth of research may be due to a lack of understanding, or theory, about the effects on the couple relationship. Chapter 2 will further discuss the method of grounded theory, including the use of literature for this study. Although this is unconventional, this will aid the reader in understanding grounded theory and the literature. Following the literature review, Chapter 3 will detail the qualitative approach that was used in the study, as well as elaborate on the procedures unique to grounded theory, such as sampling and memoing. Chapter 4 will provide information on the results of the study as well as more literature to aid in supporting the results. Chapter 5 will provide a discussion about the strengths and limitations of the study, future research directions, contributions to the counseling literature, and the researcher’s conclusion.

CHAPTER II: LITERATURE REVIEW

The couple relationship is strongly and positively associated with psychological well-being (Booth & Amato 1991; Dehle & Landers, 2005; Frech & Williams, 2007; Gove, Style, & Hughes, 1990; Horwitz, White, & Howell-White 1996; Horwitz & White 1991; Pateraki & Roussi, 2013). However, when one partner has experienced sexual violence, the question arises of how the relationship may be impacted. Previous research has established that women who have experienced childhood sexual abuse (CSA) have difficulty maintaining romantic relationships as well as staying happy in the intimate relationships that do endure (Carroll et al., 1985; DiLillo, 2001; Fergusson, et al., 2008; Kirschner et al., 1993; Meiselman, 1990; Resick et al., 1981). Although there is a plethora of research regarding CSA (Carroll et al., 1985; Courtois, 1988; DiLillo, 2001; Fergusson et al., 2008; Kirschner et al., 1993; Malz & Holman, 1987; Meiselman, 1990; Nadelson, 1989; Resick et al., 1981), there is scant research to date that examines the experiences of adult sexual violence and its impact on long-term intimate relationships. Thus, the purpose of the current study is to understand the experiences of adult committed relationships when the female partner has been previously victimized outside of the couple relationship. Given this goal, this chapter will begin by briefly discussing the qualitative methodology that will be used for this research, and its use of literature prior to the beginning of a study. Although discussing the methodology at this point is out of the ordinary, it will provide a better understanding of the literature review presented. Next, a review of sexual violence and its pervasiveness is discussed. Then, the literature regarding couples, focusing on the strength of couple relationships, CSA and coupledom,

and current research about general trauma and couples will be reviewed. The chapter concludes by providing a rationale for the current study.

Grounded Theory

Grounded theory is a methodology that seeks to construct a theory about issues of importance in peoples' lives (Charmaz, 2000; 2014; Glaser, 1978; Glaser & Strauss, 1967; Strauss & Corbin, 1998). Though there are different types of grounded theory, this study will use a constructivist approach advanced by Kathy Charmaz. Charmaz, offers her own version of grounded theory research that she argued was more in tune with emerging epistemological and theoretical assumptions guiding the research enterprise (Babchuk, 2011; Bryant & Charmaz, 2007; Charmaz, 2000; 2014). Charmaz focused on a constructivist approach to grounded theory that reshapes the interaction between research and participants from a top-down researcher-driven approach to one in which the participants play an active role in co-constructing the emerging theory with the researchers (Mills, Bonner, & Francis, 2006). Since her first qualitative publication in 1995, Charmaz has maintained that a constructivist approach is both possible and desirable because, "Data do not provide a window on reality. Rather, the 'discovered' reality arises from the interactive process and its temporal, cultural, and structural contexts" (Charmaz, 2000, p. 524).

Grounded theory and literature review. A contentious point of conducting grounded theory research is the literature review (Charmaz, 2014; Glaser, 1998). Charmaz notes that when one is attempting to solicit funding or conduct research to fulfill a requirement, such as a dissertation, the researcher is asked to support his or her work through a prolific literature review (Charmaz, 2014). However, an exhaustive literature

review at the beginning of the study is in contradiction to how grounded theory studies are conducted (Charmaz, 2014; Glaser, 1998; Glaser & Strauss, 1967; Puddephatt, 2006). Delaying the literature review until the data analysis stage is meant to avoid bringing preconceived ideas and imposing them on the theory created by the researcher (Charmaz, 2014). Glaser (1978; 1998) explains the literature review as a necessity for this type of work but espouses a belief of being *beside* the literature as opposed to being in it. Charmaz (2014) agrees with this point, noting that the researcher, by not conducting a literature review in the beginning stages, will instead conduct a thorough literature review as data is being collected and analyzed. To some extent, Charmaz agrees with Glaser's interpretation but is not as dogmatic regarding the use of the literature in the earlier parts of the study. In fact, most grounded theorists advocate a minimal use of literature at the beginning of the study that gradually builds through data analysis and theory creation (Glaser, 1998). This simultaneous approach of collecting data while being immersed in the literature results in a richer review from across disciplines that help to focus the theory (Charmaz, 2014). Charmaz is careful to note that she does not agree with Glaser's perspective of the researcher being a "tabula rasa" or blank slate when beginning grounded theory research on an area of interest (Glaser, 1978). In Puddephatt (2006), Charmaz clarifies saying, "You haven't been a very good student if you're totally a blank slate in your area. But you can go in with an open mind." (p. 15) Thus, Charmaz (2014) recommends using literature to outline the rationale and assumptions one plans to use for the research.

With this in mind, as the researcher, I decided to stay beside the literature as opposed to being submersed so as not to influence the theory that eventually emerged. I

believe that in doing so, I was able to create a theory that was actually framed within the participant's experiences and, as discussed in chapter four, is ultimately supported by the literature. To this point, in this chapter, I have briefly reviewed, or mentioned topics that I imagine will emerge from my participants' stories, which will guide my interview questions. As data emerged, and I spoke with participants, I attended to the literature more closely, crossing disciplines to understand the lived experiences of my participants. Although this approach, on its face, may seem as a peripheral review of the literature, it is my belief that I adhered to grounded theory as a methodology. A robust review of the literature that correlates with the findings can be found in Chapter 4.

Sexual Violence

Sexual violence (SV) is a persistent worldwide problem. A number of studies suggest that between 13% and 25% of women experience sexual assault at some time in their lives (Elliot, Mok & Briere, 2004; Kilpatrick, Saunders, Veronen, Best, & Von, 1987; Kilpatrick & Seymour, 1992; Koss & Dinero, 1989; Sorenson, Stein, Siegel, Golding, & Burnam, 1987; Tjaden & Thoennes, 2000). Definitions of sexual violence range broadly throughout the literature (Fisher, Daigle et al., 2003; Muehlenhard, Powch, Phelps, & Guisti, 1992; WHO, 2011). The terms "sexual assault," "sexual aggression," "sexual victimization," "sexual coercion," and "sexual violence" are often used to designate a broad range of experiences (such as unwanted sexual advances or sexual harassment to rape) and tend to have higher reporting rates, potentially because they more accurately reflect women's victimization experiences (Koss, 1992; Muehlenhard et al., 1992; Smith, 1994). In most literature, "rape" is defined as physically forced or otherwise coerced penetration – even if slight – of the vulva or anus, using a penis, other body parts,

or an object, with the attempt to do so known as “attempted rape” (WHO, 2011). “Date rape” and “acquaintance rape” are used interchangeably to label a rape committed by someone who was known to the victim, although “date rape” tends to denote a more specific type of altercation involving a dating relationship (Kilpatrick, Best, Saunders & Veronen, 1988).

Sexual violence has both physical and psychological consequences ranging in severity. Women report having chronic body aches, difficulty sleeping, and sexual struggles (Acierno et al., 1999; Creamer et al., 2001; Darves-Boronz, 1997; Jewekes et al., 2001; Leserman et al., 1998; Letourneau et al., 1999; Levitan et al., 1998). Psychologically, women report post-traumatic stress disorder (PTSD) symptoms after an assault, including depression and anxiety (Koss & Harvey, 1991; Resick, 1993; Rothbaum, Foa, Riggs, Murdock, & Walsh, 1992). For example, in community-based samples, between 44% and 49% of rape victims experience PTSD as a result of SV (Breslau et al., 1998; Kessler, Sonnega, Bromet, Hughes, & Nelson, 1995; Perkonig, Pfister, Stein, Hofler, Lied, Maercker, & Wittcehn, 2000). Moreover, an investigation of anxiety and mood disorders in a community sample of rape victims found that 39% met criteria for a current mood or anxiety disorder other than PTSD (Boudreaux, Kilpatrick, Resnick, Best, & Saunders, 1998). Additionally, numerous relational problems result from sexual victimization including victim-blaming when a survivor discloses the assault, anger from the recipient of the disclosure, and problem-solving from the recipient as opposed to listening and supporting the victim (Ahrens, 2007; Davis, Brickman, & Baker, 1991; Filipas, 2001; Ullman, 1996).

No matter the language used, the experience of SV has numerous negative ramifications including both immediate and lasting physical, psychological, and social problems. A sexual assault can range in its severity, with women enduring threats to life, physical injury, and psychological harm (Tjaden & Thoennes, 2000). Immediate pain and injuries are associated with SV, but there are also long-term physical problems including gastrointestinal disorders, chronic pelvic pain, gynecological and pregnancy complications, migraines and other frequent headaches, facial pain, back pain, and disability that may interfere with work (Jewkes, Sen, & Garcia-Moreno, 2002). Others experience no apparent physical injury but experience a great deal of emotional and psychological trauma over how, what, and why the assault happened (Jewkes et al., 2002). As well, individuals who have experienced SV may engage in destructive health behaviors such as high-risk sexual behaviors, using harmful substances (e.g., drugs and alcohol), and eating unhealthy diets (Brener, McMahon, Warren, & Douglas, 1999; Lang et al., 2003). In either case, the effect of the sexual assault may present itself as posttraumatic stress disorder (PTSD), sexual dysfunctions, reduced self-esteem, or other social and emotional disruptions (Blain, Galovski, & Peterson, 2011; Koss & Harvey, 1991; Resick, 1993). Women in college may have trouble in academic performance and/or drop out altogether because of the emotional trauma caused by the assault (Smith, White, & Holland, 2003).

Individuals who recover from their abuses are able to process the trauma, accurately recognize the responsibility to the perpetrator, absolve themselves of blame, and resume normal activities without fear (Ballard & Alessi, 2002). Ballard and Alessi (2002) noted that those who are unable to process their trauma may develop PTSD and/or

acute distress disorder. Survivors may also develop intimacy and sexual disorders (Elmone & Lingg, 1996), sleep disturbances, difficulties in maintaining concentration, memory problems, and irrational guilt (Briere, 1989). Further, individuals may re-experience their trauma through intrusions such as flashbacks, nightmares, and various types of hallucinations (Ballard & Alessi, 2002; Elmone & Lingg, 1996), which are often unwanted reminders of the original trauma. To cope with these intrusions, survivors may numb themselves to the stimuli, which involves blocking out or denying the event. However, numbing as a coping mechanism for the SV experienced may influence a victim's response to emotional distress in future adult relationships (Compton & Follette, 2002; Feinaur, 1989). One way to help alleviate the emotional distress is through disclosing the experience.

Disclosure. Disclosure is considered an integral part of the process of healing from sexual violence (Ahrens et al., 2007; Banyard et al., 2007; Fisher et al., 2003; Ullman, 1996a; Ullman, 1996b; Ullman & Filipas, 2001). Jourard (1971) suggested that disclosing traumatic experiences was correlated with psychological and physical health, and other research has supported this claim. A growing body of research suggests that disclosing distressing events is related to improved emotional, mental, physical, immune system functioning, and finding meaning in a traumatic experience (Greenberg & Stone, 1992; Greenberg, Wortman, & Stone, 1996; Mann & Delon, 1995; Park & Blumberg, 2002; Pennebaker, 1995, 1997, 1999). Nondisclosure, on the other hand, is associated with worse psychological and physical health, possibly resulting from the tendency to ruminate (Borkovec, Roemer, & Kinyon, 1995; Rime, 1995) and the effort extended to not think or feel about the event (Pennebaker, 1989). Ahrens, Stansell and Jennings

(2010) further examined disclosure with sexual assault survivors, finding that multiple factors influenced the decision to disclose including time since the assault, assault characteristics, and rape acknowledgment.

The disclosure studies indicate the importance of sharing a traumatic event. Still, the decision to disclose is complex and dependent upon multiple factors. Some of the factors that influence the choice to disclose include the survivor's relationship to the assailant (i.e., acquaintance, partner, or stranger), if there was physical injury and/or emotional distress, if the assault was completed, and the survivor's acknowledgment of the assault as rape (Ahrens et al., 2010; Browne, 1991; Golding, Siegel, Sorenson, Burnam, & Stein, 1989). It is estimated that 95% of survivors remain silent for fear of reactions from others (Karjane, Fisher, & Cullen, 2005). Those who do disclose their assault do so to gain support and assistance (Ahrens, 2007; Ullman, 1996a; Ullman, 1996b), and may disclose to a formal support source (e.g., police, physicians, therapists) or informal support source (e.g., friends, partners). Research has shown that significant others often experience secondary trauma in response to the sexual assault survivor's victimization. Secondary trauma is described as the emotional duress that results when an individual hears about the firsthand trauma experiences of another. (Ledray, 1986; McEvoy & Brookings, 1991; Remer & Elliot, 1988a, 1988b).

Research has identified positive and negative support sources; however, little is known about relationship dynamics of couples. Brookings et al., (1994) recommended that rape crisis centers should offer more services to significant others who are impacted by the sexual violence of a loved one. These recommended services include counseling, support groups, and couples therapy. It is hoped that through these programs, partners

would be better able to cope with their own emotional concerns as well as helping survivors, which would enhance the recovery process. Often, recommendations like this are made, yet little information is offered on how to follow through with them. Increased knowledge of how couples process the issues associated with sexual assault is needed to help create improved interventions.

The Couple Relationship

One significant informal support source for a victim is the relationship with a significant other or romantic partner. Specifically, marriage fulfills many social functions for an individual, ranging from companionship to satisfying the needs for physical affection and intimacy (Dehle & Landers, 2005; Ember, Ember, & Peregrine, 2011; Kottak, 2011). Marriage has been typically associated with love and affection, developmental maturity, monogamy, fertility, and specialized gender roles (Nock, 1998). Additionally, people tend to have a system of beliefs about marriage that incorporate dimensions of its unique status as a relational type with self-fulfilling functions, levels of mutuality and romanticism (Hall, 2006). Moreover, one of the primary social functions of marriage is the provision of social support. Research indicates that social support from spouses is often primary to other sources of social support (Brown & Harris, 1978; Lieberman, 1982). Additionally, social support from spouses can have both direct and buffering effects on well-being (e.g., Cohen & Wills, 1985; Cutrona 1996; Sarason & Sarason, 1985). For example, Thoits (1995) demonstrated that support from one's spouse, especially emotional support, was one of the most important predictors of an individual's well-being. Emotional spousal support refers to expressions of interest, caring and understanding, and receiving empathy from one's spouse (Biehle & Mickleson, 2012). In

their study of married individuals experiencing a stressful event, Coyne and DeLongis (1986) found that support from other sources did not compensate for the lack of social support from one's spouse. Although empirical investigation of social support processes in intimate relationships is relatively new to couples research, the emerging evidence clearly supports its importance and utility of understanding relationships (Halford & Snyder, 2012; Overall, Fletcher, & Simpson, 2010; Pasch & Bradbury, 1998; Reizer, Ein-Dor, & Possick, 2012).

Sexual violence and the impact on couples. The research that exists examining CSA and couples indicates that victimization impacts the intimate relationship. For example, those who have been sexually assaulted as children are more likely than others to be divorced (Bifulco, Brown, & Adler, 1991; Finkelhor, Hotaling, Lewis, & Smith, 1989; Moeller, Bachmann, & Moeller, 1993) and less likely to be married (Bifulco, Brown, & Adler, 1991; Radomsky, 1992). However, most research has primarily focused on childhood sexual abuse (CSA) and couples. DiLillo (2001), in an extensive review of the CSA literature, found studies that documented patterns of dysfunction in survivors' intimate relationships. Couples reported greater levels of overall marital discord (Jehu, 1988), survivors shared a general fear of partners and husbands (Meiselman, 1978), and a moderate to severe conflict with partners was found (Courtois, 1979). Women who were sexually abused as children also reported lower satisfaction in their committed relationships than non-abused women (DiLillo & Long, 1999; Hunter, 1991; Mullen, Martin, Anderson, Romans, & Herbison, 1994). CSA survivors have also reported a fear of being unable to have deep feelings for another person (McGettigan, 1992). DiLillo (2001) cited studies (e.g., Mullen et al., 1994) finding that women with a history of CSA

were significantly more likely than non-abused women to have difficulties confiding in and discussing personal concerns with their male partners. DiLillo (2001) suggested that struggles with interpersonal trust and intimacy might contribute to the general relationship dissatisfaction expressed by CSA survivors. Communication between survivors and significant others may also be negatively affected by CSA which may be a result of feelings of stigmatization, shame, and inferiority among CSA survivors (Finkelhor, 1988). In terms of sexual intimacy, McGettigan (1992) found that eighty percent of CSA survivors noted that their sexual perception and experience was impacted by their sexual abuse, including feeling numb during sex, inability to let go during sex, feeling negative during and after sex and being dissatisfied with one's sex life.

Beyond interpersonal concerns for the survivor, there is a concern about the inability for partners to process their own reactions. This has the potential to encumber a victim's healing process, though few studies have examined the partner's process. Brookings, McEvoy, and Reed (1994) wrote that "men can play a positive role in the victim's recovery if they are able to understand and deal appropriately with their own emotional reactions" (p.295). Cohen (1988) reported finding themes of frustration, concern, anger, helplessness, and empathy among members of a group for male partners of sexual assault survivors. In a study akin to Cohen's, Connop and Petrak (2004) reported similar themes, including difficulties in providing support to the female partner following an assault, communication between the partners, the impact of the assault on the couple's sexual relationship, and the male partners' anger and blame in relation to the assault. Finally, Cairns (1994) recommended therapeutic and educational interventions to help men and women discuss their own experiences of sexual violence.

To date, most research that examines trauma (e.g., serious car accidents, SV, war experiences) often examine secondary victimization (e.g., Ben Arzi, Solomon, & Dekel, 2000; Carroll, Rueger, Foy, & Donahue, 1985; Figley, 1995; McCann & Pearlman, 1990) and its impact on the couple relationship (Carroll, Rueger, Foy, & Donahoe, 1985; Nelson Goff, Crow, Reisbig, & Hamilton, 2007; Nelson Goff & Smith, 2005; Riggs, Byrne, Weathers, & Litz, 1998). One study, in particular, sought to examine how these traumatic experiences impact the couple relationship. Blalock Henry et al. (2011) described five categories that were relevant to research conducted with couples and experiences of various traumatic events. These categories included: (a) role in the relationship, (b) boundary issues, (c) intimacy problems, (d) triggers, and (e) coping mechanisms. This research appears to be significant in that it is one of the few studies to examine the couple relationship and trauma thoroughly.

Rationale for the Current Research

Research has quantitatively identified the impact of CSA on couple relationships; however, little literature exists which examines the relationship dynamics when the female partner was sexually assaulted as an adult. Further, intimate relationships can have a notable influence on the healing process, and sexual assault can have a profound impact on those relationships, thus the quality of that relationship should be examined. Some literature indicates that sexual assault significantly affects the relationship creating problems like increased fighting, communications issues, and a lack of sexual intimacy (Remer & Elliot, 1988a, 1988b). We also know that secondary trauma is often experienced by the partners of the victims (Ledray, 1986; McEvoy & Brookings, 1991, Remer & Elliot, 1988a, 1988b). The combination of the above components has not been

fully explored. The current study allowed for further exploration of the couple relationship within these couples.

Furthermore, the few studies that have examined the myriad of concerns tend to focus on the experiences of either the victim or the partner, but never both within the same study (Connop & Petrak, 2004; Davis, Brickman, & Baker, 1991; Emm & McKenry, 1988; Moss et al., 1990;). For example, Davis, Brickman, and Baker (1991) asked participants to rate the supportive and unsupportive behaviors of significant others following sexual or nonsexual assault. One limitation of this study is the term “significant other” as the researchers defined this as a romantic partner or someone that the victim was close to, had turned to for support, and knew about the crime. Moss, Frank, and Anderson (1990) compared psychological functioning within the first four weeks after a rape was committed between single and married victims. This study did not include partner’s experiences. Finally, Connop and Petrak (2004) conducted a qualitative study with six heterosexual men to understand their experiences after their partner’s sexual assault. This data was supplemented with three heterosexual women who discussed the impact of their assault on their partner. Themes included support for the partner, communication about the assault, the impact on the sexual relationship, and the male partners’ feelings of anger and blame in relation to the assault. Only one published study (Miller, Williams, & Bernstein, 1982) focused solely on couples’ responses to a sexual assault, but focused on marital adjustment rather than coping and support dynamics. Additionally, this study used questionnaires and clinical notes from therapy rather than a qualitative approach.

One study that could arguably be similar to my proposed research is Emm and McKenry's (1988) qualitative approach to interviewing parents or male partners, and survivors. This study is one of the only that qualitatively seeks to understand the impact of a sexual assault on important, attachment based relationships. The study interviewed parents or partners of survivors who had been raped by the same serial rapist. Survivors' ranged in age from 19-49 and were interviewed between 21 months to ten years after the event. However, it was unclear whether the survivor had a parent or partner interviewed though it appears that partners and parents were not interviewed for each survivor. Additionally, the interviews focused on the survivors' adjustment after the event, rather than how the relationship dynamics were affected.

The Current Study. To build on this research (Connop & Petrak, 2004; Davis, Brickman, & Baker, 1991; Emm & McKenry, 1988; Miller, Williams, & Berstein, 1982; Moss et al., 1990) the current study examined the impact of adult sexual assault on both partners of a committed couple. Following Charmaz (2000; 2014), a constructivist approach to grounded theory was used for the current study. The selection of this methodological framework was primarily influenced by the desire to determine which kind of approach would best answer the central research question and honor the participants' experiences. I used interviews from both partners as a way to fully understand the phenomenon. A qualitative examination allowed for initial comparisons of how the individuals and the couple as a whole view the assault and its impact on the relationship. This methodology also aided in understanding how couples successfully and unsuccessfully navigate their relationship in light of sexual assault.

