

Tell Me Your Story: The Narratives of Sexual Assault Survivors on One College Campus

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ABSTRACT

Approximately 20% of college students will be sexually assaulted during their university years, leading to prolonged physical and emotional repercussions. Out of fear, rebuke, and dismissal, most survivors choose not to report the attack. Those who do report often experience unsatisfactory outcomes. The cultural climate of college life, coupled with gendered scripts ingrained before campus enrollment, contributes to environments that conflate sex and power, dismiss consent, and allow campus complicity. To help break the silence, we collected the stories of 129 sexual assault survivors at one small state college in the Southeastern United States. Using basic demographic information and qualitative analysis, four themes emerged across narratives. Threaded throughout each theme's description are direct quotes from survivors, boldly telling their stories. Study findings highlight survivors' experiences centered on ambiguity and trust violations, ongoing impact, social and institutional betrayals, and suggestions from survivors. Lastly, survivors provide firsthand suggestions for making campuses more just, safe, and responsive.

KEYWORDS: sexual assault, stories, college students, campus, U.S.A., narrative inquiry

The voices of sexual assault survivors are often buried beneath the dirt line of college life. The plotlines are not new; in their seminal study of 36 college campuses, Koss, Gidycz, and Wisniewski (1985) reported 54% of undergraduate women experienced sexual victimization or aggression during their college years. Over three decades later, the situation remains dire, with Krebs et al. (2016) finding 21% of female college students across nine universities are survivors of sexual assault. Cantor et al.'s (2020) revised report, the largest to date, with data from 181,752 students, from 33 AAU (Association of American Universities) member schools, showed a 13%

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overall rate of “nonconsensual sexual contact by physical force or inability to consent since the students enrolled in school,” with significantly higher rates for undergraduate women (25.9%) and undergraduate TGQN students (22.8%). Within the context of the survey, TGQN students encompass transgender women, transgender men, nonbinary/genderqueer, gender questioning, and gender not listed. For schools that participated in both Cantor et al.’s (2016) previous survey and the current study, there was an increase in nonconsensual sexual contact by physical force or inability to consent for both undergraduate women (+3%), graduate and professional women (+2.4%), and undergraduate men (+1.4%).

What is often missing, however, from sexual violence reports are first-hand stories of those violated. Our study aims to amplify those voices.

Review of the Literature

In the months leading up to college, many students plan their rooms, select their classes, order books, and anticipate the new relationships that await them on campus. Before sending their young adults out the door and into college life, parents often initiate discussions on the importance of locking doors to evade theft. Unfortunately, pre-college discourse around the risks of sexual assault remains scant.

Sexual Assault Reporting

Whereas early studies of sexual assault on college campuses generalized across populations (Koss, Gidycz, & Wisniewski, 1985), in recent years, that data has been aggregated, providing a clearer image of the groups most impacted, such as TGQN (transgender women, transgender men, nonbinary or genderqueer, gender questioning or gender not listed) students.

For example, Cantor et al. (2020) reported 65% of TGQN undergraduates have experienced harassing behaviors, 22.8% “penetration or sexual touching involving physical force and/or inability to consent or stop what was happening,” 21.5% intimate partner violence (IPV), and 15.2 percent stalking. Moreover, Nightingale (2024) found low reporting rates for LGBTQ students, with only 41 of 409 participants, or 10% of those surveyed, making formal reports, with data indicating higher rates of intercourse and/or penetration assaults compared to forced touching.

Deciding to report a sexual assault is a harrowing decision, and one often met with ridicule and a lack of support, leading to a second victimization. The National Sexual Violence Resource Center (2015) reports that 90% of sexual assault survivors on college campuses do not report the crime. Those who do report indicate low levels of satisfaction with how their case was handled and ultimately brought to resolution (Shah & Gu, 2020). A 2006 review found that 77% of two and four-year colleges and universities reported zero incidents despite evidence to the contrary (Lombardi & Jones, 2009). The discrepancy, in part, lies in flawed reporting practices. Karjane et al. (2002) found that “only 36.5 percent of schools reported crime statistics in a manner that was fully consistent with the Clery Act” (p. viii) or the Jeanne Clery Disclosure of Campus Security Policy and Campus Crime Statistics.