CHAPTER III: METHODOLOGY

Given the high prevalence of adult sexual violence and the number of women who are in committed relationships, it is important to understand how the couple's relationship functions in light of the assault. The current study utilized intensive interviews to create a grounded theory using a constructivist approach (Charmaz, 2014; Glaser & Strauss, 1967; Strauss & Corbin 1987). This qualitative research method provided the best format to attain understanding of the questions in the study. This chapter will outline the reasons for choosing the methodology, and describe specific procedures such as sampling, data collection, and data analysis. This study was conducted in a way that was mindful of ethical considerations, limitations, and my own subjectivity as a researcher. This chapter will also include researcher positioning where I will share my own experiences and perspectives with respect to this topic in an effort to be transparent as a qualitative researcher.

Grounded Theory Design

My interest in the study was rooted in my desire to understand how couples navigate their relationships in light of sexual violence. Further, as a psychologist-in-training, I want my research to honor the participants and their words, as I believe they are the ones that best understand their lives and lived experiences. Thus, utilizing qualitative methodology appeared to be the best fit as it allows the researcher to focus on the meaning made from participants' experiences and assists in decoding situations that are far more complex than the outside observer may ever know.

These goals led me to investigate using grounded theory (Charmaz, 2014; Glaser & Strauss, 1967; Strauss & Corbin 1987) as an option to conduct this research. Although

all qualitative research attempts to explain a given phenomenon (Saldana, 2011), grounded theory most often focuses on understanding the *process* of a phenomenon, leading to a theory. With this inquiry, focus is given to generating a theory or explanation of a social or social-psychological process, in this case the experience of a sexual assault on the relationship between a couple (Straks & Brown Trinidad, 2007). Further, as discussed in Chapter 2, limited research has been conducted with respect to the experience of the female partner who has survived adult sexual assault outside of the couple relationship. Since this line of research has not been examined in depth nor recently, it is difficult to bring a theoretical framework to understand data, which may have been collected quantitatively (Saldana, 2011); thus, the use of grounded theory to explain the phenomenon was deemed the best choice. Glaser and Strauss (1967) specifically developed this methodology to explore phenomena where little research and theory building had been done.

Additionally, this inquiry choice was best suited for the current study as it allows me to reach both academic and clinical audiences to promote further understanding of the phenomenon. Theories resulting from grounded theory studies are, inherently, grounded in the data and thus can offer insight, understanding, and practical guidance. Using grounded theory also allows me to extend beyond professional audiences to reach other couples who may have the same challenges and experiences in their relationships because of sexual victimization. Moreover, I believe this approach lays the foundation for future research regarding the impact of sexual victimization on couples, widening the field of research and creating interventions to use with couples and individuals.

Grounded theory strategy. Grounded theory was developed by sociologists, Anselm Strauss and Barney Glaser, in the 1960s. This methodology is “an analytic process of constantly comparing small data units...through a series of cumulative coding cycles to achieve abstraction and a range of dimensions to the emergent category’s properties” (Saldana, 2011, p. 115). At its most basic level, grounded theory claims that the theory “emerges” from the data (Bryant & Charmaz, 2007). Theory building is achieved through a process of data collection that is inductive in nature (Morse, 2001), as the researcher has no preconceived ideas to prove or disprove. Rather, issues of importance to participants emerge from the stories they share about an area of interest they hold in common with the researcher.

This method began with sociologists Glaser and Strauss (1965; 1967) collaboratively researching how children felt about dying. Sociology had a long tradition of qualitative methodologies; however, during the 1960s, the methodologies were being displaced by quantitative research methods (Charmaz, 2003). Quantitative methods were rooted in positivism, which “assumes a unitary scientific method of observation, experimentation, logic, and evidence” (Charmaz, 2003, p.84). Glaser and Strauss’ initial work (1967) challenged multiple aspects of positivism, including the division between theory and research, beliefs that qualitative research was not adequately rigorous, separation of data collection and data analysis phases, and the assumption that qualitative research could not generate a theory. Grounded theory offered a way to abscond from these assumptions, asking researchers to enter into the work without a preconceived hypothesis, as well as moving back and forth between the collection of data and the analysis of the data (Bryant & Charmaz, 2007).

Because there are different approaches to grounded theory's family of methods (Babchuk, 2011; Bryant & Charmaz, 2007; Charmaz, 2014), it is important for the researcher to identify a particular type of strategy. For the purpose of this study, as influenced by my philosophical paradigm and interpretive lens (both discussed below), this study adhered to constructivism (i.e., the co-construction of meaning between researcher and participant; Creswell, Hanson, Plano Clark, & Morales, 2007; Ponterotto, 2002, 2005) as a grounded theory approach for several reasons. First, the most distinguishing aspect of the grounded theory approach is the dynamic process in which, ideally, a substantive theory is generated based on the researcher's immersion in the data. Constructivism accepts that multiple realities exist and can be revealed through researcher and participant interactions. Thus, although reality for couples where the female partner has experienced sexual violence is steeped in social and cultural ideals, the constructivist paradigm allows the participants to be the experts on their lived experience (Ellis & Chen, 2013).

Second, the grounded theory method is well-tailored to a social justice perspective through its ability to attempt to understand and potentially advocate for participants by examining how victims derive meaning from their experiences (Charmaz, 2005). Further, a constructivist approach will allow participants space they may not have had otherwise to share their experiences. Thus, the chosen research and methodology are consistent with Counseling Psychology's social justice aims (Morrow, 2005). Fassinger (2005) contends that not only is the grounded theory approach a "methodological exemplar" (p. 165) of the scientist-practitioner model through its incorporation of theory and practice, but it also enables Counseling Psychologists-as-advocates. By allowing for a greater

understanding of lived experiences, such as the experience of being in a couple where one partner has a sexual assault history, grounded theory enables the researcher to disseminate this knowledge where it may facilitate change.

Researcher positioning. The study's design format was not only influenced by inquiry selection, but also by the researcher's personal philosophy and interpretive lens. The beliefs and assumptions associated with a chosen philosophy will guide both the inquiry process as well as the methods (Merriam, 2009). The philosophy I tend to adopt as a researcher and clinician is that of a social constructivist worldview. This worldview assumes that individuals understand their experiences in a social context, meaning they strive to understand their lived experiences. These created meanings are varied in nature, which leads a researcher to consider the complexity of these views (Charmaz, 2000; 2014). Thus, "researchers do not 'find' knowledge, they construct it" (Merriam, 2009, p. 9). Ultimately, the goal of a constructivist researcher is to keep attention and emphasis on the participants' views of the experience of focus to developing a meaningful understanding of said phenomenon in question (Merriam, 2009). As a researcher, I am not devoid of social and cultural conditioning, which can impact my work; thus, I want to share with you how these influences could impact my theory.

The researcher's role and background. As an active participant in qualitative research, it is essential to understand and explain how my professional and personal experiences with this area and population have shaped my interpretations and understanding of the phenomenon under investigation. Sexual violence (SV) is such a pervasive problem that it is easy to imagine that everyone knows of at least one person who has experienced such an assault. In my own circle of family and friends, I know

quite a few women who have been sexually assaulted, both as children and adults, and I have had the privilege to be with them as they focused on healing. However, I noticed that once these survivors entered an intimate romantic relationship, no matter how caring their partners were, there appeared to be lingering difficulties. It is these difficulties regarding sexual assault that have not been examined in the research with respect to the couple relationship.

Moreover, I have personally experienced sexual violence. I was assaulted on the cusp of adolescence and have always struggled to understand the impact of this victimization has had on my life. I have also struggled because my assault experiences do not fit the stereotype of sexual assault, nor those incidents most often reported (e.g., incest, abuse by a family member, abused by an older relative/stranger/neighbor). Rather, my experience was comprised of multiple occurrences of abuse by persons slightly older than I was at the time. My friends' experiences and my own occurrences of SV are what sparked my interest in understanding the impact that an adult sexual assault has on a romantic couple.

Additionally, I am a Counseling Psychologist-in-training and have been working in the field of SV both as a clinician and researcher for over six years. Through these experiences, I have developed a passionate bias toward survivors of SV and a desire to assist in their healing process, as well as in preventing this heinous crime. In working clinically and conducting research, I aim to be aware of these biases and how they might influence my lens of understanding this area and those affected. Regardless of my awareness and the areas in which I am still developing understanding, my biased view will shape what I hear from participants and how I understand them, and thus, the way I

analyze and interpret data. These factors are important additional elements that influenced my choice for using a constructivist lens. To assist with being aware of my biases, I relied on participants and other researchers to review my work, as well as other validation strategies. Due to my focus on receiving training and specialization in the field of SV during my doctoral pursuits, it follows reason that my dissertation research focused on some facet of SV. As I reflect on my professional and personal experiences with SV, I have realized the importance of conducting research that focuses on the perspectives and healing power of survivors.

Research Design

The following pages detail the specific design and formation of this study including elaboration of the specific problem being studied and how this study attempted to research and understand that problem. Further, the participants and protocols used for the investigation will be described.

Statement of the problem. SV is a pervasive social problem which has physical and psychological consequences that are diverse and highly individualized. A proposed impact, which has largely been ignored by the academic community, is how adult sexual assault outside of the marital relationship influences later committed romantic relationships. Understanding the couple relationship in light of adult SV is important, as 53% of Americans report being married and 26% report being in a committed relationship (Pew, 2010), with one out of four women being sexually victimized as adults (Koss, 2001). Thus, it is likely that SV has some impact on couple relationships.

Purpose of the study. The purpose of this grounded theory study was to develop a theory to explain the relationship dynamics of opposite-sex married couples in which

the female partner, has been sexually victimized as an adult outside of the couple relationship. Grounded theory, and more specifically using grounded theory through a constructivist lens, was selected because of its emphasis on learning about participants' lives, and using those statements and actions to inform the theory (Charmaz, 2014). Information gained from this study can assist in potentially guiding treatment with both couples and individuals, as well as direct future research to better understand these couples and individuals.

Interpretive Theory. Prior to data collection, J. Creswell (personal communication, April 22, 2013) recommends outlining one's potential theory to guide readers who may not be familiar with grounded theory research. Because I decided to remain beside that literature, I chose to use an interpretive theory as a guideline for the emerging data. An interpretive theory aims to show patterns and connections of the collected data rather than causality or linear reasoning, as well as emphasizes the understanding rather than explanation (Charmaz, 2014), which makes this theory an ideal candidate for this particular study. According to Charmaz (2014), interpretive theory has four aims: (a) conceptualize the phenomenon in abstract ways; (b) articulate theoretical claims associated with scope, depth, power, and relevance; (c) recognize the subjectivity and the role of negotiating, dialogue, and understanding through theorizing; (d) produce an imaginative interpretation. Additionally, interpretive theories focus on how the participants view their world and the studied phenomenon, which is in line with both social constructivism and Counseling Psychology principles (Charmaz, 2014).

The research questions focused on separate constructs (e.g., salience to the relationship, disclosure, physical intimacy, and communication) that may or may not

affect the marital relationship. The goal, then, was to understand these constructs with respect to SV. Because of this assumption, there is currently no model to explore. The four areas to be investigated include disclosure, salience to the relationship, physical intimacy, and communication about the sexual assault. These will be outlined in more detail when discussing the interview questions.

Participants and Recruitment

Because I am interested in how couples navigate their relationship in light of sexual assault, I interviewed both partners in the relationship. I utilized community-based recruitment (Campbell et al., 2004; Martsolf et al., 2006) for purposive sampling. Purposive sampling is based on knowledge of the population and purpose of the study (Saldana, 2011). Because SV is so pervasive, SV survivors are numerous; however, it can be difficult to recruit participants due to the shame and stigma of being a survivor of SV (Campbell et al., 2004). Community-based sampling focuses on recruiting survivors from where women are (Campbell et al., 2004). Thus, recruitment was attempted in places where women spend time in the community: public transportation, grocery stores, laundromats, schools, coffee shops, bookstores, gyms, spas, nail and hair salons, child care centers, social service agencies, libraries, churches, and so on (Campbell et al., 2004). Recruitment via word of mouth through Internet forums (e.g., Facebook) was also utilized. I asked people who I knew to share the study announcement with friends. Some people spoke directly with women they knew had been assaulted to inquire about their interest in participating in the study. However, I am unaware if any of the participants are indeed friends/family of my friends, in order to maintain confidentiality.

Fliers included information for potential participants to contact me via email to schedule an appointment to conduct a brief screening interview that will determine eligibility for the study ([Appendix A](#)). Inclusion criteria was assessed in either the phone screening ([Appendix B](#)) or through the Qualtrics assessment ([Appendix C](#)). For the female partner, these included:

- (a) she self-identify as a victim or survivor of sexual assault,
- (b) they have been in a committed heterosexual relationship of at least one year with at least six months since disclosure,
- (c) the perpetrator was not her current partner,
- (d) she has experienced no sexual violence by her current partner,
- (e) the assault included contact abuse (i.e., genital fondling and/or penetration),
- (f) the assault had not happened as a child,
- (g) her male partner is aware of her sexual assault, and has known for at least six months,
- (h) her male partner is willing to take part in the study, and
- (i) she is 19 years of age or older.

The male partner was contacted following the screening with the female partner.

Inclusion criteria for the male partner were that:

- (a) he has not experienced his own sexual violence,
- (b) he is aware of his female partner's sexual victimization,
- (c) they have been in a committed heterosexual relationship of at least one year with at least six months since disclosure,
- (d) he is willing to take part in the study, and

(e) he is 19 years of age or older.

Participants were offered a \$20 MasterCard or Amazon gift card at the completion of interviews.

Once data collection began, I concurrently analyzed the data and recruited new participants, until saturation was reached. Grounded theorists often discuss the idea of saturation rather than sample size, with only a handful of articles or books that provide ideal sample sizes (e.g., Creswell, 2013, recommends 20-60 interviews for a grounded theory study). Saturation can be of various types, with the most common form being “theoretical saturation.” Glaser and Strauss (1967) first defined this milestone as the point at which:

...no additional data are being found whereby the (researcher) can develop properties of the category. As he sees similar instances over and over again, the researcher becomes empirically confident that a category is saturated . . . when one category is saturated, nothing remains but to go on to new groups for data on other categories, and attempt to saturate these categories also (p. 65).

Thus, theoretical saturation occurs when all of the main variations of the phenomenon have been identified and incorporated into the emerging theory. In this approach, the researcher deliberately searches for extreme variations of each concept in the theory to exhaustion. Consequently, it was impossible to provide a set number of interviews that I had planned to conduct a priori. Rather, I used Charmaz’s (2014, p. 18-19) questions to guide my data collection process. These questions include:

- Have I collected enough background data about the participants and processes to have a ready recall and to understand and portray the full range of contexts?

- Have I gained detailed descriptions of a range of participants' views and actions?
- Do the data reveal what lies beneath the surface?
- Are the data sufficient to reveal changes over time?
- Have I gained multiple views of the participants' experiences and reactions?
- Have I gathered data that allow me to create analytic categories?
- What kind of comparisons can I make between data? How do these comparisons generate and inform my theory?

Once I was able to answer each of these questions sufficiently, I determined that data collection was complete. I then met with my auditor who agreed with this assessment.

Interview questions. As presented in Chapter 1, the central question of this study was exploring the relationships of couples where the female partner had experienced sexual assault. Grounded theory methodology has its own format for posing research questions. As posited by Charmaz (2014), the grounded theorist is guided by two questions: (a) what are the basic social processes and (b) what are the basic social psychological processes (Charmaz, 2014).

As discussed in tandem with the interpretive theory lens, there are four areas about which I spoke with participants. Disclosure focused on understanding what the disclosure process was like for both partners, how it was decided to disclose, and how the disclosure was received. Concerning salience, the focus was about the relevance of the experience of sexual assault to the relationship. For example, the researcher explored how often each partner believes they think about the assault, what instigates the thought process, and do they talk with their partner when they are thinking about the assault. In trying to understand communication important to the relationship, the researcher wanted

to know how the couple communicates about the sexual assault, how often the assault enters conversations, who instigates the conversations, and would the partners like their communication to be different. Finally, with regard to physical intimacy, the research investigated how the experience of sexual assault and disclosure influences the couples' sexual relationship, attempting to understand how the sexual assault has affected their sexual lives.

Data Collection Procedures

Recruitment began once the Institutional Review Board from the University of Nebraska–Lincoln (UNL) had approved the study. There were several barriers to recruitment which resulted in the need to adjust inclusion/exclusion criteria. One such barrier meant allowing for participants who had experienced both childhood sexual assault *and* adult sexual assault. Another significant recruitment strategy that differed from the original plan was the need to open the study nationwide. At the outset of the study, the hope was to recruit locally and conduct interviews in person; however, because of recruitment difficulties, the decision to recruit nationally was made.

There were three distinct parts to data collection. The first part focused on the interview with the female partner, which included a detailed overview of the purpose and scope of the project and completion of the informed consent form ([Appendix E; males](#) and [Appendix F; females](#)), and the interview. I interviewed the female partner, establishing rapport and gathering information from my interview questions ([Appendix H](#)). The second part involved interviewing the male partner ([Appendix G](#)), to gather information about how he perceives the relationship. As I did with the female partner, I discussed with him the purpose and scope of the study, as well as had him complete

informed consent. The final part of this study involved member checking (Charmaz, 2014; Creswell, 2013; Saldana 2011) and memoing.

At the completion of the interviews, each individual was offered a \$20 MasterCard or Amazon gift certificate. Additionally, at the outset of the data collection period, participants were provided community resource information for therapy. Further, if at any time the participants became overwhelmed, the interview was halted, and we focused on determining what steps to take to make sure the participant could receive immediate support. One participant became upset during the interview process, which is discussed in depth in the ethical section of this chapter.

Data types and sources. A trait of qualitative research that assists with increasing credibility and validity of the findings is that of triangulating the data through utilizing multiple methods of gathering data, as recommended by Creswell (2013). Further, utilizing various strategies of data collection provides a more comprehensive understanding of the couple relationship. Thus, as stated previously, I used intensive interviews and field notes as my main methods of data to produce the theory. During data analysis, I utilized member checking and memoing.

Intensive interviews. Interviews were the primary source of data collection and consisted of two parts as discussed above; the first part focused on the female partners' experiences in her relationship and was 30 to 60 minutes in length. The second part focused on the male partners' experiences in the relationship, and those interviews were 30 to 45 minutes. The interviews were conducted independent of the other partner for two reasons. The first was to protect the female partner from any victim-blaming that may happen either intentionally or unintentionally from her partner. The second was to allow

both partners the freedom to express their experiences without feeling as if they must censor themselves for their partners' benefit. The interviews were semi- or unstructured and held via phone or Skype. Facilitating participant exploration of the research questions included using general counseling microskills that validated the participants' process as well as their responses including active listening, empathic reflection, and minimal encouragers (Hill, 2009).

Four opposite-sex couples, comprising of eight people participated in the study. The couples ranged in ages from early 20s to mid-40s, with varying levels of education from completing high school to graduate degrees. Of the four couples, one couple identified both partners as African American, and the other three couples identified as White. Two couples lived in Maryland, one couple lived in Texas, and the fourth couple lived in Washington. The female partners' experiences with sexual assault were all distinctly different and are discussed in depth in the following Chapter.

Interviews were recorded, and brief notes were taken during the interviews. The researcher also created field notes after each interview (Glaser, 1998). I assigned each participant a pseudonym to protect his or her identity, and a trained transcriptionist was hired to transcribe the interviews. The transcriptionist signed a confidentiality agreement, agreeing to not discuss the details of the interviews with others ([Appendix I](#)). I then checked each transcript against the original interview for accuracy.

Field notes. Field notes are commonly defined as written records of observational data produced by fieldwork (Hammersley & Atkinson, 2002; Jackson, 1990). During this data collection period, I engaged in writing field notes directly after each interview. Generally, the content of field notes changes as a study progresses. Field notes evolve as

analytical ideas develop (Hammersley & Atkinson, 2002), with later field notes shifting from descriptive to theoretical impressions as the researcher becomes more sensitive to the issues, language, and themes being presented (Montgomery & Bailey, 2007). These later field notes may be less concrete in the reporting of observations and include more high-inference descriptors or interpretations of the observations (Eastlick Kushner & Morrow, 2003; LeCompte & Preissle, 1993).

Data Analysis Procedures

Charmaz (2014) relates grounded theory coding as the bones of the data analysis that is then assembled into a skeleton through theoretical integration. Following Charmaz (2014), I used open and focused coding in the data analysis process and also incorporated elements of axial coding and theoretical coding. These four coding procedures were implemented rather fluidly in an effort to develop an abstract theoretical concept or grounded theory from the voice of the participants (Charmaz, 2000).

In accordance to Creswell's (2009) suggestions, I first read through all of the data to "gain a general sense of the information and to reflect on its overall meaning" (p. 185). I then began initial coding to examine the data and label the individual phenomena that emerged, through examining each piece of text from the transcripts, line-by-line (Charmez, 2014). More than 300 individual line-by-line codes were generated in this initial coding process. I then moved into focused coding, where the initial codes were then grouped into categories accounting for each of the concepts within the category. Focused coding resulted in the 300 initial codes being organized into 10 categories. Following Charmaz's (2014) suggestion of using a more flexible version of axial coding in constructivist grounded theory research, my axial coding process involved exploring

the relationships between the 10 major categories and their many subcategories. The 10 major categories ultimately turned into the themes and comprise the model.

Specifically, after initial coding was completed, each code was written on a post-it note, and then grouped on poster board in ways that seemed to fit together. For example, three codes emerged that read “decision to disclose,” “disclosing to someone who cares,” and “timing.” These three post-it notes were grouped together on one sheet of poster board and eventually created the category “disclosure process.” Another example relates to the “disclosure response” category. When focused coding began, any post-it notes that addressed disclosure responses were grouped together. However, a pattern began to emerge that indicated some responses were male specific (i.e., helplessness), while others were female specific (i.e., feelings about self) and others seemed salient to both sexes (i.e., feelings about disclosure). Thus, the “disclosure response” category resulted in categorizing both sex-specific reactions and general reactions. [Appendix K](#) contains a Table that shows the process from an initial code, to a category, to a theme.

I explored possible relationships between categories and tested how they related, influenced, or contradicted each other by diagramming the relationships between the 10 major categories and writing a summary memo that described the categories and their relationships for the participants. This summary memo became the earliest version of the emerging theory and was shared with peer debriefers. I asked two people to act as peer debriefers, as well as discussed the model informally with peers throughout the process. One debriefer is a mid-40s White, female doctoral student in Counseling Psychology who has worked with sexual assault victims, couples, and partners for many years as a master’s level therapist. The other debriefer is a late-20s, White female family studies

doctoral student who has an understanding of grounded theory methodology and was able to provide feedback about the emerging model. The peer debriefers added additional perspectives to the model, by bringing an informed perspective to the data analysis, and questioned, clarified, and augmented the analysis that I had conducted. They offered questions and suggestions for further analysis, suggestions for research to explore, and ways to discuss the findings with participants. Theoretical coding was then used to reorganize the data and tell the story of the participants' experiences from an analytical perspective (Charmaz, 2014; Strauss & Corbin, 1998).

Participants were then contacted to discuss the emerging theory reflected in the appended summary memo ([Appendix J](#)) as a means of member checking (Lincoln & Guba, 1985). Four of the eight participants (three women and one male) responded, and their reactions further helped to co-construct the emerging theory. In particular, the participants changed the model by sharing that there was a cyclical component to the theory in the "Relationship after Disclosure" category. The original model made no mention of triggers as a part of the relationship process; however, participants highlighted that the cyclical nature of the model existed within being triggered and then discussing the assault again. With the help of the participants, I reconceptualized the model to include both external triggers and sexual triggers, which then lead to discussing the assault. Once the model was revised, the participants agreed it was a more accurate depiction of the process and better represented their experiences.

Constant comparative methods (Glaser & Strauss 1967) were also used to establish analytic distinctions allowing for comparisons at each level. In using constant comparative methods, this process was not as linear as conceptualized to be. Glaser and

Strauss (1967) described the constant comparison method as following four distinct stages: (a) comparing incidents applicable to each category, (b) integrating categories and their properties, (c) delimiting the theory, and (d) writing the theory. The constant comparative method involves examining the data and comparing it to other research that exists. The researcher then takes the data and integrates it into the interview with the next participants. Conducting research in this manner allows the researcher to create a fully integrated theory that has emerged from the data (Glaser & Strauss 1967). The constant comparative method is what aided in the creation of the findings chapter.

Additionally, validating the data was important although can prove difficult. Within qualitative research, validity and reliability do not adhere to the same meaning as they do in quantitative research. Strategies to ensure validity and reliability are necessary for any scientific study to certify that one's study is authentic, credible, trustworthy, and rigorous; this is done through careful study design in which one's research applies well-designed and accepted scientific standards (Merriam, 2009). Qualitative validity and reliability attends to checking for the accuracy of the findings and remaining consistent across different researchers and projects by utilizing procedures that attend to credibility, transferability, consistency, dependability and confirmability – substitutes for quantitative terms such as internal and external validity, reliability, generalizability, and objectivity (Merriam, 2009). I have discussed previously the process of peer debriefing and member checking, noting how crucial the decision to member check with a summary memo was to the theory developed. The other way in which I validated data was through memoing.

Memoing is a key component to grounded theory research, which allows the researcher to capture thoughts and beliefs regarding the themes constructed during the

data analysis, as well as note comparisons and connections between data to help solidify both the emerging theory and the questions to pursue in later research (Charmaz, 2014; Glaser, 1978). Memos may include which data are clustered together, hypotheses about the problem, as well as ideas about the categories created (Stern, 2007). Further, memos are records of the researcher's developing ideas about codes and their interconnections, as well as a documentation of the researcher's thinking processes (Glaser, 1998). By theorizing from the data, memos transform field note descriptions into theoretical accounts (Montgomery & Bailey, 2007). My memos focused on reflecting on the research process, from recruiting participants to creating the model, thoughts and feelings I had in relation to the interviews themselves, and my thoughts on saturation. I wrote memos about my interpretations and data analysis, which allowed me to examine how my interpretations changed throughout the process.

Ethical Issues

To minimize the general ethical concerns for qualitative research with this sensitive and vulnerable population, I followed general regulations determined by the UNL Institutional Review Board and the American Psychological Association (APA). First and foremost, confidentiality was discussed and reinforced throughout the research process with the participants. As articulated above, participants were assigned pseudonyms to protect their identity. Additionally, all hardcopy materials (such as transcripts) were kept locked in a private filing cabinet to which only I have access. Any printed materials containing names were destroyed (i.e., shredded), and any electronic documents were kept with an electronic password on a password-protected computer.

Participants received informed consent documents that were discussed with him or her regarding all pertinent information, as well as benefits and risks or discomforts one may encounter by participating in the study. Although risks or discomforts appeared to be minimal, there were two considerations I tried to be aware of and attempted to minimize when working with this population. These considerations were: (a) on occasion participants may experience temporary distress when discussing personal and traumatic experiences, and (b) due to the inevitable power differential between participant and researcher, participants may feel pressured to answer all interview questions and disclose information they are uncomfortable sharing. Specific ways to counter these risks included informing the participant of his or her right to skip a question, encouraging him or her to let me know if they needed a break or to end the interview, providing him or her with information for community clinicians at the outset of the work, and/or reminding him or her of the right to withdraw from the study at any time without any negative consequences. Ultimately, I attempted to utilize caution at all stages of the study to ensure that participants felt comfortable/safe and non-coerced.

Only one participant reported feeling upset during the interview. When she shared her feelings of discomfort, the interview was paused and I employed counseling skills as well as reminded her of services in her area that she could contact, and informed her that she could end the interview if she desired. That participant decided to continue with the interview after having some time to collect herself.

Another aspect of ethical data collection that I was aware of was my own emotional involvement with the data and participants. Campbell (2002) calls for researchers studying SV to be more emotionally connected to their research. She argues

that being connected includes developing the research design, interviewing the survivors, caring for the self, and disseminating the research (Campbell, 2002). Further, being emotionally connected to the research includes providing a supportive setting for catharsis, a medium for self-acknowledgement, a sense of purpose, a chance to develop self-awareness, a reflection and discussion of experiences that may be therapeutic, and a voice for the disenfranchised (Campbell, 2002). In following Campbell's model, I began interviews by asking both the survivors and the partners of any concerns about participating, as well as ways we could alleviate those concerns. I then provided an opportunity for the survivor to share her experience (Campbell, 2002). Ullman (2012) argues that by allowing the survivor space to discuss her experience, the researcher allows for her to take control over how and whether she would like to discuss the victimization, thus creating a collaborative process to the research. Taking this a step further, I began the interviews with partners by asking about their experiences with their partners' assault, thus allowing for an emotional connection between the participant and the researcher.

Ullman (2012) also argues that the researcher must be aware of her own self-care that is necessary during research with sexual assault survivors. Ullman (2012) encourages the researcher to have at least one individual with whom the researcher can speak on an individual basis about her personal experiences with the interviews. Further, Ullman (2012) advocates pacing the data collection at a speed that allows the researcher to be comfortable and the space to process the experiences arising from the interviews. I believe that these suggestions from Campbell (2002) and Ullman (2012) fit well with the grounded theory constructivist approach, as well as with APA ethical guidelines for

conducting research. A final area of ethical consideration of which I was aware was attending to personal accountability through continuous consultation with the research participants to maintain accurate data, as well as through thoroughly documenting and outlining my entire research process, codes, categories, and eventual theory.

Summary

In this study, I employed a constructivist grounded theory methodology to explore the relationship of couples in which the female partner had been sexually victimized as an adult outside of the relationship. Community and purposive sampling strategies were used to identify participants. I used line-by-line, categorical, and theoretical coding to analyze the transcribed data and developed a theory grounded in the participants' experience. The constant comparative method allowed data analysis to inform future data collection until saturation was reached, and a theory emerged. Approaches were employed to maintain ethical research standards and balance my own experiences as a human being and as a researcher. Through these processes, I sought to develop a theory of the relational dynamics of these couples grounded in the participants' experience.

CHAPTER IV: FINDINGS AND LITERATURE

The main goal of this study is to explain the effect of previous sexual assault within a committed opposite sex relationship. Eight people, comprising four couples, were interviewed in 30 to 60 minute sessions. Each interview was transcribed by a transcriptionist and coded by the researcher. The transcriptions were hand-coded line-by-line, resulting in over 300 initial codes. Each initial code was then grouped together to form 10 categories and eventually evolved into themes, which are discussed in detail below. The categories resulted in a preliminary model that exposes the relational impact of sexual assault on committed couples. This chapter serves to introduce the participants in the study, provide an overview of the emerging theory, and discuss in detail the themes that emerged using thick descriptions and incorporating the participants' explanations and examples. Literature that helps to explain the lived experiences of the couples and the model are also explored.

Participants

Participants were recruited from a community sample via word of mouth through electronic solicitations including Craigslist and Facebook. If couples were interested in participating, they were directed to a screening using the Qualtrics online data collection system ([Appendix C](#)). Once couples were deemed appropriate for the study, they were contacted via email to schedule interview times ([Appendix D](#)). Couples who did not meet inclusion criteria were contacted and informed that they were ineligible. Partners within each couple were interviewed individually, one right after the other, with the female partner interviewed first. Couples were assigned pseudonyms by the researcher and have

been referred to as such throughout the process. Each couple will be introduced with a brief description of their relationship and individual characteristics.

Eve and Nolan. Couple One included Eve and Nolan. They are an African American couple in their early 20s and have been dating since 2011. They were in a long-distance relationship for two of those years, but Nolan recently moved and they are now living together. Eve is a college student studying psychology and Nolan was unemployed at the time of the interview. Eve and Nolan described their relationship as “happy.” Eve is involved in campus organizations that focus on feminist issues, including sexual assault. Eve reported being sexually assaulted while attending a college campus party in 2011, and disclosed her assault to Nolan when they first began dating, two to three months after the assault.

Amber and Grant. Couple Two included Amber and Grant, who have been married for almost five years. They are both White, and Amber has a son who lives with them. Both work full-time and are in their late 20s. This is Amber’s third marriage. Amber and Grant emphatically described their relationship in positive terms. Amber’s second marriage and the assault she experience by her husband is what she focused on when discussing her and Grant’s relationship. She disclosed the sexual and physical assault she experienced in her second marriage to Grant at the beginning of their marriage to one another. Grant also disclosed a history of childhood abuse, although he denied any sexual abuse.

Isabelle and Oliver. Couple Three included Isabelle and Oliver, who have been together for 10 years, and are in their late 20s. They are both White and have no children; however, Isabelle is the legal guardian of her sister who is 17 years old. Isabelle is a

graduate student who was preparing to begin a Ph.D. program at the time of the interview. Oliver works full-time. Isabelle and Oliver reported having a strong relationship. Isabelle reported she was raped when she was 16 while attending a party with her older sister. She disclosed the rape to Oliver after they had been dating for five years.

Abigail and Dustin. Couple Four included Abigail and Dustin. They have known each other for approximately 20 years, but have only been in a romantic relationship for six of those. They are in their mid-40s, and both have children from previous relationships who do not reside with them. Both are unemployed and on disability because of previous injuries. Abigail shared her experiences with her ex-husband, which included physical and emotional abuse. She disclosed to Dustin at the beginning of their dating relationship. Dustin reported he was abused as a child, but disclosed no sexual abuse.

The Model

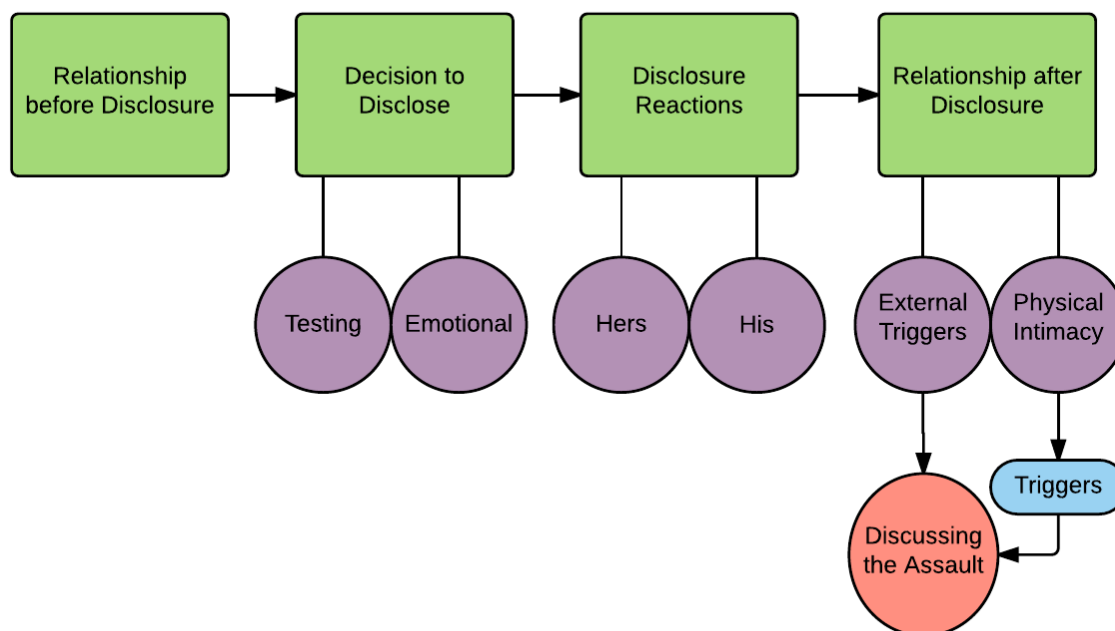


Figure 1

After coding was completed, the pictured model (Figure 1) emerged. Overall, the women decided to disclose because they felt secure in their current intimate relationship. Disclosure itself happened for one of two reasons: (a) either to test the relationship and partner to make sure that it would last, or (b) because the women became overwhelmed emotionally thinking about the assault. The decision, no matter why it was made, led to the response of both individuals in the relationship. General responses were positive for both parties, although there were nuanced pieces that appeared to be relative to the sex of the person. After the disclosure, the relationship changed, but it was difficult for the participants to define. The most salient change appeared to be in relation to physical intimacy and discussing the assault. Discussing the assault only occurred after the female partner was triggered for various reasons, including during sex. The following pages will

contain in-depth descriptions of each portion of the model with excerpts from the interviews and member checking used to corroborate the model.

Relationship Before Disclosure

The nature of the romantic relationship before disclosure emerged from the data. It became apparent that in order for the survivor to feel comfortable disclosing her assault to her current partner, there needed to be a base that felt secure and safe. Ahrens and Aldana (2012) found that women tend to disclose their assaults to people whom they considered to be close to before the disclosure. That begins to lay the groundwork for the importance of the romantic relationship. According to Gottman (1993), overall level of positive affect and an ability to reduce negative affect during conflict resolution are the two hallmarks that make a marriage work. In Gottman's theory of the Sound Marital House (1999), he expands on those two ideas. The Sound Marital House posits seven floors that create the foundation for a healthy marriage. The first three floors focus on friendship and include hope, aspirations, affection, and "turning toward" your partner using positive sentiments. The next floor is positive sentiment override, followed by regulation of conflict through problem-solving, then supporting one another's dreams. The top floor consists of creating shared meaning. Gottman identifies these characteristics as the building blocks to a strong relationship, one that could potentially allow the women to feel safe in disclosing their assault experiences. Abigail, Eve, and Amber each discussed what the relationship was like prior to disclosure using words like "open," "easy," and feeling as if they could "tell their partner anything." Those feelings appeared to lay the groundwork for making the decision to disclose.

Decision to Disclose

Deciding to disclose a sexual assault is an intensely personal decision wrapped in a myriad of emotions. Previous research indicates that there should be a secure base for the survivor to feel as though she will not be judged for the assault (Ahrens & Aldana, 2010). In addition, survivors report being anxious about the potential responses that could happen because of the disclosure (for a review, see Ullman, 2003). Studies have suggested a relationship exists between disclosing an assault and less subsequent emotional distress (Kearns, Edwards, Calhoun & Gidycz, 2010). The decision to disclose the assault appears to be twofold: (a) as a test of the relationship, or (b) she was emotionally overwhelmed.

Two women participants, Abigail and Amber, reported that they felt they needed to tell their partners to make sure their partners would accept them. Amber stated that “...it is best that you get dirty secrets out in the open first and foremost because a lot of people can’t deal with that.” Abigail noted that she had told previous partners prior to her relationship with Dustin. She reported that some responded with “I don’t care.” Abigail went on to state, “that was kind of a deal breaker when I was saying you need to know about this part of my past, and they were like ‘well it doesn’t matter,’ that tells me that, well, that I didn’t matter.” In the same vein, Amber talked about her “baggage” and that in order for her relationship with Grant to be the best it could be, Grant needed to know everything.

The other reason the women decided to disclose appears to lie in feeling overwhelmed by emotions related to the assault. Eve reported that she disclosed as she and her partner were about to have sex for the first time:

...we were about to do something sexual, and I just felt really weird, and so I just explained to him what happened and that was why I was like...I kind of got upset really and just felt like it was necessary that I explain to him that was why I was having that reaction. --Eve

Eve continued by saying that she felt as if she was “still a little hurt by it, like I am still a little bit fragile.” When Eve responded to the member checking, she clarified saying that the decision to disclose was mix of being at the beginning of the relationship and her feeling overwhelmed by the emotions. Isabelle reported that she disclosed because of intense emotions she was experiencing. She and Oliver had been together for five years when she ultimately decided to share her story:

I was getting more and more and more PTSD symptoms, getting more flashbacks, thinking about that, feeling more preoccupied by it, whereas in the past I had kind of just shut it out. Then one night we went out with friends, we had a few drinks, and I don’t know why but for whatever reason I couldn’t stop thinking about it. So when we got home I just started crying and I just told him about it. --Isabelle

Isabelle notes the power of feeling overwhelmed by memories of the assault and how these feelings can force one to disclose what happened, particularly as she and Oliver had been in a relationship for a long time prior to disclosure.

The women recalled in vague terms what the emotional aspect of disclosing to their partners was like. Abigail described it as “tough” and Amber described the act of disclosing as “really difficult, really uncomfortable...” and embarrassing. Isabelle, on the

other hand, described it as, "...really hard, and really not hard." She attributed it being "not hard" to her partner's response.

Response to Disclosure

Survivors report being anxious about the potential responses that could result from disclosure. In the participants' eyes, their partners' potential response would inform their decision whether to stay or leave the relationship; thus, the reaction partners displayed was crucial. Ultimately, responses to the disclosures were overwhelmingly positive. The female partners noted feeling a sense of relief at having shared their sexual assault experiences, and perceived all responses to be positive, highlighting support, caring, and understanding. The males reported feeling out of control, unable to do anything, and angry with the perpetrator(s). Of interest is that while the females perceived their partners to be supportive and caring, they never mentioned their partner's anger; however, the male partners unanimously discussed feeling angry. That is not to say the men could not be angry and supportive simultaneously, only that their female partners never perceived their anger. This finding is reminiscent of Ahrens and Aldana (2012) who described a similar phenomenon, stating that most disclosures received mixed reactions of both positive and negative support, but that almost all adverse reactions (with the exception of treating the survivor differently) were ultimately perceived in a positive light. Below, the differences between the male and female partners in their responses to the disclosures are discussed.

Her disclosure experience. As stated above, the women overwhelmingly felt as if their partners were supportive. Amber described her experience as, "He put his arms around me and said, 'I'm really sorry that happened to you.' He said, 'If you need to talk,

then I'm here to talk. If you just want me to hold you, then I can hold you. Just tell me what you want me to do.'" That sentiment was shared among the female participants, with all women using words like *caring*, *sensitive*, *supportive*, and *understanding*. Additionally, the women reported that their male partners attempted to comfort them in some way. When asked about why they believed their partners' responses were so positive, the women attributed it to their partners' personality characteristics and past experiences. Abigail and Amber attributed the responses partly to their partner's own abuse experiences themselves, as well as their partners knowing other women who had disclosed a sexual assault.

For themselves, the women reported feeling relief at being able to both tell their partner and at his response. Eve stated,

It felt good because I know that it is a big deal, so it felt good to be able to tell someone that cares about me, and he didn't judge me or make me feel like it was my fault. I didn't get the reaction that I felt that I would get from people. –Eve

She went on to describe disclosing her assault to her sister who blamed Eve for what happened. She stated that Nolan's response was a marked difference from her sister's reaction. Similarly, Amber said, "It was a lot of weight off my shoulders to have him be so accepting of it and accepting of me and all my baggage, and it was really nice. I had a really good cry."

The women also recognized the challenge and potential burden that disclosing their assault could have on their partners. Isabelle stated, "Thinking about it, it is kind of like an impossible position for him too, to have someone tell you that, because you don't

know what you are supposed to do and say.” The women appeared to understand the difficulty that sharing their story would have on their partners.

Importantly, the women shared that while disclosing their assault experiences was significant and helpful as they now had a partner in the healing process, the disclosure did not negate the negative emotions they were experiencing because of the assault. This seems notable because the men shared similar insights. For example, Amber said, “I get frustrated with myself because it is still affecting me. I don’t think I could ever put into words how it affected me in ways that he can completely understand...” That quote seems to capture the experience of all the women. They wanted their partners to understand their experiences, yet often felt unable to explain it adequately, in their eyes. As will be discussed further, the male partners agreed that they could see how the assault affected their female partners.

His disclosure reaction. For their part, the men appeared to recognize the importance of the disclosure but also reported feeling ill-equipped to handle their partner’s emotions. Each male interviewed discussed the wish that they could have been more prepared, but also voiced the knowledge that receiving the disclosure is not something one can really prepare for. Grant shared, “It is not like anybody can be prepared for that kind of information, never any way to just be prepared for it.” Furthermore, Nolan stated, “I want to learn more about it, and then maybe comfort her even more than I can now” He added,

I don’t know that much about rape because I’m obviously a guy, it is different in our world and culture. So it is kind of hard for me to

understand, but I try to have her tell me more about it so I can understand and comprehend when she is feeling bad about it. --Nolan

The men unanimously reported the importance of supporting and being there for their partner during the disclosure. Grant stated, “I felt empathetic towards her and I wanted to help her and help her push past that and feel more comfortable with herself again.” Oliver discussed feeling sad for Isabelle as she shared her story with him, and Nolan noted that it seemed surreal to hear what had happened to Eve. Dustin shared that he tried to reassure Abigail, saying to her, “...this is not [your] fault that this happened to [you], that you should be mad at him and not [yourself].”

In addition to attempts at providing support, and seemingly being successful given what the women shared, each male partner reported feeling angry at the perpetrator(s). That anger is important to note as previous research indicates that there are positive and negative reactions to disclosure (Ahrens, 2007; Ullman, 1996a, 1996b). There are two categorized ways to respond to a survivor of an assault who is disclosing his or her history. Positive reactions include listening, providing emotional and informational support, offering validation/belief, and providing tangible aid (Filipas, 2001). Negative reactions include treating the victim differently, blaming the victim, denying that the rape occurred, or becoming angry with the victim (Filipas, 2001). What is interesting with respect to the couples who participated in the current study is that while the men reported feeling angry at the time, they were able to move past that anger to support their partners. That does not mean that the anger is not there. Oliver stated, “I assume myself some sort of targetless anger at that person,” and Dustin reported, “I was extremely pissed off at him.” Nolan summed it up well, saying, “When she told me about it I tried to be as

supportive as I could and not try to lay anything on her or hurt her or anything else like that. You know, this is not her fault.”