The Clery Act requires post-secondary institutions that receive federal funding to publish an annual public security report detailing campus crime statistics for the preceding three years. The Clery Act was expanded in 2013 with the signing of the Campus Sexual Violence Elimination (SaVE) Act, which expanded Clery to include stalking, domestic violence, and dating violence. SaVe was signed into law as part of the reauthorization of the Violence Against Women Act

(VAWA). Coe et al.'s (2025) research found that though Clery Act timely warnings can be upsetting for students, 88% found the alerts helpful and informative, and thus valued the disruptions.

While the SaVE Act offers a definitional expansion and wider accountability measures, Richards's (2019) examination of sexual misconduct cases reported to Title IX coordinators in Mid-Atlantic postsecondary institutions found that 76% of the 1,054 cases reported did not progress toward a formal adjudication process, with only 2% of all cases eventually leading to expulsion. Such data represents a breakdown in a system that was birthed inside campus cultures that allow and, at times, encourage sexual misconduct, requiring a proactive approach that zooms out to examine the larger environment of college life and then zooms in again to support the individual needs of survivors.

Kerr et al.'s (2025) research showed a positive correlation between student-reported data from the National College Health Assessment (NCHA) and the official Campus Safety and Security (CSS) records, as they pertain to alcohol consumption and sexual assault. Universities with high levels of reports of binge drinking and alcohol related arrests also reported more rapes on campus. The researchers concluded that collecting data from multiple large-scale, complementary reports provided a more robust picture of campus culture and safety, than relying on one measure.

Students' Perceptions of Sexual Assault

Moves to enhance campus safety require a rich understanding of students' perceptions of the threat of sexual violence. Schaaf et al.'s (2019) research of undergraduates revealed that students believed that sexual assault was a significant concern at their university and that instances of sexual coercion and violence were often swept "under the rug." Some gendered differences emerged, too, with women articulating the need to craft a clear and cohesive definition of what constitutes a sexual assault, whereas men less frequently shared the desire for such clarification.

These differences may be an outgrowth of internalized cultural scripts, for rape culture and rape myths can become embedded and homogenized into students' socialization and exposure to media. Brownmiller (1975) first articulated the idea of *rape culture*, describing it as the normalization of sexual violence and the blaming of the victim for the abuse. Several years later, Burt (1980) coined the term *rape myths*, defining them as "prejudicial, stereotyped, or false beliefs about rape, rape victims, and rapists—in creating a climate hostile to rape victims" (p. 217). Examples of rape myths include "She wanted it," and "only certain types of girls get raped." To better understand the stereotype, Burt (1980) designed a study in which 598 randomly selected individuals over the age of 18 living in Minnesota were asked to share their "attitudes and feelings about the behavior of men and women toward each other in their everyday lives, and also their romantic and sexual behavior" with a particular focus on participants' views on rape and sexual assault. Findings indicated a strong correlation between agreement with rape myths and "antagonistic beliefs around other sexes" and the "acceptance of interpersonal violence" (p. 220-221).

Lathan et al. (2023) found the lowest endorsement of rape myths amongst survivors of sexual assault. Conservative and religious acculturation also impacts students' belief systems. Barker and Galliher (2020) examined young women's conservative socialization before entering college, noting the presence of internalized sexual scripts in which women are forced to function under patriarchal rule, relinquishing their bodily autonomy while being held responsible for their

chastity. Such narratives require students to function within contrasting and disempowering plotlines that put them at heightened risk for sexual violence.

In an ethnographic study, Beste (2017) described the profound split students are asked to make, presenting themselves as serious scholars by day, juggling complex academic and professional demands with responsibility and rigor, and then by night, transforming into reckless partygoers, abandoning their personal expectations and boundaries. Within the study, students reported the pressure to work within the confines of patriarchal values that purport submission and hook-up cultures. Surprisingly, however, though alcohol consumption did correlate with sexual assaults, participation in Greek life did not exponentially increase the likelihood of sexual violence, though women who were members of a sorority were at a slightly higher risk of assault (Bynion et al., 2022; Fisher, Daigle, & Cullen, 2010; Spencer et al., 2023).