The final piece to note about the males’ responses were their observations about their partners. The men discussed noticing little and big ways that the assault continues to impact their partners. For example, Nolan shared that Eve will no longer attend parties although she fails to attribute it to her rape. Grant stated that his partner seems to struggle with being comfortable with herself, and Dustin reported that his partner sometimes believes that the assault was her fault. All of these thoughts were corroborated by the women, but neither party shared that they talk about those observations with one another.

Relationship After Disclosure

Although the disclosure was scary, yet important to the women, most couples felt that the relationship was strengthened to some degree after the disclosure, noting the disclosure became a turning point in their relationship. Ahrens and Aldana (2012) found a similar result in their research, noting that 47% of their participants indicated that the relationship became closer because of the disclosure. In this study, the two most prominent ways that the relationship was affected by the disclosure was (a) their physical intimacy, particularly sex but also general touching (e.g., hugging), and (b) outside triggers that result in a flashback or a moment of panic for the woman. The following pages will address the relationship after disclosure.

Isabelle stated it beautifully when she said, “I do think [disclosing] was more of a turning point for me than necessarily the relationship, but that inherently is good for the relationship.” As discussed above, the women reported that disclosing their experiences and then feeling supported and validated by their partner helped how they viewed

themselves, and also strengthen their romantic relationship by realizing they had a safe and understanding person in their life. Eve stated that the disclosure and her partner's positive response showed her that she could "be open with him and he would understand [her]." When asked if the disclosure actually changed their relationship in any way, participants were unsure. Both the men and the women spoke of the high probability that the disclosure did effect change, yet they do not know or notice specifically how.

I would say if it was a scale of *Never* to *Always* with *Sometimes* and *A Lot* and *Infrequently*, I would say *Infrequently*. It is not *Never*, but it is very seldom that I think things come up nowadays. --Oliver

Isabelle summarized the experience of disclosing by saying, "I really don't know if it changed it, but I think it brought us closer together since I shared this really intimate detail. I certainly trusted him a lot more after I trusted him [with my sexual assault experience]."

External Triggers. Automatic reactions – triggers – were not originally a part of the resulting grounded theory model. However, through interviews and member checking, it became apparent that being triggered is a very important part of the relationship, not because of the triggers but because of the response from male partners and the opportunity to support the women. A "trigger" is shorthand for something happening which can bring a person back to the feelings experienced during an assault. For example, if a woman had been drinking whiskey and was assaulted later that evening while intoxicated, the smell of whiskey could trigger her and bring her back to the assault, creating a flashback. Triggers come in many shapes and forms and activate the amygdala, which then releases stress hormones and nervous system responses (Van Der

Kolk, 2014). These triggers can make it difficult to remain in intimate partner relationships; thus, understanding what situations and stimuli may trigger such flashbacks and feelings is essential. Importantly, triggers can create an opportunity for the couple to discuss the assault. The two triggers women participants in the current study shared were categorized as external triggers (e.g., from a radio news story) or sexual triggers. Sexual triggers will be discussed in the physical intimacy section, whereas the following section will focus only on external triggers.

The triggers the women discussed included campus activities, news stories, the house in which one woman lived, and watching television shows. Eve shared that she could be triggered because of a campus club in which she is involved, "...sometimes we talk about sexual assault and stuff like that in there. Or like if I talk about it in one of my women's studies classes or something." She also shared that she had been fairly preoccupied in the past with flashbacks and triggers from the assault, but that as time has progressed she does not experience them as often. Amber discussed how she was triggered because of the house in which she was living:

So, a lot of times just looking at a certain wall or just really little insignificant things would kind of make me have a flashback or if Grant and I were having an argument if he would tense up, I would retreat and you know I wouldn't say anything, I wouldn't look at anything. –Amber

Recognition of being triggered was important to the women because it then allowed them to discuss the trigger and subsequently the assault with her partner.

Physical Intimacy. Sex and touch are often a component of the romantic relationship. Although a couples' physical intimacy may ebb and flow, it is reported to be

an important part of their relationship (Elliot and Umberson, 2008). Women who have been sexually assaulted tend to struggle with sexual intimacy for a variety of reasons (Maltz, 2002). Maltz (2001) suggested that survivors may struggle with avoiding, fearing, or lacking interest in sex; approaching sex as an obligation; engaging in compulsive sexual behaviors, experiencing intrusive or disturbing sexual thoughts or images, and having difficulties being present during sex, among others. It appeared that, for these participants, the assault, rather than the disclosure of the assault, seemed to have the most impact on sex; however, the disclosure allowed there to be open conversation about sex and sexual interactions, and, importantly, created a space for the men to ask about sex.

The most salient point regarding sex among the current study's participants was sexual interaction, defined by the importance of the male partner asking for permission and allowing the female partner to be in control. Eve stated, "It is good because I never feel like pressured into having sex or anything because we always talk about it first." When asked what it would be like if they did not discuss sex first, she began crying and said, "just doing it would be a trigger." Similarly, Amber shared, "Being open enough to say 'no,' that has been really nice." From the male's perspective, Oliver stated that, "She would say, 'We can't do that,' and we wouldn't." What is interesting to note is that the women spoke of having sexual control in their relationship much more vividly than the men did. Meaning, the men discussed their partners having control of their sexual relationship nonchalantly as if this is how they would have always been and that the disclosure and knowledge of their partners' sexual assault did not impact their sex lives.

Sexuality also seemed to be an important part of the conversation about sex. Amber and Grant discussed sexuality at length with the researcher, focusing on the ability

to discuss their sex life with each other in an open way. Likewise, Abigail also shared, "...he has never forced me or pushed me into being intimate when I'm not feeling good or I am not up to it." In that statement, Abigail alludes to not feeling confident sexually and that it was incredibly important to her to have a partner who would be respectful of those feelings. In the same vein, Grant discussed that by Amber being willing to talk about their sex life, he was able to share with her that even if they are not having sex, that she was attractive and appealing to him.

A specific component of sexuality among the women that came to light is sex being a corrective experience with their partners. Amber, Isabelle, and Abigail spoke about this idea directly, while Eve alluded to the possibility.

...I think because I had been raped so young and that was sort of my first sexual experience basically, I think when we first started dating, I viewed kind of anything sexual as like negative and I didn't like it and I didn't enjoy it, but it was like a necessary evil. Then I think after we had been dating for a couple years, that changed a lot. Even before we started dating and I had other boyfriends, even if we were just like kissing or whatever, I don't know I always felt like I was doing it for them, not for me. Then over time after we had started dating, I got more and more comfortable, and I think that was a big shift for me, like "Oh this isn't something I'm doing for him" and I can enjoy this. So it did take a little while, but it did happen. --Isabelle

Amber shared a similar experience as Isabelle:

[Grant] was the first man I was with after my second marriage, so at first things were a little tenuous, especially because my second husband would want me to do things and participate in things that I was really uncomfortable with. But Grant, he is just basically, you know tell me what you what. He really is acclimating and tries to make me happy in everything. --Amber

Additionally, Abigail stated that “He told me he would make love to me in a heartbeat, but only when I’m ready, and that made a difference.” The idea of corrective sexual experiences can be inferred from Eve’s discussions about Nolan’s willingness to stop having sex when she is uncomfortable or asking her permission to have sex. Maltz (2002) discusses a similar idea in her writings about treating sexual intimacy concerns after a rape. She describes “sexual healing” as a program that includes gaining a deeper understanding of what happened and how it influences sexuality, changing attitudes about sex, developing a positive sexual self-concept, and coping with triggers. Further discussion regarding the corrective sexual experience is below.

Sexual Triggers. One cannot discuss sex and sexuality after an assault without considering the potential of triggers arising during sex. The *Journal of Sexual Medicine* (2013) highlighted that a trigger can create feelings of fear, numbness, disassociation, being dirty, ashamed, ugly, and experiences of self-hatred or anxiety. Although none of the couples were specifically asked about sexual triggers during their interviews, almost all participants alluded to or forthrightly discussed its impact on sex and intimacy. The women discussed triggers within terms of their partners being responsive and attentive to them, as discussed above.

All four women acknowledged they had been triggered during sex. In fact, the reason Eve disclosed her assault was because she and her partner were about to have sex when she was triggered: “I kind of got upset really and just felt like it was necessary that I explain to him that was why I was having that reaction.” Amber discussed being triggered during sex and the importance of being comfortable with Grant in the same breath, “...but we are at a point that we are comfortable with each other, and if one doesn’t want to, then it is okay.” Oliver shared a time when he noticed that Isabelle had been triggered during sex:

...I do remember an instance or two when, I don’t know if maybe we were drunk or something like that, and any time hands got near her clavicle or the neck or anything like that, she was very uncomfortable and would stop.

The importance of the female partner being in control, especially in terms of halting a sexual interaction, cannot be emphasized enough. Osterman, Barbiaz, and Johnson (2001) write about the importance of physician’s in the emergency department discussing the impact that rape can have on intimacy, including the potential for sexual touch to trigger the survivor, and the importance of the partner responding positively to her needs. The women, in the current study, reported that being able to control their sexual relationships was imperative to each of them, and the men appeared to recognize that either consciously or subconsciously. Isabelle shared a way that she had been able to cope with the triggers during sex, “I think actually the way that I have been able to deal with it is kind of opening my eyes while we are kissing or something, and if I can open

my eyes and see his face and it sort of reorients me and helps me be in the moment and not let these thoughts get out of control.”

Discussing the Assault. Each couple was in agreement that discussing the assault rarely happened as a spontaneous discussion. The lack of discussion seems to be linked to not wanting to upset either partner, with the primary belief being that if the female partner wanted to talk about the assault, she would. Discussions appeared only to occur if a trigger instigated the conversation. From Eve,

I feel like I'm not triggered that often but it does happen sometimes. Most recently, I was watching a documentary called *Hot Girls Wanted* and although I knew it was about the amateur porn industry, I don't actually watch porn so I wasn't prepared for it as much as I thought. In the movie they showed girls doing/discussing 'forced blowjob' scenes and that triggered me. I felt really disgusted and then Nolan tried to cuddle me and I asked him not to touch me and he jokingly said no before letting me go but just hearing him say no made me feel really overwhelmed and I actually left my house. I felt like I just needed a break but when I came back, we talked about it and he understood that sometimes I will be triggered and it may seem like I'm being sensitive or overreacting but I'm not. --Eve

What Eve shares is a very powerful, intimate look at the couple's relationship and the difficult balancing act a couple must manage when triggered and subsequently discussing the trigger/assault. Although Nolan upset Eve by not listening to her initially, Eve was able to come back to him and explain what happened and how he needed to help her in

the future. Similarly, Isabelle voiced the fear that discussing a trigger, particularly about sex, would give Oliver the wrong impression:

...I felt like he was worried about it, and yeah, I think he was worried about it and like worried that something he was doing would make that happen or that I wouldn't want to have sex or something, but that is not how it is. --Isabelle

After the initial disclosure, the couples reported never discussing the actual assault again. Rather the male partner may check in with his female partner because something seems to have happened. As an example, Grant shared,

I end up bringing it up only because she will kind of start locking herself into herself, just going into her own head, and I will start noticing that something is wrong, something is not right, that she is upset somehow, and I will ask her. Usually at that point she will do one of two things, say *"No I'm fine, everything is good, I'm just really tired or cranky"* or something like that, or she will just go ahead and outright open up to me. Usually when she tells me, *"I'm just really cranky,"* by this point I kind of know she is fibbing, and I really have the sense that something else is going on there. So we will sit and talk about it. I just want her to know that I'm going to be there for her when she needs me to be there. --Grant

The reason the assault is not discussed appears to lie in the difficulty of having the conversation. Isabelle worded it this way,

"I think sometimes it was hard to talk about it and sometimes easier to talk about it. I think I've gotten better at it and just saying what I need to say. I

used to not do that. But it is still hard. I guess I don't know how to make it not hard."

From the male perspective, Nolan stated, "I am not totally excited about bringing it up because she doesn't like it and I don't like it, so we just keep it chill. We have more things to talk about than that anyway."

Literature

Consistent with grounded theory, the research stayed beside the literature until coding began. As codes and eventually categories began to emerge, so did ideas of potential literature areas that could enrich the phenomenon. Although some literature has been examined during the findings, there is other literature that seems appropriate to address as it could help to explain the findings and direct future research. In particular, I will focus on research that pertains to shame resilience theory, attachment theory, and emotion focused therapy. Emotion focused therapy (EFT) and attachment theory are interlaced, with EFT often referring to the attachment literature.

Shame and Rape Myths

Feelings of self-blame, shame, self-doubt, and guilt are ongoing struggles for women who have been sexually assaulted. These feelings, particularly shame, are often tied to the influence of cultural messages related to their experiences of rape (Leonard, 2001), known as rape myths. Many studies have examined attitudes about sexual assault and rape (e.g. Burt, 1980; Check & Malamuth, 1983; Franiuk, Seefelt & Vandello, 2008; Hall, Howard, & Beozio, 1986; Lev-Wiesel, 2004). Burt (1998) addressed the fact that rape myths are highly accepted and fuel the social reactions to survivors, as well as how they view themselves. Rape Myth Acceptance (RMA) is conceptualized as a number of

stereotypic ideas people have about rape, such as: women falsely accuse men of rape; rape is not harmful; women want or enjoy rape; and women cause or deserve rape by inappropriate or risky behavior (Burt, 1980). Burt described that rape myths are related to other pervasive attitudes like stereotyping, distrust between the sexes, and the tolerance of interpersonal violence. Rape myths also function culturally according to Lonsway and Fitzgerald (1994). In this sense, men may use rape myths to justify sexual violence, whereas women may use them to deny their vulnerability. For example, if a woman believes that only those who dress inappropriately are raped, she would believe she is safe from rape by dressing in a way she deems appropriate. Likewise, if a man believes that women enjoy forced intercourse, he may be inclined to believe his forcing a woman to have sex is not rape if her body physically responds.

Rape myths may lead into dangerous, stereotypical rape scripts. A rape script is a cognitive structure which a person, male or female, holds concerning an assault (Clark & Carroll, 2008). Studies of rape scripts support that scripts for rape often involve high levels of force by the assailant, clear resistance by the survivor, and a non-intimate relationship between the survivor and assailant, usually labeled as a stranger (Littleton & Axsom, 2003; Littleton, Axsom, Breitkopf, & Berenson, 2006). Another problem that involves myths and scripts is that rape can be difficult to define (Muehlenhard, Powch, Phelps, & Giusti, 1992). Oftentimes, rape is assigned a very narrow definition, which does not account for the overwhelmingly most common form, acquaintance rape (Payne, Lonsway, & Fitzgerald 1999). Rape myths and stereotypic rape scripts enter into a loop; being exposed to stereotypic rape scripts strengthens rape myths, and being exposed to rape myths strengthens stereotypic rape scripts. Myths and scripts play a part in how

social reactions are given and received on behalf of survivors. Victims who hold onto these beliefs are more likely to believe that the rape was their fault and are often worried that friends and parents may find out about their experience (Hall & Gloyer, 1985). Consequently, they are also more likely to experience shame about their sexual assault experience. That shame has the potential to turn into PTSD.

Lee, Scragg, and Turner (2001) have proposed a clinical model of shame-based PTSD that suggests that shame can perpetuate trauma through the interpretation of the traumatic event. There are two pathways to explain this, with the first referred to as “schema congruence,” which happens when the event confirms shame-based beliefs about the self and others (e.g., “I knew I was useless”). If this schema is activated, the person will then understand and process the event from that place of shame. In order to cope with this painful experience, the person will use avoidance strategies that maintain the trauma. In contrast, “schema incongruence” arises when the sense of self is “attacked but not defeated.” The authors write that what is shameful is represented in schemas of self, the world, and others, and will ultimately vary according to what the person has learned to feel shameful about from their family and culture.

According to Brown (2006), shame is a silent epidemic that facilitates disconnection. Shame as a construct is defined by Brown (2006) as “the intensely painful feeling or experience of believing we are flawed and, therefore, unworthy of connection and belonging” (p. 30). Shame has been associated with a host of issues including sexual violence. Within the literature on shame and sexual violence, guilt and shame are often used interchangeably to describe the reaction to trauma. Although this is a misnomer, it is important to note the differences between shame and guilt as affective emotions. Guilt,

like shame, is a self-conscious emotion, meaning that both focus on the self and involve negative feelings. The difference lies in how the person views the self. Guilt focuses on the belief that a person has done something bad, whereas shame focuses on the person inherently being bad (Brown, 2006; Tangney & Dearing, 2002). Shame motivates one to hide their self as opposed to fixing the failure (Tangney & Dearing, 2002). Shame could also be the reason why women choose not to disclose their assault if they do not fit the rape scripts that society has constructed.

Shame Resilience Theory. Shame resilience theory (SRT) was developed by researcher Brené Brown (2006), and it has echoes of Lee, Scragg, and Turner's (2001) model. Brown (2006) argues that a person can develop shame resilience through practicing four behaviors: (a) recognizing shame and shame triggers, (b) practicing critical awareness, (c) reaching out, and (d) speaking shame. Brown (2006, 2010) argues that the first step to shame resilience is recognizing the emotional and physical signs of shame. In doing so, a person is able to understand the experience of shame and then seek help. Practicing critical awareness allows a person to recognize others through social and cultural contexts. Reaching out includes forming relationships with others who can be empathic when we experience shame. Brown (2006) writes that reaching out for support, and importantly, receiving empathy, will mute the shame and judgment, and empathy is incompatible with shame. This allows a person to recognize that the most isolating experiences (shame) are also the most universal, thereby understanding that he or she is not defective or alone in his or her experiences. The final construct within SRT is speaking shame, which involves discussing and deconstructing shame experiences. One must also be able to use language and have the emotional competence to make this

happen. The emotional competence is learned through separating shame from other emotions such as fear, guilt, humiliation, anger, and embarrassment.

For the purposes of this study, the SRT constructs of critical awareness and reaching out are important. First, critical awareness was something the men seemed to do unknowingly. The men all discussed their partners without defining them in terms of the rape experiences they had. Often, interviews with men were shorter than with their partners; this can be attributed to both gender norms (e.g., men are traditionally stereotyped as not discussing difficult things), as well as not reducing their partner to a “victim.” Oliver, for example, discussed Isabelle as a survivor, stating that when she spoke about her experiences in an activist role, he was in awe of her. But, he also mentioned her numerous other achievements in the academe, thus not reducing her to the assault. Likewise, when Nolan was asked how they discuss his partner’s assault, his response was that “we have other things to discuss.” That statement could be taken to mean that they avoid the discussion, but I believe, like the other partners, he views Eve as more than her rape experience. Brown (2006) writes about the phenomenon stating that her participants often worried about being defined by their trauma and that social-cultural messages can make that seem true. The men in this study chose not to define their partners by their trauma, and the women may choose to follow that path as well.

Additionally, reaching out is an important aspect of the couple relationship. First, the women reached out when they disclosed and shared their painful experiences to which they had attributed some type of schema (Lee et al., 2001). By reaching out to their partner, the women were able to share their shame of the rape and provide the partner an attempt to be empathetic. According to Brown (2006), empathy is an important process to

fighting shame. Brown (2006) conceptualizes shame and empathy as anchors on a continuum, with shame on one end resulting in fear, blame (of self or others), and disconnection, and empathy on the other end, cultivated by courage, compassion, and connection. Brown (2006) defines empathy as a skill and stresses practicing and giving empathy regularly. She uses Wiseman's (1996) work that outlines the four defining attributes of empathy: (a) to be able to see the world as others see it, (b) to be nonjudgmental, (c) to understand another person's feelings, and (d) to communicate your understanding of that person's feelings. The male partners in the current study all made attempts to show empathy as Wiseman's (1996) work outlines it, and while perhaps not perfectly practiced, the women were receptive to these attempts. Second, the women continue to be courageous and reach out to their partners when they are triggered. This is noteworthy because Brown (2006) writes that we do not continue to reach out if we are rebuffed in our efforts. The men have shown empathy and care to their partners, and thus, their partners are willing to continue to reach out to them when they need support.

Shame screens. Brown (2006) also focuses on shame screens as a defense mechanism when a person experiences shame. Building on Hartling, Rosen, Walker, and Jordan's (2000) work, Brown (2006) asserts that when shame is experienced, the limbic system in the brain is "hijacked," and the response of fight, flight, or freeze takes over. In social situations, this means that the most basic urge to protect from shame is to (a) move away, (b) move against, or (c) move toward. Moving away is characterized by the desire to withdraw, hide, stay silent, or keep secrets (Brown, 2006; Hartling, Rosen, Walker, & Jordan, 2000). Moving against includes trying to gain power over the other person, being aggressive, or attempting to control the situation. Finally, when a person practices

moving toward, he or she may seek to people-please or attempt to belong. The men noted when they saw these particular shame screens employed by their female partners. For example, Grant shared that he would try to draw Amber out when she would begin to move away due to being triggered (or experiencing shame) by something that reminded her of the assault experiences. The willingness for the male partners to see around these shame screens seems to be an important characteristic of the relationships. It again provides a chance for the men to practice empathy and support their partners.

Attachment Theory

Attachment theory initially sought to explain the nature of a young child's bond to his or her caretaker (Bowlby & Ainsworth, 1991), as healthy attachment relationships are an important aspect of development throughout the lifespan (Fraley, 2002; Mikulincer & Shaver, 2007). Berman and Sperling (1994) defined adult attachment as the desire to be in a relationship with specific individuals who provide subjective physical and/or psychological safety and security. Most individuals have many relationships with varying degrees of intensity and significance of the individual, but only a handful offer the opportunity for security to be classified as "attachment relationships" (Berman & Sperling, 1994). Among these relationships are romantic, intimate relationships with other adults.

For adults, the need and desire for a secure base and safe haven are central to romantic relationships (Feeney, 2004). Feeney explained that caregiving provides two functions for the individual: (a) a *safe haven* for the thorough fulfillment of the person's needs for security, and (b) a *secure base* where the person feels supported in her/his needs for autonomy and exploration. Collins and Feeney (2000) argued that from a

significant other's distress provides an opportunity for the partner offer support as a safe haven. Theoretically, support providers have the ability to satisfy their significant other's sense of felt security by responding to an attached partner's needs, which is crucial to the maintenance of his or her sense of felt security. However, fully responding to a partner's needs is much more complex than simply being available for support; it also entails providing the type and amount of support dictated by a given situation and an individual's needs. Depending upon the strength of the need elicited by the attachment system, the support behavior required could be intensive (e.g., physical contact) or it could be of lower intensity and require a more relaxed approach (e.g., verbal reassurance) to restore a sense of security.

To achieve a sense of a secure base, Feeney (2004) asserted that an individual's interpersonal relationship with an attachment figure must provide two general types of support: (a) support provided in times of stress or crisis, and (b) support provided in facilitating another's personal growth and exploration. Feeney asserted that one of the central roles of caregiving is the provision of a secure base from which the attached person is free to explore the larger world and return to the comfort, reassurance, and/or assistance, if necessary, of a secure base. To be a conscientious caregiver, the individual must be available and ready to respond with encouragement or assistance, depending upon the given situation to foster the attached partner's sense of security. Feeney concluded that, "good caregiving/support provision appears to be an ongoing process that occurs even when a partner's security is not immediately threatened" (p. 632). Essentially, "taking care" of a significant other involves accepting the responsibility of caring for that person on a continuous basis.

Feeney's theory has important implications for the findings in this study. Namely, while attachment styles were not overtly explored, previous research indicates that survivors report feelings of less confidence in others' dependability, less comfort with closeness, and an increased fear of abandonment (Thelen, Sherman, & Borst, 1998). This could explain why some of the women disclosed their assault as a test of their partner, although they believed their relationship was strong. Additionally, the idea of a safe haven that Feeney describes can account for the strengthening of the relationship after the disclosure. Because of the secure base that was established within the couple relationship, the partners were able to support fully their female counterparts in ways that were perceived as helpful by the survivors.

Emotion-focused Therapy

Emotion-focused therapy (EFT) is a theoretical approach to counseling that views emotion as the cornerstone of the construction of the self, one's experiences, and the meaning drawn from experience (Johnson, 2003). Psychological dysfunction is said to occur when clients have difficulty regulating their emotional experience, and/or develop maladaptive emotional schemes. Emotion schemes are the internal structures that create a variety of cognitive, affective, and sensory sources of information to create our sense of personal meaning. Maladaptive emotion schemes include those based on fear, shame, and distressed sadness (Greenberg, Rice, & Elliot, 1993). EFT refers to the attachment literature as a base for working with clients, arguing that a successful couple relationship acts as a secure base and is a safe haven (Johnson, 2009).

The maladaptive emotion schemes are reminiscent of the feelings that sexual assault survivors have discussed (e.g., Brown, Testa, & Messman-Moore, 2009;

Najdowski & Ullman, 2009; Neuman, Houskamp, Pollock, & Briere, 1996; Yuan, Koss, & Stone, 2006). In fact, EFT has been successfully used as a treatment option for survivors on an individual basis. One study found that using EFT for adult survivors of sexual abuse showed statistically and clinically significant improvements for most clients in many areas of disturbance, including general and specific symptomatology, current abuse-related problems, global and specific interpersonal problems, and self-affiliation (Pavio & Nieuwenhuis, 2001). Additionally, clients maintained treatment gains at nine months following the termination of therapy (Pavio & Nieuwenhuis, 2001). EFT is also a form of couple therapy that integrates experiential and systemic approaches to the process of therapeutic change, and has been applied to couples with partners that have a history of CSA. In a mixed-methods study, half of the couples reported clinically significant increases in relationship satisfaction, as well as the survivor reporting a decrease in trauma symptoms (MacIntosh & Johnson, 2008).

An important aspect of EFT is the idea of corrective emotional experiences. Greenberg (2010) describes it thusly:

A key way of changing an emotion is to have a new lived experience that changes an old feeling. New lived experience with the therapist provides a corrective emotional experience. Experiences that provide interpersonal soothing, disconfirm pathogenic beliefs or offers new success experience can correct patterns set down in earlier times. Thus an experience in which a client faces shame in a therapeutic context and experiences acceptance, rather than the expected disgust or denigration has the power to change the feeling of shame. Corrective emotional experiences in EFT occur

predominantly in the therapeutic relationship although success experience in the world is also encouraged.

The corrective emotional experience as described above is reminiscent of the corrective sexual experiences that the women in the current study shared. Although not therapy, the women's ability to control sexual relations with their partners provided corrective sexual experiences for them that aided in correcting previous sexual patterns. In MacIntosh and Johnson's study (2008), one of the thematic elements that emerged alludes to this idea of sexual control, as well. The authors write that survivors voiced needing to have control over sexual activity. Through EFT, survivors were taught to recognize their triggers and communicate those to their partners. Partners were supported in providing both physical safety and emotional intimacy needed to allow their survivor partners to feel as if they were respected, including allowing the survivor partner to have sexual control and avoid certain activities or positions (MacIntosh & Johnson, 2008).

Beyond corrective experiences is the concept of a secure base and safe haven. Although partners may provide each other with safety and comfort, paradoxically, they may also be the source of a substantial amount of stress. According to EFT theory, attachment insecurity can complicate the process of being present for the other partner. When this occurs, the insecure partner may begin to construe the other's behavior and responses in ways that maintain their distress. Negative schemes of the self as undeserving of love and belonging (shame) and belief that the other partner is undependable can influence the insecure partner's behavior. Since recovery from trauma generally involves the ability to create secure connections with others that offer corrective emotional experiences of belonging, a relationship which offers a safe haven

and a secure base creates the most basic condition for healing (Johnson, Makinen, & Millikin, 2001). In having that secure base and safe haven, the women are able to share their stories and triggers, and the men are able to respond in empathic, understanding, and supporting ways.

The secure base and safe haven are also important for sexual activity. Attachment is a powerful part of the sexual self-experience and relatedness. Secure attachment facilitates “relaxed and confident engagement” in sex (Mikulincer & Shaver, 2007). The integration of sexuality and attachment has to begin with the creation of safe emotional connection. Heiman (2007) writes that sex will not be fulfilling if attachment needs are not met, because sex is an exploration of each other’s bodies and mind. The implication is far reaching, indicating that secure attachment, based on being in tune and responsive to your partners’ emotional and physical cues, is the foundation for sex and consequently the foundation for a sense of security in each other. Because the participants shared positive stories of their sex lives further indicates that the survivors have found both a secure base and a safe haven within their relationship.

Summary

This chapter set out to explain the theoretical model that emerged from the interviews with four couples where the female partner had experienced sexual assault as an adult. Each section of the model was explained using quotes from the participants’ lived experiences. The existing literature was used to help provide rationale for the way the author connected parts of the emerging model that evolved from the data. Further, three theories including Shame Resilience Theory, Attachment Theory, and Emotion Focused Therapy, were discussed in depth to provide further justification for the resulting

model. The final chapter of this dissertation research will discuss the strengths and limitations to the study, future research plans, contributions to counseling literature, and finally, conclusions from the research.

CHAPTER V: CONCLUSIONS

The purpose of this study was to explore and create a theory that helps us understand how the disclosure of previous sexual assault affects a romantic couple. The study's purpose was met, yielding a model that explains what that process of deciding to disclose, reactions to the disclosure, and how the knowledge of a sexual assault impacts the couple. This section discusses the strengths and contributions this study makes to the literature, as well as outlines the limitations, and directions for future research, and conclusions that can be drawn from the current investigation.

Strengths of the Study and Contributions to Counseling Psychology

This study has several strengths and various contributions to the counseling psychology literature. First, it is the only study to date that explores adult sexual assault and its reverberations within a couple using qualitative methods. In particular, it is one of the only studies that focuses solely on adult sexual assault and creates a model to explain the phenomena within the intimate relationship. This study begins to explore the relationship dynamics for these couples, particularly in light of attachment and shame theories. The information gleaned from the study, especially about the support that partners provided in seemingly healthy relationships, could be invaluable to counselors working with couples where a partner has experienced sexual assault.

Additionally, there is a dearth of research that examines the experience from the perspectives of both partners in a couple relationship. This study answers the call for “both sides of the story” to be told. Additionally, this study, although not longitudinal in nature, interviewed couples who have known about the assault and been in a monogamous relationship with each other for at least three years. That is a major strength

of the study that allows for tentative conclusions to be assessed regarding the long-term impact of knowledge of the sexual assault on the couples.

One finding which has not been discussed at length is the need for partners of the survivors to feel more support. In particular, each male partner shared that he felt unsure how to be helpful to his female partner. Although their attempts at empathy were perceived as helpful by their partners, the men seemed to lack the self-efficacy and confidence in their ability to be supportive of their partners. There have been many calls to create interventions to help the partners of survivors, yet there seems to be little movement in that direction, and this area should be noted for consideration in practical implications. The counseling field as a whole would do well to provide support for romantic partners of survivors through support services and assistance.

Limitations

The main limitation of this study concerns the participants. Given that the current study is the one of the first to investigate previous adult sexual assault within the couple relationship, the study included stringent inclusion and exclusion criteria. Although saturation was reached for this group of couples, there are many different types of couples who have similar experiences who also deserve to be represented in the literature. One example involves couples where both partners have dual sexual trauma experiences. Throughout recruitment, eight couples were rejected from participation because the male partner disclosed his own sexual assault experiences. These experiences of male sexual assault are no less valid, yet they were not explored in this study. Similarly, couples where the female partner had not experienced an assault but the male partner had been victimized were not included in this sample. Further, same-sex couples and trans*

couples were also not included in this study. In order to fully develop a model that explains the phenomenon of deciding to disclose, reactions to the disclosure, and how the knowledge of a sexual assault impacts, these couplings need to be included in future research.

Similar to diversity of couples, there should also be more of an effort to include a diversity of experiences. For example, couples should be interviewed where there was not support offered by the non-survivor partner and the relationship eventually ended. Ideally, interviewing both members of the couple would be preferred, but even having the opportunity to interview one member of the couple to understand her/his experience and how that may fit into this model would be a step forward. This line of research could help us better understand why some couples are able to remain supportive and provide the safe haven and secure base, while others are not.

As always, there needs to be more research focusing on racial/ethnic minorities. This study's participants primarily identified as White, which leaves out the experiences of racial minority couples. Sexual violence is not something that only happens to White women. There needs to be more racial diversity among participants to create a better model and theory to explain the phenomenon explored in this study. In the same vein, there should be more geographic diversity among participants. Although this study was able to account for some geographic diversity, understanding the issue within couples across the United States would make for a more representative theory.

Future Research

There are many directions that future research can benefit the model. First, there needs to be more exploration of what makes a healthy couple. There appears to be few

studies that examines what constitutes a healthy couple. Communication literature has some published research in this area, but those studies appear to focus on defining dysfunctional couples. Although that area is an important area of knowledge, it leaves us in a bind as to what comprises a functioning, healthy couple. I believe the current study's findings will add important knowledge to that discussion, yet more research is needed both within and beyond the model generated.

Second, there must be more research focused on the decision-making process of disclosing to intimate partners. Existing efforts to understand crime victims' reasons for disclosure have focused on the decision-making process that precedes disclosure. Some literature suggests that victims evaluate the nature of the incident to determine if they have been victimized, social norms about the event, anticipated reactions, and how the disclosure would be personally beneficial (Bachman, 1993, 1998; Browne, 1991; Feldman-Summers & Norris, 1984; Greenberg & Ruback, 1985). However, there is still little understanding of the actual decision-making process, particularly within a couple relationship. The section of the model described as "decision to disclose" had the potential to be its own model. It appears that the whole decision process is much more nuanced than this study was able to address, thus there needs to be more research in this area.

Another area for future research lies within the area of triggers. In the current literature, triggers are often tied to post-traumatic stress experiences. However, the women in this study did not describe actively experiencing PTSD, yet they all discussed feeling triggered by seemingly innocuous events such as hearing a story on the radio or

watching something on television. Trigger responses in more casual atmospheres should be explored thoroughly to understand better the experiences of survivors.

Similar to trigger responses, more research should be conducted to explore *how* the couples learn to communicate about the sexual assault. This study served to lay some groundwork by finding that communication appears to happen only when the victim has been triggered. However, there appears to be more idiosyncrasies that should be examined.

A final area for future research involves parenting. Discussing sex with a child is value laden, yet it appears from the couples in this study that the experience of a sexual assault may change how one parents. Oliver and Isabelle alluded to the idea that the way they “parented” her sister was changed because of Isabelle’s experiences. Specifically, Isabelle stated that she is more frank in conversations about sex, but also struggles to not “helicopter parent” her sister because of her own fears of her sister being assaulted. Eve reported that she would be more likely to talk about consent to sex, specifically affirmative consent with any future children. It was beyond the scope of this study to investigate how sexual assault may change how one parents, but it is an area that needs further exploration.

Trustworthiness of the Qualitative Research

In qualitative research, one approach to assessing or evaluating the research is called trustworthiness (Marshall & Rossman, 1995). Other terms such as Standards of Validation (Creswell, 2013). There are many ways to address trustworthiness, such as spending time in the field with participants, triangulating the data, remaining vigilant to bias through researcher reflexivity, and memoing. More formally, Shenton (2004)

outlined four criteria that can be used to evaluate the trustworthiness of a study: credibility, transferability, dependability, and conformability. As the researcher, I recognized that the participants and I were constructing knowledge through our interactions and interpretations. I have incorporated this into Chapter 5 as opposed to Chapter 3, to serve as a final check of the work that created this dissertation.

The aim of this research was to develop a theory, which reflects how the participants and I constructed knowledge in our shared context through interviews, data analysis, and member checking. The limitations of this study make it difficult to establish the outcome of this research as verifiable and true for all members of this population, but recognize that it is as true as the participants and I can present in our current context, though this is not the goal of qualitative research. This study sought to meet trustworthiness criteria given the constructivist and social justice perspectives, following the lead of others who have adjusted this criteria for other emancipatory research such as critical ethnography (Talburt, 2004) and feminist grounded theory (Fassinger, 2005).

Credibility attempts to demonstrate that the truest picture of the phenomenon explored is being presented (Shenton, 2004). In this study, I sought to establish credibility in two ways: by collecting data that was reflective of participants' experiences and by using peer debriefers to challenge my work. Participants were provided with summaries of the research to ensure it accurately reflected their experiences. Participants suggested few changes other than clarifying that the model was cyclical in nature. The participants asked excellent questions and provided detailed feedback regarding the model, all of which was used to reconstruct the model to the one presented here. I also had two colleagues act as peer debriefers. The peer debriefers were invaluable to the process as

they were able to bring alternative perspectives to the emerging model and challenge the researcher's biases and perspectives. The member checks of the summary and the peer debriefers all were employed in an attempt to ensure the data and its conclusions were grounded in the experience of the participants, and thus credible.

Transferability refers to the need for the research to provide sufficient detail of the work conducted so that others can make inferences about its applicability to other settings and populations (Shenton, 2004). Ultimately, the burden of determining appropriate transferability lies with the reader and other researchers. As the original researcher, it was my responsibility to describe thoroughly all aspects of the study to provide the information so that other researchers and readers of this dissertation can determine transferability. Transcripts, research notes, descriptions of participants, and other information from the study will also be preserved for five years for this purpose, at which point they will be destroyed to maintain the participants confidentiality and in accordance with the guidelines of the Institutional Review Board.

Dependability, although sometimes difficult to establish in qualitative work, refers to the repeatability of the study (Shenton, 2004). Chapter 3 served as a way to establish dependability by detailing in depth the methods used for this study, from recruitment to data analyses. The methodologist who is on my committee met with me to discuss my data collection, my use of codes, categories, and themes, and the model that emerged. After discussing the process, he agreed with my assessment of saturation and that my work was completed according to the procedures outlined in the dissertation proposal and according to constructivist grounded theory methods. Thus, the steps outlined can be followed in order to repeat the study.

Finally, confirmability refers to my need to show that the emerging theory comes from the data and not from my own beliefs; in essence, the burden of proof lies with the researcher (Shenton, 2004). For this study, a detailed audit trail including digital recordings, notes, and transcripts was preserved for this purpose. The way I have coded, categorized, and developed my model will all be available for the purpose of confirmability.

Final Thoughts

The impact of sexual assault on the lives of the couples who participated in this study demonstrate that sexual violence is a challenging issue, but one that can deepen intimacy and strengthen the relationship when navigated with respect, understanding, and love. Sharing the assault experience with their partners was not an end to the pain of the survivors, but did begin a healing process for the couple and allowed the male partner to meet the survivor where she was and aid her as he could. Brené Brown has a quote that reads, “When we deny the story, it defines us. When we own the story, we can write a brave new ending,” which is what these couples are in the process of doing.

Healing is not solitary work. When it is done within the safety of a relationship that is supportive, kind, caring, and understanding, greater strides are made. Beyond that, however, is the need for a social network that can practice empathy with the couple when it is needed. Couples need to know that although they are strong together, they are not alone in their process. As mental health professionals, we must recognize that the couple relationship itself can also be a victim and survivor of sexual assault and thus, we must work to ensure that couples learn to thrive. The hope, then, is that we will rise to the challenge and help couples with these experiences in therapy and beyond.

References

- Acierno, R., Resnick, H., Kilpatrick, D. G., Saunders, B., & Best, C. L. (1999). Risk factors for rape, physical assault, and posttraumatic stress disorder in women: Examination of differential multivariate relationships. *Journal of Anxiety Disorders, 13*, 541-563. doi:10.1016/S0887-6185(99)00030-4
- Ahrens, C. E. & Aldana, E. (2012). The ties that bind: Understanding the impact of sexual assault disclosure on survivors' relationships with friends, family, and partners. *Journal of Trauma & Dissociation, 13*, 226-243, doi: 10.1080/15299732.2012.642738.
- Ahrens, C. E., Campbell, R. M., Temier-Thames, N. K., Wasco, S. M., & Sefl, T. (2007). Deciding whom to tell: Expectations and outcomes of rape survivors' first disclosures. *Psychology of Women Quarterly, 31*, 38-49.
- Ahrens, C. E., Rios-Mandel, L., Isas, L., & del Carmen Lopez, M. (2010). Talking about interpersonal violence: Cultural influences on Latinas' identification and disclosure of sexual assault and intimate partner violence. *Psychological Trauma: Theory, Research, Practice, and Policy, 2*, 284-295. doi:10.1037/a0018605
- Ahrens, C. E., Stansell, J., & Jennings, A. (2010). To tell or not to tell: The impact of disclosure on sexual assault survivors' recovery. *Violence and Victims, 25*, 631-648. doi:10.1891/0886-6708.25.5.631
- Babchuk, W. A. (2011). Grounded theory as a "family of methods": A genealogical analysis to guide research. *US-China Education Review, 1*, 383-388.
- Bachar, K., & Koss, M. P. (2001). From prevalence to prevention: Closing the gap between what we know about rape and what we do. In C. M. Renzetti, J. L.

- Edleson, R. Bergen (Eds.), *Sourcebook on violence against women* (pp. 117-142). Thousand Oaks, CA US: Sage Publications, Inc.
- Ballard, M. B., & Alessi, H. D. (2002). Counseling sexual abuse and rape victims. In L. D. Burlew & D. Capuzzi (Eds.), *Sexuality counseling* (pp. 307-326). Hauppauge, NY: Nova.
- Banyard, V. L., Moynihan, M. M., & Plante, E. G. (2007). Sexual violence prevention through bystander education: An experimental evaluation. *Journal of Community Psychology*, 35, 463-481.
- Ben Arzi, N., Solomon, Z., & Dekel, R. (2000). Secondary traumatization among wives of PTSD and post-concussion casualties: Distress, caregiver burden and psychological separation. *Brain Injury*, 14, 725-736.
- Berman, W. H. & Sperling, M. B. (1994). The structure and function of adult attachment. In M. B. Sperling & Berman, W. H. (Eds.), *Attachment in adults: Clinical and developmental perspectives* (pp. 3-28). New York: The Guilford Press.
- Biehle, S. N. & Mickelson, K. D. (2012). Provision and receipt of emotional spousal support: The impact of visibility on well-being. *Couple and Family Psychology: Research and Practice*, 1, 244-251.
- Bifulco, A., Brown, G., Adler, Z. (1991). Early sexual abuse and clinical depression in adult life. *British Journal of Psychiatry*, 159, 115-122.
- Blain, L. M., Galovski, T. E., & Peterson, Z. D. (2011). Female sexual self-schema after interpersonal trauma: Relationship to psychiatric and cognitive functioning in a clinical treatment-seeking sample. *Journal of Traumatic Stress*, 24, 222-225.
doi:10.1002/jts.20616

- Booth, A. & Amato, P. (1991). Divorce and psychological stress. *Journal of Health and Social Behavior*, 32, 396-407.
- Borkovec, T. D., Roemer, L., Kinyon, J. (1995). Disclosure and worry: Opposite sides of the emotional processing coin. In J. W. Pennebaker (Ed.), *Emotion, disclosure, and health*. Washington, DC: American Psychological Association.
- Boudreaux, E., Kilpatrick, D. G., Resnick, H. S., Best, C. L., & Saunders, B. E. (1998). Criminal victimization, posttraumatic stress disorder, and comorbid psychopathology among a community sample of women. *Journal of Traumatic Stress*, 11.
- Bowlby, J. (1969/1982). *Attachment and loss: Volume I: Attachment*. New York: Basic Books.
- Brener, N. D., McMahon, P. M., Warren, C. W., & Douglas, K. A. (1999). Forced sexual intercourse and associated health-risk behaviors among female college students in the United States. *Journal of Consulting and Clinical Psychology*, 67, 252-259. doi:10.1037/0022-006X.67.2.252
- Breslau, N., Kessler, R. C, Chilcoat H. D., Schultz, L. R., Davis, G. C., & Andreski, P. (1998). Trauma and posttraumatic stress disorder in the community: The 1996 Detroit Area Survey of Trauma. *Archives of General Psychiatry*, 55, 626-632.
- Briere, J. (1989). *Therapy for adults molested as children: Beyond survival*. New York: Springer.
- Brookings, J., McEvoy, A., & Reed, M. (1994). Sexual assault recovery and male significant others. *Families in Society*, 75, 295-299.

- Brown, A. L., Testa, M., & Messman-Moore, T. L. (2009). Psychological consequences of sexual victimization resulting from force, incapacitation, or verbal coercion. *Violence Against Women, 15*, 898-919. doi:10.1177/1077801209335491
- Brown, B. (2007). *I thought it was just me (but it isn't): Telling the truth about perfectionism, inadequacy, and power*. New York, NY US: Gotham Books.
- Brown, B. (2010). *The gifts of imperfection: Let go of who you think you're supposed to be and embrace who you are*. Hazelden Publishing.
- Brown, G. W., & Harris, T. (1978). *Social origins of depression: A study of psychiatric disorder in women*. New York: Free Press.
- Browne, A. (1991). The victim's experience: Pathways to disclosure. *Psychotherapy, 28*, 150 -156.
- Bryant, A. (2002). Re-Grounding Grounded Theory. *Journal of Information Technology Theory and Application, 4*.
- Bryant, A., & Charmaz, K. (2007). Grounded theory research: Methods and practices. In A. Bryant & K. Charmaz (Eds.), *The Sage handbook of grounded theory* (pp. 1-28). Thousand Oaks, CA: Sage.
- Burt, M. R. (1980). Cultural myths and supports for rape. *Journal of Personality and Social Psychology, 38*, 217-230.
- Cairns, K. (1994). A narrative study of qualitative data on sexual assault, coercion and harassment. *Canadian Journal of Counselling, 28*, 193-205.
- Campbell, R. M. (2002). *Emotionally involved: The impact of researching rape*. New York: Routledge

- Campbell, R. M., Sefl, T., Wasco, S., & Ahrens, C. (2004). Doing community research without a community: Creating safe space for rape survivors. *American Journal of Community Psychology*, 33, 253-261.
- Carroll, E. M., Rueger, D. B., Foy, D. W., & Donahoe, C. P. (1985). Vietnam combat veterans with posttraumatic stress disorder: Analysis of marital and cohabitating adjustment. *Journal of Abnormal Psychology*, 94, 329-337.
- Charmaz, K. (1995). Grounded theory. In: Smith, J., Harre, R., Van Langenhove, L. (Eds.), *Rethinking methods in psychology*, pp. 27-65. London: Sage.
- Charmaz, K. (2000). Grounded theory: Objectivist and Constructivist Methods. In N. K. Denzin & Y. Lincoln (Eds.), *Handbook of qualitative research* (2nd ed., pp. 509-535). Thousand Oaks, CA: Sage.
- Charmaz, K. (2003). Grounded theory. In Bryman, A. E., Lia, T. F. (eds.), *The sage encyclopedia of social science research methods*, pp. 440-444. Thousand Oaks, CA: Sage.
- Charmaz, K. (2005). Grounded Theory in the 21st Century: Applications for Advanced Social
- Charmaz, K. (2014). *Constructing grounded theory: A practical guide through qualitative analysis*. London: Sage.
- Check, J., & Malamuth, N. (1983). Sex role stereotyping and reactions to depictions of stranger versus acquaintance rape. *Journal of Personality and Social Psychology*, 45, 344-356. doi:10.1037/0022-3514.45.2.344.

- Cohen, L. (1988). Providing treatment and support for partners of sexual-assault survivors. *Psychotherapy: Theory, Research, Practice, Training*, 25, 94-98.
doi:10.1037/h0085327.
- Cohen, S., & Wills, T. A. (1985). Stress, social support, and the buffering hypothesis. *Psychological Bulletin*, 98, 310-357.
- Collins, N. L. & Feeney, B. C. (2000). A safe haven: An attachment theory perspective on support seeking and caregiving in intimate relationships. *Journal of Personality and Social Psychology*, 78, 1053-1073.
- Compton, J. S., & Follette, V. M. (2002). Couple therapy when a partner has a history of child sexual abuse. In A. S. Gurman & N. S. Jacobson (Eds.), *Clinical handbook of couple therapy* (3rd ed., pp. 466–487). New York: Guilford
- Connop, V., & Petrak, J. (2004). The impact of sexual assault on heterosexual couples. *Sexual and Relationship Therapy*, 19, 29-38.
doi:10.1080/14681990410001640817
- Courtois, C. (1979). The incest experience and its aftermath. *Victimology*, 4, 337-347.
- Courtois, C. (1988). *Healing the incest wound*. New York: Norton.
- Coyne, J. C., & DeLongis, A. (1986). Going beyond social support: The role of social relationships in adaptation. *Journal of Consulting And Clinical Psychology*, 54, 454-460. doi:10.1037/0022-006X.54.4.454
- Creamer M., Burgess P., & McFarlane A. C. (2001). Post-traumatic stress disorder: findings from the Australian National Survey of Mental Health and Well-being. *Psychological Medicine*, 31, 1237–1247.

- Creswell, J. (2013). *Qualitative inquiry and research design: Choosing among five approaches (3rd ed.)*. Thousand Oaks, CA: Sage.
- Creswell, J. W., Hanson, W. E., Plano Clark, V., & Morales, A. (2007). Qualitative Research Designs: Selection and Implementation. *The Counseling Psychologist*, 35, 236-264.
- Creswell, John W. (2009). *Research Design: Qualitative, Quantitative, and Mixed Methods Approaches (3rd ed.)*. Los Angeles: Sage Publications, Inc.
- Cutrona, C. E. (1996). *Social support in couples: Marriage as a resource in times of stress*. Thousand Oaks, CA: Sage.
- Darves-Bornoz J. M. (1997). Rape-related psychotraumatic syndromes. *European Journal of Obstetrics, Gynecology and Reproductive Biology*, 71, 59–65.
- Davis, R. C., Brickman, E., & Baker, T. (1991). Supportive and unsupportive responses of others to rape victims: Effects on concurrent victim adjustment. *American Journal of Community Psychology*, 19, 443-451.
- Dehle, C., Larsen, D. & Landers, J. E. (2001). Social support in marriage. *The American Journal of Family Therapy*, 29, 307-324.
- DiLillo, D. (2001). Interpersonal functioning among women reporting a history of childhood sexual abuse: Empirical findings and methodological issues. *Clinical Psychology Review*, 21, 553-576.
- DiLillo, D., & Long, P. J. (1999). Perceptions of couple functioning among female survivors of child sexual abuse. *Journal of Child Sexual Abuse*, 7, 59-76.

- Elliott, D. M., Mok, D. S., & Briere, J. (2004). Adult sexual assault: Prevalence, symptomatology, and sex differences in the general population. *Journal of Traumatic Stress, 17*, 203-211. doi:10.1023/B:JOTS.0000029263.11104.23
- Elliott, S., & Umberson, O. (2008). The Performance of Desire: Gender and Sexual Negotiation in Long-Term Marriages. *Journal of Marriage & Family, 70*, 391-406. doi:10.1111/j.1741-3737.2008.00489.x
- Ellis, L. M., & Chen, E. C. (2013). Negotiating identity development among undocumented immigrant college students: A grounded theory study. *Journal of Counseling Psychology*, doi:10.1037/a0031350
- Elmone, P., & Lingg, M. A. (1996). Adult survivors of sexual trauma: A conceptualization for treatment. *Journal of Mental Health Counseling, 18*, 108-123.
- Ember, C. R., Ember, M., & Peregrine, P. N. (2011). *Anthropology (13th Ed.)*. Upper Saddle River, NJ: Pearson Education Inc.
- Emm, D., & McKenry, P. C. (1988). Coping with victimization: The impact of rape on female survivors, male significant others, and parents. *Contemporary Family Therapy: An International Journal, 10*, 272-279. doi:10.1007/BF00891618
- Fassinger, R. E. (2005). Paradigms, praxis, problems, and promise: Grounded theory in counseling psychology research. *Journal of Counseling Psychology, 52*, 156-166. doi:10.1037/0022-0167.52.2.156
- Feeney, B. C. (2004). A secure base: Responsive support of goal strivings and exploration in adult intimate relationships. *Journal of Personality and Social Psychology, 87*, 631-648.

- Feinauer, L. L. (1989). Comparison of long term effects of child abuse by type and by relationship of the offended to the victim. *American Journal of Family Therapy*, 17, 37-25.
- Fergusson, D. M., Boden, J. M., and Horwood, L. J. 2008. Exposure to childhood sexual and physical abuse and adjustment in early adulthood. *Child Abuse & Neglect*, 32, 607–619.
- Figley, C. R., & Kleber, R. J. (1995). Beyond the “victim”: Secondary traumatic stress. In R. J. Kleber, Figley, C. R., & Gersons, B. P. (Eds.), *Beyond trauma: Cultural and societal dynamics* (pp. 75-98). New York: Plenum Press.
- Filipas, H. H., & Ullman, S. E. (2001). Social reactions to sexual assault victims from various support sources. *Violence and Victims*, 16, 673-692.
- Finkelhor, D., Hotaling, G., Lewis, I. A., & Smith, C. (1989). Sexual abuse and its relationship to later sexual satisfaction, marital status, religion, and attitudes. *Journal of Interpersonal Violence*, 4, 279-299.
- Finkelhor, D. (1988). The trauma of child sexual abuse: Two models. In G. E. Wyatt & G. J. Powell (Eds.), *Lasting effects of child sexual abuse* (pp. 61-82). Newbury Park, CA: Sage.
- Fisher, B. S., Daigle, L. E., Cullen, F. T., & Turner, M. G. (2003). Acknowledging sexual victimization as rape: Results from a national-level study. *Justice Quarterly*, 20, 535-574.
- Fraley, R. C. (2002). Attachment stability from infancy to adulthood: Meta-analysis and dynamic modeling of developmental mechanisms. *Personality and Social Psychology Review*, 6, 123-151.

- Franiuk, R., Seefeldt, J., & Vandello, J. (2008). Prevalence of rape myths in headlines and their effects on attitudes toward rape. *Sex Roles*, 58, 790-801. doi:10.1007/s11199-007-9372-4.
- Frech, A., & Williams, K. (2007). Depression and the psychological benefits of entering marriage. *Journal of Health and Social Behavior*, 48, 149-163.
doi:10.1177/002214650704800204
- Glaser, B. G., & Strauss, A. L. (1965). *Awareness of dying*. Chicago: Aldine.
- Glaser, B. G., & Strauss, A. L. (1967). *The discovery of grounded theory: Strategies for qualitative research*. New York: Aldine.
- Glaser, Barney G. (1978). *Theoretical Sensitivity: Advances in the Methodology of Grounded Theory*. Mill Valley, Ca: Sociology Press.
- Glaser, Barney G. (1992). *Basics of Grounded Theory Analysis*. Mill Valley, Ca: Sociology Press.
- Glaser, Barney G. (1998). *Doing Grounded Theory. Issues and Discussions*. Mill Valley, Ca: Sociology Press.
- Golding, J. M., Siegel, J. M., Sorenson, S. B., Burnam, M. A., & Stein, J. A. (1989). Social support sources following sexual assault. *Journal of Community Psychology*, 17, 92-107.
- Gottman, J. (1999). *The marriage clinic: A scientifically based marital therapy*. New York: Norton.
- Gottman, J. M. (1993). A theory of marital dissolution and stability. *Journal of Family Psychology*, 7, 57-75.

- Gove, W. R., Style, C. B., & Hughes, M. (1990). The effect of marriage on the well-being of adults: A theoretical analysis. *Journal of Family Issues*, 11, 4-35.
doi:10.1177/019251390011001002
- Greenberg, L. S. (2010). Emotion-Focused Therapy: A clinical Synthesis. *Psychotherapy*, 8, 32-42.
- Greenberg, L., Rice, L., & Elliott, P. (1993). *Facilitating emotional change: The moment by moment process*. New York: Guilford Press.
- Greenberg, M. A. & Stone, A. A. (1992). Emotional disclosure about traumas and its relation to health. Effects of previous disclosure and trauma severity. *Journal of Personality and Social Psychology*, 63, 75–84.
- Greenberg, M. A., Wortman, C. B. and Stone, A. A. (1996). Emotional Expression and Physical Health: Revising Traumatic Memories or Fostering Self-Regulation? *Journal of Personality and Social Psychology*, 71, 588-602.
- Halford, W., & Snyder, D. K. (2012). Universal processes and common factors in couple therapy and relationship education. *Behavior Therapy*, 43, 1-12.
doi:10.1016/j.beth.2011.01.007
- Hall, E., & Gloyer, G. (1985). How adolescents perceive sexual assault services. *Health & Social Work*, 10, 120-128.
- Hall, E., Howard, J., & Boezio, S. (1986). Tolerance of rape: A sexist or antisocial attitude?. *Psychology of Women Quarterly*, 10, 101-117. doi:10.1111/j.1471-6402.1986.tb00739.x.
- Hall, S. S. (2006). Marital meaning: Exploring young adults' belief systems about marriage. *Journal of Family Issues*, 27, 1437–1458.

- Hartling, L. M., Rosen, W. B., Walker, M., & Jordan, J. V. (2004). Shame and Humiliation: From Isolation to Relational Transformation. In J. V. Jordan, M. Walker, L. M. Hartling (Eds.), *The complexity of connection: Writings from the Stone Center's Jean Baker Miller Training Institute* (pp. 103-128). New York, NY US: Guilford Press.
- Heiman, J. (2007). Orgasmic disorders in women. In S. Leiblum (Ed.), *Principles and practice of sex therapy* (4th ed., pp. 84–123). New York: Guilford Press.
- Henry, S., Smith, D. B., Archuleta, K. L., Sanders-Hahs, E., Goff, B., Reisbig, A. J., &... Scheer, T. (2011). Trauma and couples: Mechanisms in dyadic functioning. *Journal of Marital and Family Therapy*, 37, 319-332. doi:10.1111/j.1752-0606.2010.00203.x
- Hill, C. E. (2009). *Helping skills: Facilitating exploration, insight, and action* (3rd ed.). Washington, DC: American Psychological Association.
- Hood, J. C. (2007). Orthodoxy vs. power: The defining traits of grounded theory. In A. Bryant & K. Charmaz (Eds.), *The Sage handbook of grounded theory* (pp. 155-164). Thousand Oaks, CA: Sage.
- Horwitz, A. V., & White, H. R. (1991). Becoming married, depression, and alcohol problems among young adults. *Journal of Health and Social Behavior*, 32, 221-237. doi:10.2307/2136805
- Horwitz, A. V., White, H., & Howell-White, S. (1996). Becoming married and mental health: A longitudinal study of a cohort of young adults. *Journal of Marriage and Family*, 58, 895-907. doi:10.2307/353978

- Hunter, J. A. (1991). A comparison of the psychosocial maladjustment of adult males and females sexually abused as children. *Journal of Interpersonal Violence*, 6, 205-217.
- Jehu, D. (1988). *Beyond Sexual Abuse. Therapy with Women who were Childhood Victims*. Chichester: John Wiley and Sons.
- Jewkes R, Sen P, Garcia-Moreno C (2002). Sexual violence. In: Krug EG et al., eds. *World report on violence and health*, pp. 149–181. Geneva, World Health Organization.
- Jewkes, R., Vundule, C., Maforah, F., & Jordaan, E. (2001). Relationship dynamics and teenage pregnancy in South Africa. *Social Science & Medicine*, 52, 733-744.
doi:10.1016/S02779536(00)00177-5
- Johnson, S. M. (2004). *The practice of emotionally focused couple therapy, 2nd edition*. New York: Brunner-Routledge.
- Johnson, S. M., Makinen, J. A., & Millikin, J. W. (2001). Attachment injuries in couple relationships: New perspective on impasses in couples therapy. *Journal of Marital and Family Therapy*, 27, 145-155.
- Jourard, S. M. (1971). *Self-disclosure. An Experimental Analysis of the Transparent Self*. New York: Wiley.
- Journal of Sexual Medicine. (2013). *Sexuality and sexual pleasure after sexual assault*.
- Justice Studies. In N. K. Denzin and Y. S. Lincoln (Eds). *Handbook of Qualitative Research, 3rd Edition*. Thousand Oaks, CA: Sage.

- Karjane, H. M., Fisher, B. S., & Cullen, F. T. (2005). *Sexual assault on campus: What colleges and Universities are doing about it* (NCJ 205521). Washington, D. C.: Department of Justice.
- Kearns M. C. Edwards, K. M., Calhoun, K. S., & Gidycz, C. A. (2010). Disclosure of sexual victimization: The effects of Pennebaker's Emotional Disclosure Paradigm on physical and psychological distress. *Journal of Trauma & Dissociation*, 11, 193-309. doi: 10.1080/15299730903502979
- Kessler, R. C., Sonnega, A., Bromet, E., Hughes, M., & Nelson, C. B. (1995). Posttraumatic stress disorder in the National Comorbidity Survey. *Archives of General Psychiatry*, 52, 1048-1060.
- Kilpatrick, D. G., & Seymour, A. (1992). *Rape in America: A report to the Nation*. Technical report, National Victims Center, Arlington, VA, and Crime Victims Research and Treatment Center, Charleston, SC.
- Kilpatrick, D. G., Best, C. L., Saunders, B. E., & Veronen, L. J. (1988). Rape in marriage and in dating relationships: How bad is it for mental health?. *Annals of The New York Academy of Sciences*, 528335-344. doi:10.1111/j.1749-6632.1988.tb50875.x
- Kilpatrick, D. G., Saunders, B. E., Veronen, L. J., Best, C. L., & Von, J. M. (1987). Criminal victimization: Lifetime prevalence, reporting to police, and psychological impact. *Crime and Delinquency*, 33, 479–489.
- Kirschner, S., Kirschner, D. A. & Rappaport, R. L. (1993). *Working with Adult Incest Survivors: The Healing Journey*. New York: Brunner-Mazel.
- Koss, M. P. & Harvey, M. R. (1991). *The Rape Victim: Clinical and Community Interventions* (2nd ed.). Sage: Newbury Park, CA.

- Koss, M. P. (1992). The underdetection of rape: Methodological choices influence incidence estimates. *Journal of Social Issues*, 48, 61-75.
- Koss, M. P., & Dinero, T. E. (1989). Discriminant analysis of risk factors for sexual victimization among a national sample of college women. *Journal of Consulting and Clinical Psychology*, 57, 242–250.
- Kottak, C. P. (2011). *Cultural anthropology*, (14th ed.). Boston: McGraw-Hill.
- Lang, A. J., Rodgers, C. S., Laffaye, C., Satz, L. E., Dresselhaus, T. R., & Stein, M. B. (2003). Sexual trauma, posttraumatic stress disorder, and health behavior. *Behavioral Medicine*, 28, 150-158. doi:10. 1080/08964280309596053
- Ledray, L. (1986). *Recovering from rape*. New York: Henry Holt and Company
- Leonard, J. M. (2001). Sexual assault and intimate heterosexual relationships: The interaction of communication, coping and support (Unpublished doctoral dissertation). Colorado State University, Fort Collins, CO.
- Leonard, L. M., & Follette, V. M. (2002). Sexual functioning in women reporting a history of child sexual abuse: Review of the empirical literature and clinical implications. *Annual Review of Sex Research*, 13, 346-389.
- Leserman, J., Li, Z. Z., Drossman, D. A., & Hu, Y. B. (1998). Selected symptoms associated with sexual and physical abuse history among female patients with gastrointestinal disorders: The impact on subsequent health care visits. *Psychological Medicine*, 28, 417-425. doi:10.1017/S0033291797006508
- Letourneau E. J., Holmes M., & Chasendunn-Roark J. (1999). Gynecologic health consequences to victims of interpersonal violence. *Women's Health Issues*, 9, 115–120.

- Levitan, R. D., Parikh, S. V., Lesage, A. D., Hegadoren, K. M., Adams, M., Kennedy, S. H., & Goering, P. N. (1998). Major depression in individuals with a history of childhood physical or sexual abuse: Relationship to neurovegetative features, mania, and gender. *The American Journal of Psychiatry*, 155, 1746-1752.
- Lev-Wiesel, R. (2004). Male university students' attitudes toward rape and rapists. *Child & Adolescent Social Work Journal*, 21, 199-210.
doi:10.1023/B:CASW.0000028452.94800.cc.
- Lichtman, M. (2013). *Qualitative research in education: A user's guide (3rd ed.)*. Los Angeles, CA: SAGE
- Lieberman, M. A. (1982). The effects of social supports on responses to stress. In L. Goldberger & S. Breznitz (Eds.), *Handbook of stress*. New York: Free Press.
- Littleton, H., Axsom, D., & Grills-Tauchel, A. (2009). Sexual assault victims' acknowledgment status and revictimization risk. *Psychology of Women Quarterly*, 33, 34-42.
- Littleton, H., Axsom, D., Breitkopf, C., & Berenson, A. (2006). Rape acknowledgment and postassault experiences: How acknowledgment status relates to disclosure, coping, worldview, and reactions received from others. *Violence and Victims*, 21, 761-778.
- Lonsway, K. A., & Fitzgerald, L. F. (1994). Rape myths: In review. *Psychology of Women Quarterly*, 18, 133-164.
- MacIntosh, H. B., & Johnson, S. (2008). Emotionally Focused Therapy for couples and childhood sexual abuse survivors. *Journal of Marital and Family Therapy*, 34, 298-315.

Maltz, W. (2001). *The sexual healing journey: a guide for survivors of sexual abuse*.

New York: HarperCollins.

Malz, W., & Holman, B. (1987). *Incest and sexuality: a guide to understanding and*

healing. Lexington, MA: Lexington Books.

Mann, S. J., Delon, M. A. (1995). Case Report: Improved hypertension control following disclosure of decades-old trauma. *Psychosomatic Medicine*, 57, 501-505.

Martsof, D. S., Courey, T. J., Chapman, T. R., Draucker, C. B., & Mims, B. L. (2006).

Adaptive sampling: Recruiting a diverse community sample of survivors of sexual violence. *Journal of Community Health Nursing*, 23, 159-182. doi:

10.1207/s15327655jchn2303_4

McCann, I. L., & Pearlman, L. A. (1990a). Vicarious traumatization: A framework the

psychological effects of working with victims. *Journal of Traumatic Stress*, 3, 131-149.

McEvoy, A. W., & Brookings, J. B. (1991). *If she is raped*. Holmes Beach, FL.: Learning Publications, Inc.

McGettigan, M. L. (1992). Will they always be living this story?: The impact of

childhood sexual abuse on the sexual relationships of women survivors

(Unpublished master's thesis). Smith College School for Social Work, Northampton, MA.

Meiselman, K. C. (1978). *Incest: A psychological study of causes and effects with treatment recommendations*. San Francisco: Jossey-Bass.

- Meiselman, K. C. (1980). Personality characteristics of incest history psychotherapy patients: A research note. *Archives of Sexual Behavior*, 9, 195-197. doi: 10.1007/BF01542245
- Merriam, S. B. (2009). *Qualitative research: A guide to design and implementation*. San Francisco: John Wiley and Sons
- Mikulincer, M. & Shaver, P. R. (2007). *Attachment in adulthood: Structure, dynamics, and change*. New York: The Guilford Press.
- Mikulincer, M., & Shaver, P. (2007). A behavioral systems perspective on the psychodynamics of attachment and sexuality. In D. Diamond, S. Blatt, & J. Lichtenburg (Eds.), *Attachment and sexuality* (pp. 51–78). New York: Analytic Press.
- Miller, W. R., Williams, A., M., & Bernstein, M. H. (1982). The effects of rape on marital and Sexual adjustment. *The American Journal of Family Therapy*, 10, 51-58.
- Mills, J., Bonner, A., & Francis, K. (2006). The development of constructivist grounded theory. *International Journal of Qualitative Methods*, 5, Article 3. Retrieved from http://www.ualberta.ca/~iiqm/backissues/5_1/html/mills.htm
- Moeller, T. P., Bachmann, G. A., & Moeller, J. R. (1993). The combined effects of physical, sexual, and emotional abuse during childhood: Long-term health consequences for women. *Child Abuse & Neglect*, 17, 623-640. doi:10.1016/0145-2134(93)90084-I.
- Mollica, R. F., & Son, L. (1989). Cultural dimensions in the evaluation and treatment of sexual trauma: An overview. *Psychiatric Clinics of North America*, 12, 363-379.

- Montgomery, P. P., & Bailey, P. H. (2007). Field notes and theoretical memos in grounded theory. *Western Journal of Nursing Research*, 29, 65-79.
doi:10.1177/0193945906292557
- Morrow, S. L., (2005). Quality and trustworthiness in qualitative research in counseling psychology. *Journal of Counseling Psychology*, 52, 250-260
- Morse, J. M. (2001). Situating grounded theory within qualitative inquiry. In Schreiber, R. S., Stern, P. N. (Eds). *Using Grounded Theory in Nursing*. New York: Springer.
- Moss, M., Frank, E., & Anderson, B. (1990). The effects of marital status and partner support on rape trauma. *American Journal of Orthopsychiatry*, 60, 379-391.
doi:10.1037/h0079179.
- Muehlenhard, C., Powch, I., Phelps, J., & Giusti, L. (1992). Definitions of rape: Scientific and political implications. *Journal of Social Issues*, 48, 23-44.
- Mullen, P. E., Martin, J. L., Anderson, J. C., Romans, S. E., & Herbison, G. P. (1994). The effect of child sexual abuse on social, interpersonal, and sexual function in adult life. *British Journal of Psychiatry*, 165, 35-47.
- Nadelson, C. C. (1989). Consequences of rape: clinical and treatment aspects. *Psychotherapy and Psychosomatics*, 51, 187-192.
- Najdowski, C. J., & Ullman, S. E. (2009). PTSD symptoms and self-rated recovery among adult sexual assault survivors: The effects of traumatic life events and psychosocial variables. *Psychology of Women Quarterly*, 33, 43-53.
doi:10.1111/j.1471-6402.2008.01473.x

- Nelson Goff, B. S., & Smith, D. (2005). Systemic traumatic stress: The Couple Adaptation to Traumatic Stress Model. *Journal of Marital and Family Therapy*, 31, 145-157.
- Nelson Goff, B. S., Crow, J. R., Reisbig, A. M. J., & Hamilton, S. (2007). The impact of individual trauma symptoms of deployed soldiers on relationship satisfaction. *Journal of Family Psychology*, 21, 344-353.
- Neuman, D. A., Houskamp, B. M., Pollock, V. E., & Briere, J. (1996). The long-term sequelae of childhood sexual abuse in women: A meta-analytic review. *Child Maltreatment*, 1, 6–16.
- Nock, S. L. (1998). Marriage in men's lives. In A. Booth, A. C. Crouter (Eds.), *Men in families: When do they get involved? What difference does it make?* (pp. 227-237). Mahwah, NJ US: Lawrence Erlbaum Associates Publishers.
- Osterman, J. E., Barbiaz, J., & Johnson, P. (2001). Emergency psychiatry: Emergency interventions for rape victims. *Psychiatric Services*, 52, 733-740.
- Overall, N. C., Fletcher, G. O., & Simpson, J. A. (2010). Helping each other grow: Romantic partner support, self-improvement, and relationship quality. *Personality and Social Psychology Bulletin*, 36, 1496-1513. doi: 10.1177/0146167210383045
- Park, C. L. & Blumberg, C. J. (2002). Disclosing trauma through writing: testing the meaning-making hypothesis. *Cognitive Therapy and Research*, 26, 597–616.
- Pasch, L. A., & Bradbury, T. N. (1998). Social support, conflict, and the development of marital dysfunction. *Journal of Consulting and Clinical Psychology*, 66, 219-230.
- Pateraki, E., & Roussi, P. (2013). Marital quality and well-being: The role of gender, marital duration, social support and cultural context. In A. Efklides, D. Moraitou

- (Eds.), *A positive psychology perspective on quality of life* (pp. 125-145). New York, NY US: Springer Science + Business Media.
- Pavio, S. C., & Nieuwenhuis, J. A.. (2001). Efficacy of Emotion Focused Therapy for adult survivors of child abuse: A preliminary study. *Journal of Traumatic Stress, 14*, 115-133.
- Payne, D., Lonsway, K., & Fitzgerald, L. (1999). Rape myth acceptance: Exploration of its structure and its measurement using the Illinois Rape Myth Acceptance Scale. *Journal of Research in Personality, 33*, 27-68.
- Pennebaker, J. W. & Susman, J. R. (1988). Disclosure of traumas and psychosomatic processes. *Social Science and Medicine, 26*, 327-332.
- Pennebaker, J. W. (1995). Emotion, disclosure, and health: An overview. In J. W. Pennebaker (Ed.), *Emotion, disclosure, and health*. Washington, DC: American Psychological Association.
- Pennebaker, J. W. (1997). Writing about emotional experiences as a therapeutic process. *Psychological Science, 8*, 162-166.
- Pennebaker, J. W. (1999). Psychosomatics, inhibition, and the self-disclosure of emotional experience. In A. C. Richards and T. Schumrum (Eds.), *Invitations to dialogue: The legacy of Syndey M. Jourard* (pp 3-16). Dubuque, IA: Kendall/Hunt Publishing.
- Perkonig, A., Pfister, H., Stein, M. B., Höfler, M., Lieb, R., Maercker, A., & Wittchen, H. (2005). Longitudinal Course of Posttraumatic Stress Disorder and Posttraumatic Stress Disorder Symptoms in a Community Sample of Adolescents

and Young Adults. *The American Journal of Psychiatry*, 162, 1320-1327.

doi:10.1176/appi.ajp.162.7.1320

Pew Research Center (2010). The decline of marriage and rise of new families. Pew

Internet & American Life Project

[http://www.pewsocialtrends.org/files/2010/11/pew-social-trends-2010-families.](http://www.pewsocialtrends.org/files/2010/11/pew-social-trends-2010-families.pdf)

pdf accessed on October 14, 2012

Ponterotto, J. G. (2002). Qualitative research methods: The fifth force in psychology. *The Counseling Psychologist*, 30, 394-406.

Ponterotto, J. G. (2005). Qualitative research in counseling psychology: A primer on research paradigms and philosophy of science. *Journal of Counseling Psychology*, 52, 126-136.

Popiel, D. A., & Susskind, E. C. (1985). The impact of rape: Social support as a moderator of stress. *American Journal of Community Psychology*, 13, 645-675.

Puddephat, A. J., (2006). Special: An interview with Kathy Charmaz: On constructing grounded theory. *Qualitative Sociology Review*, 2, 5-20.

Reizer, A., Ein-Dor, T., & Possick, C. (2012). Living at risk: Dyadic examination of the links among environmental stress, attachment orientations and marital support provision. *Journal of Social And Personal Relationships*, 29, 694-712.
doi:10.1177/0265407512443449

Remer, R., & Elliott, J. (1988a). Characteristics of secondary victims of sexual assault. *International Journal of Family Psychiatry*, 9, 373-387.

Remer, R., & Elliott, J. (1988b). Management of secondary victims of sexual assault. *International Journal of Family Psychiatry*, 9, 389-401.

- Resick, P. A. (1993). The psychological impact of rape. *Journal of Interpersonal Violence*, 223- 255.
- Resick, P. A., Calhoun, K. S., Atkeson, B. M., & Ellis, E. M. (1981). Social adjustment in victims of sexual assault. *Journal of Consulting and Clinical Psychology*, 49, 705–712
- Riggs, D. S., Byrne, C. A., Weathers, F. W., & Litz, B. T. (1998). The quality of the intimate relationships of male Vietnam veterans: Problems associated with posttraumatic stress disorder. *Journal of Traumatic Stress*, 11, 87-101.
- Rime, B. (1995). Mental rumination, social sharing and the recovery from emotional exposure. In J. W. Pennebaker (Ed.), *Emotion, disclosure & health* (pp. 271–292). Washington, DC: American Psychological Association.
- Rothbaum, B. O., Foa, E. B., Riggs, D. S., Murdock, T., & Walsh, W. (1992). A prospective examination of post-traumatic stress disorder in rape victims. *Journal of Traumatic Stress*, 5, 455–475.
- Saldana, J. (2011). *Fundamentals of Qualitative Research*. New York: Oxford University Press.
- Sarason I. G., & Sarason R. R. (1985): *Social support: Theory, research and applications*. Dordrecht: Nijhoff.
- Shenton, A. K. (2004). Strategies for ensuring trustworthiness in qualitative research projects. *Education for Information*, 22, 63-67.
- Smith, M. D. (1994). Enhancing the quality of survey data on violence against women: A feminist approach. *Gender & Society*, 8, 109-127.

- Smith, P.H., White, J.W., & Holland, L.J. (2003). A longitudinal perspective on dating violence among adolescent and college-age women. *American Journal of Public Health*, 93, 1104-1109.
- Sorenson, S. B., Stein, J. A., Siegel, J. M., Golding, J. M., & Burnam, M. A. (1987). The prevalence of adult sexual assault: The Los Angeles Epidemiological Catchment Area Project. *American Journal of Epidemiology*, 126, 1154–1165.
- Starks, H., & Trinidad, S. B. (2010). Choose your method: A comparison of phenomenology, discourse analysis, and grounded theory. *Qualitative Health Research*, 17, 1372-1380.
- Stern, P. N. (2007). On solid ground: Essential properties for growing grounded theory. In A. Bryant & K. Charmaz (Eds.), *The Sage handbook of grounded theory* (pp. 114-126). Los Angeles: Sage.
- Strauss, A. (1987). *Qualitative analysis for social scientists*. New York: Cambridge University Press.
- Strauss, A., & Corbin, J. (1990). *Basics of qualitative research: Grounded theory procedures and techniques*. Newbury Park, CA: Sage.
- Strauss, A., & Corbin, J. (1998). *Basics of qualitative research: Techniques and procedures for developing grounded theory* (2nd ed.). Thousand Oaks, CA: Sage.
- Talbert, S. (2004). Ethnographic responsibility without the "real." *Journal of Higher Education*, 75, 80-103.
- Thelen, M. H., Sherman, M. D., & Borst, T. S. (1998). Fear of intimacy and attachment among rape survivors. *Behavior Modification*, 22, 108-116.

- Thoits, P. A. (1995). Stress, coping, and social support processes: Where are we? What next? *Journal of Health and Social Behavior, Extra Issue*, 53-79.
- Tjaden, P., & Thoennes, N. (2000). *Full report of the prevalence, incidence, and consequences of violence against women: Findings from the National Violence Against Women Survey*.
- Ullman, S. E. (1996). Social reactions, coping strategies and self blame attributions in adjustment to sexual assault. *Psychology of Women Quarterly*, 20, 505-526.
- Ullman, S. E. (1996a). Do social reactions to sexual assault victims vary by support provider? *Violence and Victims*, 11, 143-156.
- Ullman, S. E. (2003). Social reactions to child sexual abuse disclosures: A critical review. *Journal of Child Sexual Abuse*, 12, 89-121.
- Ullman, S. E. (2012). *Talking about sexual assault: Society's response to survivors*. American Psychological Association: Washington, DC
- Ullman, S. E., & Filipas, H. H. (2001). Correlates of formal and informal support seeking in sexual assault victims. *Journal of Interpersonal Violence*, 16, 1028-1047.
- Van Der Kolk, B. (2014) *The body keeps score: Brain, mind, and body in the healing of trauma*. New York, NY: Viking.
- Violence against women, intimate partner and sexual violence against women, WHO 9/2011 fact sheet <http://www.who.int/mediacentre/factsheets/fs239/en/>
- Washington, DC: US Department of Justice, National Institute of Justice. Retrieved March 17, 2013 from <https://www.ncjrs.gov/pdffiles1/nij/183781.pdf>
- Wiseman, T. (1996). A concept analysis of empathy. *Journal of Advanced Nursing*, 23, 1162-1167.

Yuan, N. P., Koss, M. P., & Stone, M. T. (2006). The psychological consequences of sexual trauma. Harrisburg, PA: VAWnet, a project of the National Resource Center on Domestic Violence/Pennsylvania Coalition Against Domestic Violence. Available from <http://www.vawnet.org>

APPENDIX A: Call for Participants

Couples needed for PAID Research Study (UNL)

We are seeking couples who are interested in talking about their relationship, specifically about how sexual assault has or hasn't impacted the relationship.

You may be eligible to participate in this study if you:

- are a female or have a female partner who has experienced sexual assault
- are in a committed heterosexual relationship
- your partner is willing to participate
- are 19 years of age or older

Each participant will be given a \$20 gift certificate
for his or her participation

If you're interested, please contact Nicole by responding to this ad, calling 402-608-1834 or clicking this link (http://bit.ly/couple_screening) to respond to a few initial questions.

https://unleducation.az1.qualtrics.com/SE/?SID=SV_9XMKXxjorW8rQdn

Image included:



APPENDIX B: Phone Screening Protocol for Males and Females

Thank you for calling to find out more about the research study. My name is Nicole Lozano, and I am a fifth year doctoral student in Counseling Psychology at the University of Nebraska. The purpose of this research study is to develop a theory about relationships where the female partner has been sexually victimized as an adult outside of the couple relationship. As part of the formal study, I will be interviewing couples about how experiences of sexual assault affect your relationship. Do you think you might be interested in participating in that study?

{If No}: Thank you very much for your time.

{If Yes}: Before enrolling people in this study, I need to determine if they are eligible. And so what I would now like to do is to ask you a series of questions about you. There is a possibility that some of these questions may make you uncomfortable or distressed; if so, please let me know. You don't have to answer those questions if you don't want to. You also need to understand that all information that I receive from you by phone, including your name and any other identifying information, will be strictly confidential and will be kept under lock and key. The purpose of these questions is only to determine whether you are eligible for the larger study. Remember, your participation is voluntary; you do not have to complete these questions.

Do I have your permission to ask you these questions? Yes No

Female Screening

Name:

DOB:

Age:

Partner's Name:

Length of your relationship:

How long ago did you disclose your assault to your partner?:

Are you a CCCL inmate?: Yes No

Is your partner willing to participate in this study?: Yes No

Do you identify as a victim or survivor of sexual assault?: Yes No

Have you been assaulted more than once?: Yes No

How old were you when the assault(s) occurred?

What kind of assault occurred?:

Is your partner aware of your sexual assault?: Yes No

Was the person who assaulted you your current partner?: Yes No

Do you feel that you have control over your sexual relationships and your partner will respect your wishes if you say no to specific sexual activities?: Yes No

Does your partner ever force you to be intimate?: Yes No

Thank you for your time. You (do) or (do not) meet the criteria for this study.

Thank you for calling to find out more about the research study. My name is Nicole Lozano, and I am a fifth year doctoral student in Counseling Psychology at the University of Nebraska. The purpose of this research study is to develop a theory about relationships where the female partner has been sexually victimized as an adult outside of the couple relationship. As part of the formal study, I will be interviewing couples about how experiences of sexual assault affect your relationship. Do you think you might be interested in participating in that study?

{If No}: Thank you very much for your time.

{If Yes}: Before enrolling people in this study, I need to determine if they are eligible. And so what I would now like to do is to ask you a series of questions about you. There is a possibility that some of these questions may make you uncomfortable or distressed; if so, please let me know. You don't have to answer those questions if you don't want to. You also need to understand that all information that I receive from you by phone, including your name and any other identifying information, will be strictly confidential and will be kept under lock and key. The purpose of these questions is only to determine whether you are eligible for the larger study. Remember, your participation is voluntary; you do not have to complete these questions.

Do I have your permission to ask you these questions? Yes No

Male Screening

Name:

DOB:

Age:

Partner's Name:

Length of your relationship:

How long ago did your partner disclose her assault to you?:

Are you a CCCL inmate?: Yes No

Is your partner willing to participate in this study?: Yes No

Do you identify as a victim or survivor of sexual assault?: Yes No

Are you aware of your partner's sexual assault?: Yes No

Default Question Block		Block Options ▼
Q3	<p>Thank you for reaching out to learn more about the research study. My name is Nicole Lozano, and I am a doctoral candidate in Counseling Psychology at the University of Nebraska. The purpose of this research study is to develop a theory about relationships where the female partner has been sexually victimized as an adult outside of the couple relationship.</p> <p>As part of the formal study, I will be interviewing couples about how experiences of sexual assault affect your relationship. Do you think you might be interested in participating in that study?</p> <p>Yes</p> <p>No</p> <p>If Yes is Selected, Then Skip To Before enrolling people in this study...</p> <p>If No is Selected, Then Skip To End of Survey</p>	
Q2	<p>Before enrolling people in this study, I need to determine if they are eligible. And so what I would now like to do is to ask you a series of questions.</p> <p>There is a possibility that some of these questions may make you uncomfortable or distressed; if so, you can end at anytime. Additionally, you don't have to answer those questions if you don't want to.</p> <p>You also need to understand that all information that I receive from you, including your name and any other identifying information, will be strictly confidential and will be kept under lock and key. The purpose of these questions is only to determine whether you are eligible for the larger study. Remember, your participation is voluntary; you do not have to complete these questions.</p> <p>Do I have your permission to ask you these questions?</p> <p>Yes</p> <p>No</p> <p>If No is Selected, Then Skip To End of Survey</p>	
Q4	<p>What is your gender?</p> <p>Male</p> <p>Female</p>	

Female Screening		Block Options ▼
Q5	What is your first and last name?	
Q7	Please enter your date of birth	
Q8	What is your age?	
Q9	What is your boyfriend/husband's name?	

Q10	How long have you been with your boyfriend/husband?
<input type="text"/>	
Q11	How long ago did you disclose your assault to your partner?
<input type="text"/>	
Q12	Is your partner willing to participate in this study?
<input type="text"/>	Yes No
Q13	Do you identify as a victim or survivor of sexual assault?
<input type="text"/>	Yes No
Q14	Have you been assaulted more than once?
<input type="text"/>	Yes No
Q16	What kind of assault(s) occurred?
<input type="text"/>	
Q15	Is your partner aware of your sexual assault?
<input type="text"/>	Yes No
Q17	Was the person who assaulted you your current partner?
<input type="text"/>	Yes No
Q18	Do you feel that you have control over your sexual relationships and your partner will respect your wishes if you say no to specific sexual activities?
<input type="text"/>	Yes No
Q19	Does your partner ever force you to be intimate?
<input type="text"/>	Yes No
Q29	Please enter your email address or phone number so that I can contact you about your eligibility. Please choose whichever is best for you.
<input type="text"/>	
	If Please enter your email add... is Not Empty, Then Slip To End of Survey

Q20	What is your first and last name?
<input type="text"/>	
Q21	What is your date of birth?
<input type="text"/>	
Q22	What is your age?
<input type="text"/>	
Q23	What is your girlfriend/wife's name?
<input type="text"/>	
Q24	How long have you been with your partner?
<input type="text"/>	
Q28	Are you aware of your partner's sexual assault?
<input type="text"/>	Male
	Female
Q25	How long ago did your partner disclose her assault to you?
<input type="text"/>	
Q26	Is partner will to participate in the study?
<input type="text"/>	Yes
	No
Q27	Do you identify as a victim or survivor of sexual assault?
<input type="text"/>	Yes
	No
Q30	Please enter your email address or phone number so that I can contact you about your eligibility. Please choose whichever is best for you.
<input type="text"/>	
	If Please enter your email add... is Not Empty, Then Slip To End of Survey

APPENDIX D: Email to Potential Participants

Hi Female Participant and Male Participant!

Thank you both for filling out the survey. You both are eligible for the study, so I'm contacting you about next steps.

The way this works is that I'd like to either video call or phone call y'all individually for about an hour to talk about your experiences. So, the first thing to do is to schedule a time to do that. If you could respond to this email with some times, that would be great.

--

Nicole Lozano, M.A.

Counseling and School Psychology Clinic Coordinator

Doctoral Candidate | Counseling Psychology

Ph: 512-731-2006 | University of Nebraska-Lincoln

APPENDIX E: Informed Consent – Males



COLLEGE OF EDUCATION AND HUMAN SCIENCES
Educational Psychology



IRB# 20130813661EP
Date Approved: 06/17/2015
Valid Until: 06/16/2016

Informed Consent Male Version

Study Description

You and your partner are invited to participate in a research study of couples. The main focus of this study is on different factors that may affect couples. More specifically, we are interested in the possible effect that a history of sexual abuse or trauma might have on committed romantic relationships. If you decide to participate, you and your partner will be interviewed separately about a number of things, including your partner's past sexual trauma history and how you currently get along with your partner. Full participation in this study involves one interview, approximately an hour and a half to two hours long, that will be audiotaped. You may also be contacted at a later time to help clarify other questions that may arise.

Confidentiality

Your privacy will be strictly protected. A pseudonym will be given to you and a separate one to your partner. Additionally, what is said in the interview will not be repeated to your partner, and all interviews will be conducted separately.

Any information obtained during the study which could identify you will be kept strictly confidential. Your specific responses to the interview questions will not be shared with your partner. Your interview will be transcribed and following transcription, audiotapes will be completely erased and destroyed. The transcriptions and analysis will be stored in a locked cabinet in the researcher's personal office and will only be seen by the researcher during the study. When writing the report, pseudonyms will be used to protect confidentiality and any descriptions will be written in an unidentifiable manner. Any identifying information will be destroyed after member checking has been completed. All other research documents will be destroyed after five years. The information obtained in this study may become published in scientific journals and/or presented at scientific meetings but the data will be reported in a way that preserves your anonymity. In addition, if you choose to see the results of the study, you may be able to identify your partners' responses because of the nature of the research.

Compensation

After your interview, you will be mailed a \$20 gift card.

Freedom to Withdraw

You are free to decide not to participate or to withdraw from the study for any reason and without affecting your relationship with the University of Nebraska. Your decision will not result in any loss of benefits to which you are otherwise entitled. You may also refuse to answer any questions, if you choose to do so.

Risks and Benefits

Your contribution will involve participating in an interview with the researcher. Thus, this research does not involve any type of physical risk. However, some of the questions are personal in nature and could



be embarrassing or remind you of upsetting past experiences. If you become concerned or upset as a result of participating, you may contact RAINN, a national sexual assault hotline at 1.800.656.HOPE (4673). Additionally, you can search for a local crisis center to speak with someone in person by following this link: <http://centers.rainn.org/>

If you are local to Lincoln Nebraska, you may contact the Counseling and School Psychology Clinic (402-472-1152), the Psychological Consultation Center (402-472-235) or Voices of Hope (402-476-2110) where counseling is available for a fee that is based on your income.

This study is not designed to help you personally, but the information gained from it will add to our knowledge about events that impact couples. You can get a summary of the results once the study is over. This may be done by contacting the investigator after July 1, 2015.

Right to Ask Questions

If you have any questions about this study, you have the right to have them answered by the researcher before agreeing to participate. You can also ask questions at any time during the study. You may also contact the main investigator, Nicole Lozano at 402-608-1834 or her supervisor M. Meghan Davidson at 402-472-1482. If you have questions about your rights as a research participant that have not been answered by the investigator, you may contact the University of Nebraska-Lincoln Institutional Review Board at 402-472-6965.

Audio and/or Visual Recording

Additionally, to ensure the quality and effectiveness of the study, the interview will be recorded. Any identifying information will be kept confidential. Pseudonyms will be used to label the tapes to ensure confidentiality. Following transcription of the interviews, information will be erased and destroyed. Transcriptions and analysis will be stored in a locked cabinet in the researcher's personal office and will only be seen by the researcher during the study and for kept five years after the study is complete.

- ☐ By checking this box, you are giving consent to the University of Nebraska-Lincoln and the researcher of this study to record the interview. You understand that you may withdrawal your consent at any time without fear of adversely affecting your relationship with the researcher or the University of Nebraska-Lincoln.

Consent

Your signature certifies that you have read and understand this consent form, and that you agree to participate in the study. You will be given a copy of this form to keep.

Signature of Participant:

Printed Name:

Date:

Name and phone number of investigator(s):

Nicole Lozano, M.A. (402-608-1834)

M Meghan Davidson, Ph.D. (402-472-1482)

APPENDIX F: Informed Consent – Females



COLLEGE OF EDUCATION AND HUMAN SCIENCES
Educational Psychology



Informed Consent Female Version

Study Description

You and your partner are invited to participate in a research study of couples. The main focus of this study is on different factors that may affect couples. More specifically, we are interested in the possible effect that a history of sexual abuse or trauma might have on committed romantic relationships. If you decide to participate, you and your partner will be interviewed separately about a number of things, including your past sexual trauma history and how you currently get along with your partner. Full participation in this study involves one interview, approximately an hour and a half to two hours long, which will be audiotaped. You may also be contacted at a later time to help clarify information.

Confidentiality

Your privacy will be strictly protected. A pseudonym will be given to you and a separate one to your partner. Additionally, what is said in the interview will not be repeated to your partner, and all interviews will be conducted separately.

Any information obtained during the study which could identify you will be kept strictly confidential. Your specific responses to the interview questions will not be shared with your partner. Your interview will be transcribed and following transcription, audiotapes will be completely erased and destroyed. The transcriptions and analysis will be stored in a locked cabinet in the researcher's personal office and will only be seen by the researcher during the study. When writing the report, pseudonyms will be used to protect confidentiality and any descriptions will be written in an unidentifiable manner. Any identifying information will be destroyed after member checking has been completed. All other research documents will be destroyed after five years. The information obtained in this study may become published in scientific journals and/or presented at scientific meetings but the data will be reported in a way that preserves your anonymity. In addition, if you choose to see the results of the study, you may be able to identify your partners' responses because of the nature of the research.

Compensation

After your interview, you will be mailed a \$20 gift card.

Freedom to Withdraw

You are free to decide not to participate or to withdraw from the study for any reason and without affecting your relationship with the University of Nebraska. Your decision will not result in any loss of benefits to which you are otherwise entitled. You may also refuse to answer any questions, if you choose to do so.

Risks and Benefits

Your contribution will involve participating in an interview with the researcher. Thus, this research does not involve any type of physical risk. However, some of the questions are personal in nature and could be embarrassing or remind you of upsetting past experiences. If you become concerned or upset as a



result of participating, you may contact RAINN, a national sexual assault hotline at 1.800.656.HOPE (4673). Additionally, you can search for a local crisis center to speak with someone in person by following this link: <http://centers.rainn.org/>

If you are local to Lincoln Nebraska, you may contact the Counseling and School Psychology Clinic (402-472-1152), the Psychological Consultation Center (402-472-235) or Voices of Hope (402-476-2110) where counseling is available for a fee that is based on your income.

This study is not designed to help you personally, but the information gained from it will add to our knowledge about events that impact couples. You can get a summary of the results once the study is over. This may be done by contacting the investigator after July 1, 2015.

Right to Ask Questions

If you have any questions about this study, you have the right to have them answered by the researcher before agreeing to participate. You can also ask questions at any time during the study. You may also contact the main investigator, Nicole Lozano at 402-608-1834 or her supervisor M. Meghan Davidson at 402-472-1482. If you have questions about your rights as a research participant that have not been answered by the investigator, you may contact the University of Nebraska-Lincoln Institutional Review Board at 402-472-6965.

Audio and/or Visual Recording

Additionally, to ensure the quality and effectiveness of the study, the interview will be recorded. Any identifying information will be kept confidential. Pseudonyms will be used to label the tapes to ensure confidentiality. Following transcription of the interviews, information will be erased and destroyed. Transcriptions and analysis will be stored in a locked cabinet in the researcher's personal office and will only be seen by the researcher during the study and for kept five years after the study is complete.

☐ By checking this box, you are giving consent to the University of Nebraska-Lincoln and the researcher of this study to record the interview. You understand that you may withdrawal your consent at any time without fear of adversely affecting your relationship with the researcher or the University of Nebraska-Lincoln.

Consent

Your signature certifies that you have read and understand this consent form, and that you agree to participate in the study. You will be given a copy of this form to keep.

Signature of Participant:

Printed Name:

Date:

Name and phone number of investigator(s):

Nicole Lozano, M.A. (402-608-1834)

M Meghan Davidson, Ph.D. (402-472-1482)

Appendix G: Interview Protocol – Males

Disclosure

- How long ago did your partner disclose her sexual assault to you?
- What was it like for you when your partner disclosed her assault?
- How did you respond to her disclosure?
- Please tell me about your response.
- What went well with your response? What do you wish had been different?
- Tell me what it was like for you to hear her disclosure.
- Can you identify feelings that you had?
- How much detail did she share about her assault? Do you wish she had shared more, less?

Salience

- How often do you think about her assault?
- What triggers or situations make you think about her assault?
- What role do you believe it plays in your relationship?
- Do you feel like your relationship is different because of her assault?

Communication

- Have you and your partner discussed the assault again? Tell me about that.
- What is it like for you to discuss the assault with your partner?
- How do you respond when you discuss the assault?
- Is there anything you wish you could change about your communication regarding the assault? If so, what would that be?

Physical Intimacy

- How would you describe your sexual life with your partner?
- Had there been any sexual contact prior to disclosure?
 - If yes, do you believe that the disclosure changed your sexual relationship? How or how not?
- How do you believe that her assault affects your physical intimacy?

APPENDIX H: Interview Protocol – Females

Opening question (Ullman, 2012)

If you feel comfortable, please tell me about your sexual assault experience.

Disclosure

- Tell me about your decision to share your experience with your partner.
- When did you decide to tell your partner?
- What led to your decision? Tell me what triggered it or made you decide that to share your experience.
- How long ago did you disclose to your partner?
- What was it like to share your experience with him?
- Please tell me about his response.
- How did you feel about his response?
- Had you disclosed the assault to other partners?

Salience

- How often do you think about your assault?
- What triggers or situations bring up the assault?
- What role do you believe the assault plays in your relationship?
- How do you believe your relationship to your partner changed after he gained knowledge of the assault(s)?

Communication

- Since you initially brought up your assault, have you and your partner discussed it again? Tell me about that.
- If you do, how does the assault enter the conversation? Which of you tends to bring it up? Why do you feel this is happening?
- What is it like for you to discuss your assault with your partner?
- How do you perceive his responses?
- Is there anything you wish you could change about your communication with your partner regarding your assault? If so, what would that be?

Physical Intimacy

- How would you describe your sexual life with your partner?
- Had there been any sexual contact prior to disclosure?
 - If yes, do you believe that the disclosure changed your sexual relationship? How or how not?
- How do you believe that your assault affects your physical intimacy?

APPENDIX I: Transcriptionist Confidentiality Contract

Transcriptionist Confidentiality Statement

I, Lisa Wilen, (name of transcriptionist) agree to hold all information contained on audio recorded tapes/and in interviews received from Nicole Lozano (Name of PI), primary investigator for The Impact of Adult Sexual Violence on Intimate Relationships: A Grounded Theory Study (IRB #: 20130813661EP; Project ID: 13661), (Name of the project) in confidence with regard to the individual and institutions involved in the research study. I understand that to violate this agreement would constitute a serious and unethical infringement on the informant's right to privacy.

Lisa Wilen

Signature of Transcriptionist

3-25-15

Date

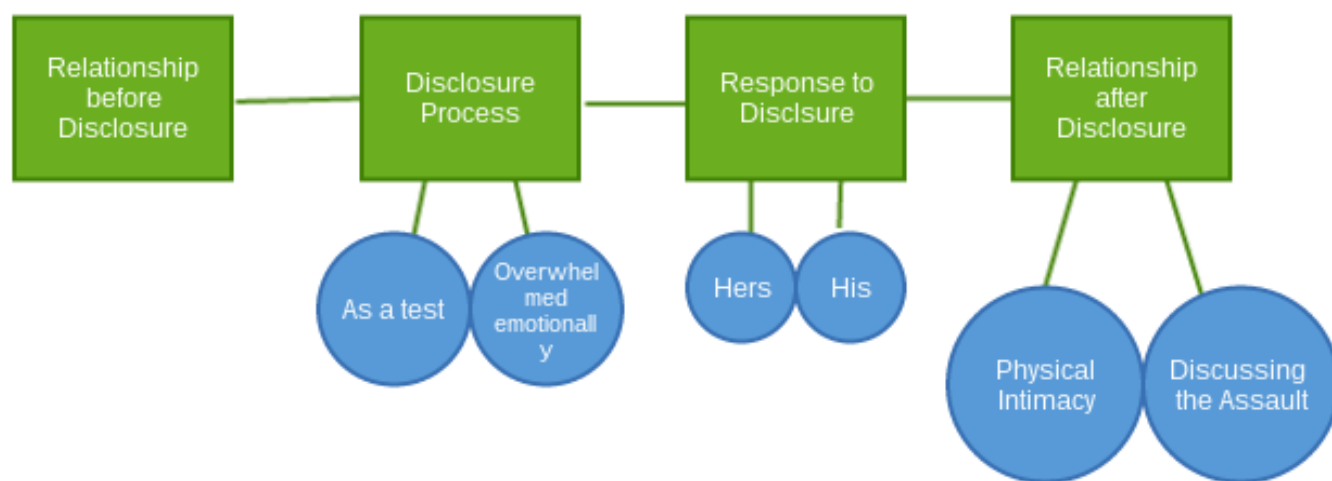
Nicole Lozano, M.A.

Signature of Principle Investigator

3/25/15

Date

APPENDIX J: Member Check Email



The above diagram shows the current model I am thinking about for explaining this study. I would really like your help and input in order to make this research the most accurate that it can be. Below you'll find short sections with my reasoning for why it's organized this way along with some quotes from the interviews (not just yours, but everyone's) and then questions that I'm hoping you'll be willing to answer that will assist me in getting deeper, richer picture of the research. I encourage you to look at this on your own. Thank you so much for all of your help and I look forward to reading your thoughts!

Warmly, Nicole

Relationship before Disclosure

Disclosure Process

The decision to disclose appears to be twofold: (1) as a type of test or (2) she felt too emotional by the situation and needed to tell her partner.

I knew I had baggage, and that was one of the deciding factors on if he is going to accept me... then he has to know everything.

...that it is best that you get dirty secrets out in the open first and foremost because a lot of people can't deal with that.

I think it was about 5 years ago now. I just kind of broke down when I told him about it....So when we got home I just started crying and I just told him about it.

I actually did it because... feel like I was still a little hurt by it, like I am still a little bit fragile.

Response to Disclosure

General responses to the disclosure were positive. The female partners noted feeling a sense of relief at having shared what happened and perceived all responses to be positive, highlighting support, caring, and understanding. Of interest is that while the females perceived their partners to be supportive and caring they never mentioned anger. However, the male partners unanimously discussed feeling anger.

He has just been really really sensitive to me and my needs, and honestly that has been the biggest relief of it all.

He just kind of like held my hand and hugged me and just asked What do you need, what can I do? And that is pretty much how it was.

I assume myself some sort of targetless anger at that person... I wasn't angry with Isabelle or anything like that.

I was extremely pissed off at him because in my opinion no man should lay his hands on a woman in anger.

I mean when she told me about it I tried to be as supportive as I could and not try to lay anything on her or hurt her or anything else like that. You know, this is not her fault.

The women discussed that there had been worry about how he would respond, noting the impossibility of the situation.

Thinking about it, it is kind of like an impossible position for him too, to have someone tell you that, because you don't know what you are supposed to do and say.

I think that was probably hard and confusing for him... he probably felt sad and confused

The women also noted that the chance to disclose acted as a turning point in their relationship.

I do think it was more of a turning point for me than necessarily the relationship, but that inherently is good for the relationship.

The men discussed the desire to understand their partner's experiences, but feeling unsure of how best to do that.

So it is kind of hard for me to understand, but I try to like have her tell me more about it so I can understand and comprehend when she is feeling bad about it or something like that.

It is not like anybody can be prepared for that kind of information, never any way to just be prepared for it.

There was nothing really I could say. I didn't know anything about it at the time, so I was like What? and I just had to listen as best as I could.

Maybe I could be like more, want to learn more about it, and then maybe like comfort her even more than I can now. I don't know that much about rape because I'm obviously a guy, it is different in our world and culture, like opinion and stuff. So it is kind of hard for me to understand, but I try to like have her tell me more about it so I can understand and comprehend when she is feeling bad about it or something like that.

I really didn't know how to react to it, so that is why I wanted to know what she wanted me to do, how did she want me to help her in a way through this. Yeah, I mean I can say, "we can do this, we can do that," but that is not really helping her get it out.

Additionally, male partners who reported some kind of abuse history, though not sexual, appeared to feel as if they had a better handle on what their female partner was experiencing. Their female partners felt likewise.

I'm the product of physical abuse, so there is a little more empathy on my part about her sexual abuse... so it was a little bit easier for me to be more receptive to her about this issue

He has mental issues from abuse in his childhood, and we are working through it together.

Relationship After Disclosure

Most couples felt that the relationship was strengthened to some degree after the disclosure, though some people were less clear how.

I really don't know if it changed it, but I think it brought us closer together since I shared this really intimate detail. I certainly trusted him a lot more after I trusted him.

I feel like it showed me that I can be open with him and he would understand me.

Sometimes we will start talking about it to try to clear the air, to delve into what made the situation what it was and how we can try to get past that and be who we are instead of who she and the person at that time was and that we are not those people.

I'm sure in reality it probably does in some way, but I just don't really know what that is.

I feel like if it does affect it, it is probably in small ways I don't really notice.

Two couples attributed time to the reason why it is not as apparent in their relationship

I don't really think that it does anymore.

I would say if it was a scale of Never to Always with Sometimes and A Lot and Infrequently, I would say Infrequently. It is not Never, but it is very seldom that I think things come up nowadays.

Sex

The most salient point regarding sex was the importance of the male partner initiating and asking for permission. All couples discussed this with the researcher in some form.

...our sexual interaction changed. I think it was more like, "Do you want to do this?" rather than just like trying to do it.

I think that maybe like just doing it (sex) would kind of be like a trigger.

Being open enough to say no, that has been really nice.

It is good because I never feel like pressured into having sex or anything because we always talk about it first.

...I felt like he was worried about it, and yeah, I think he was worried about it and like worried that something he was doing would make that happen or that I wouldn't want to have sex or something, but that is not how it is.

A couple of the women did discuss that they are occasionally triggered during sex, and thus it is important to have a partner who is responsive and supportive to them.

She would say, "We can't do that," and I don't think we would continue from there.

I kind of got upset really and just felt like it was necessary that I explain to him that was why I was having that reaction

I think as time goes on they happen less frequently, and I am able to kind of control them better, but it does happen sometimes.

Though, one person in particular stated that she wouldn't tell him when she was triggered, for fear of hurting him.

I think that from time to time during sex it will come up a little for me, like I will start having a bad thought or something, which I think I don't really tell him.

Discussing the Assault

Each couple was in agreement that discussing the assault happens rarely, if at all. It seems to be linked to not wanting to upset either partner, with the primary belief being that if she wanted to talk about it she would -- meaning that she has already processed the experience.. Discussions appeared to only happen if there was a trigger for it.

Not that often. She seems to have handled it fairly well. Every now and then she brings it up; we talk about it a little bit if she wants to, and then if she doesn't I give her her space and she works it out for herself.

I think sometimes it was hard to talk about it and sometimes easier to talk about it. I think I've gotten better at it and just saying what I need to say. I used to not do that. But it is still hard. I guess I don't know how to make it not hard.

I am not totally excited about bringing it up because she doesn't like it and I don't like it, so we just keep it chill. We have more things to talk about than that anyway.

In couples that do discuss the assault, it is done in a way that looks like the male partner is checking in with her. Additionally, he appears to be the person to bring up the discussion.

I end up bringing it up only because she will kind of start locking herself into herself, just going into her own head, and I will start noticing that something is wrong, something is not right, that she is upset somehow, and I will ask her. Usually at that point she will do one of 2 things, say No I'm fine, everything is good, I'm just really tired or cranky or something like that, or she will just go ahead and outright open up to me. Usually when she tells me, I'm just really cranky, usually by this point I kind of know she is fibbing, and I really have the sense that something else is going on there. So we will sit and talk about it. I just want her to know that I'm going to be there for her when she needs me to be there.

So, now that you've had a chance to read through all of this, I have more questions that I'd like your help with.

All Participants

- What do you agree with here? What did I get wrong? What should I change?
- Do you see this as a linear process or does it seem to cycle back?
- How has or have your experiences influenced how you would raise or are raising your kids?

Male Participants

- Had you suspected that something had happened before she had told you?
- What was your internal dialogue about sexual assault before knowing your partner had been a victim?

Females Participants

- Before you decided to disclose, how would you have described your relationship?
- What was your internal dialogue like about what had happened to you? Did your partner's response change it at all?
- What are your experiences with being triggered about your assault? How does it happen? What do you do? How often do you talk to your partner about it?

APPENDIX K: Sample of Code, Quotes, and Themes

Code	Category	Theme	Quote
Partner characteristics	Relationship Before	Relationship Before Disclosure	He was easy to talk to from the get-go and I know I can tell him anything and I have told him anything.
Disclosure as a test	Disclosure Process	Decision to Disclose	I knew I had baggage, and that was one of the deciding factors on if he is going to accept me and my son, then he has to know everything. I didn't want him to find out as a surprise or Oh my God, why didn't you tell me? So I decided to be really forthcoming and say Hey this is what happened to me, and he has been really supportive.
Decision to disclose	Disclosure Process	Decision to Disclose	I was getting more and more and more sort of like PTSD symptoms, like getting flashbacks, thinking about that, feeling more preoccupied by it.
Disclosing to someone who cares	Disclosure Process	Decision to Disclose	...so it felt good to be able to tell someone that cares about me, and he didn't judge me or make me feel like it was my fault.
Effect on female partner	Disclosure response	Disclosure Reactions	...it definitely is still a part of me and my psyche. It's just less obvious when it's affecting me
Partner response	Disclosure response	Her Disclosure Reaction	It was a lot of weight off my shoulders to have him be so accepting of it and accepting of me and all my baggage, and it was really nice. I had a really good cry.
How to be helpful Learn	Disclosure response	His Disclosure Reaction	Maybe I could be like more, want to learn more about it, and then maybe like comfort her even more than I can now. I don't know that much about rape because I'm obviously a guy, it is different in our world and culture, like opinion and stuff. So it is kind of hard for me to understand, but I try to like have her tell me more about it so I can understand and comprehend when she is feeling bad about it or something like that.
Being available	Discussing the Assault	Discussing the Assault	I end up bringing it up... So we will sit and talk about it. I just want her to know that I'm going to be there for her when she needs me to be there.
Relationship Health	Relationship after Disclosure	Relationship after Disclosure	...I don't want to compare her to a relationship I used to be in because I want to focus on the relationship I have now...

Openness in Relationship	Relationship after Disclosure	Relationship after Disclosure	I feel like it showed me that I can be open with him and he would understand me.
Comfort with partner	Relationship after Disclosure	Relationship after Disclosure	So then I called him and we kind of talked on the phone about it while I started home and then like more then next day and stuff, and that was more specific about my situation and stuff.
Triggers	Misc.	External Triggers	When I would flashback or retreat into myself, he would stop what he was doing and he would go you know, "Hey are you okay, is there anything I need to do?"
Triggers	Misc.	External Triggers	So, a lot of times just looking at a certain wall or just really little insignificant things would kind of make me have a flashback or if Grant and I were having an argument if he would tense up, I would retreat and you know I wouldn't say anything, I wouldn't look at anything
Feelings about sex	Sex	Physical Intimacy	It is good because I never feel like pressured into having sex or anything because we always talk about it first.
Sexual communication	Sex	Physical Intimacy	Being open enough to say no, that has been really nice.
Sexual Interactions	Sex	Physical Intimacy	I think when we first started dating, I viewed kind of anything sexual as like negative and I didn't like it and I didn't enjoy it, but it was like a necessary evil.
Sexual interaction	Sex	Sexual Triggers	and he was like, "Oh we never have to do anything unless you want to," and stuff like that.
Male partner sensitivity	Discussing the Assault	Discussing the Assault	I think in the past there were a few times when he made a joke or something that wasn't super offensive or like it wasn't about it, but the way he said something really bothered me, and I said something to him about it, and he like never did it again.
Communication	frequency of discussion	Discussing the Assault	We really don't talk about it much now because I don't feel that need to. I haven't felt the need to talk about it in a long time, although certain things will come up.