The Aftermath of Sexual Assault

Following a sexual assault, rape cultural norms can leave survivors drowning in feelings of anger, embarrassment, and self-blame (Shah & Gu, 2020). Amidst the inner turmoil, survivors are faced with the decision on whether to disclose the assault to a friend or the authorities. Waterman and colleagues (2025) conducted a qualitative study with 81 participants who received a disclosure when either they or the survivor was drinking during the sharing. Participants reported that the alcohol made it easier for the survivor to disclose the attack, yet also led to heightened negative emotions and difficulty recalling details, leading the researchers to identify the need for stronger cultural scripts for navigating difficult conversations and offering support to survivors.

The ways in which colleges and universities gather sexual assault data is also consequential. One significant barrier to reporting is the obvious but often overlooked aspect of the readability and accessibility of the reporting process. Using a randomized sample, Taylor (2018) analyzed the reporting instructions of 100 four-year institutions, finding that 81% were written at a 15.4-grade level, based on syntax and word choice, which correlates with a third-year college readability score.

Other barriers include policies that lack a foundational research base, such as compelled disclosures, in which reports are formally filed despite survivors' requests for anonymity (Holland, Cortina, & Freyd, 2018). Students who choose not to report their sexual assault cite concerns including embarrassment, fear of friends and family finding out, victim-blaming, and the involvement of law enforcement. Compelled disclosures, though well-meaning, hijack the stories of survivors, contributing to feelings of disempowerment (Lathan et al., 2023).

The journey to recovery following a sexual assault is long, calling survivors to renegotiate their identity, integrating the traumatic experience into their life narrative in a way that allows them to take back the power that was stolen during the assault. Many survivors report long-term consequences, including hesitancy to enter future romantic relationships and a struggle to extend trust in their daily lives (Barker & Galliher, 2020).

The negative fallout experienced by survivors is in part due to their university's failure to adequately address the crime and provide resources in the aftermath, all of which are types of institutional betrayal. Since most sexual assaults are perpetrated by someone the survivor knows, coupled with the low probability of the assaulter facing formal consequences, many survivors are forced to continually see their attacker on campus. Rosenthal and Freyd (2022) found that 78% of survivors endure some type of contact with the perpetrator, including seeing them in the dining hall, gym, and classes, as well as hearing about them through social media and mutual acquaintances. To prevent survivors from speaking out, perpetrators may employ the DARVO

tactic, an acronym that stands for Deny, Attack, Reverse Victim, and Offender, a strategy that correlates with high levels of self-blame. DARVO negates survivors' reality of what happened, the gaslighting leaving them further disconnected from themselves and their community (Rosenthal & Freyd, 2022).

Support for Survivors

To counteract these obstacles, universities have a responsibility to create support structures and make available personnel who clear the way for survivor-initiated reporting. To encourage survivors to speak out, it is imperative that rape myths are discarded so that all incidents of sexual violence are compassionately listened to and addressed. Palmer and St. Vil (2018) found lower report rates for assaults involving intoxication and blackout in comparison to those involving physical force. Survivors were less likely to report perpetrators who were intimate partners or acquaintances in comparison to attacks by strangers. Moreover, Alaggi and Wang (2020) found evidence supporting the potential positive influence of social media, specifically the #MeToo movement, on the number of sexual assault disclosures.

Casey and Bhattacharya's (2024) research points to the importance of taking into account the type of campuses when designing reporting practices and crafting support structures, finding higher victimization rates amongst residential students, with 37.8% of harassment reports and 50.7% of sexual assaults occurring within the context of fraternities and sororities. Whereas, for nonresidential students on nonresidential campuses, 69.9% of sexual harassment and 51.5% of unwanted touching occurred on campus, while 58.8% of sexual assaults occurred off campus. Yet despite assumptions that nonresident students at nonresident campuses would have lower reporting rates, they in fact disclosed unwanted touching and sexual harassment at higher rates when compared to their residential campus peers. However, reports of sexual assault across campus types remain low, at 5% across a total sample size of 7,080 undergraduate students.

Crafting clear reporting policies similar to those of concussed athletes is another foundational and essential step for supporting survivors. Moschella et al.'s (2023) research involving 50 public flagship universities, found that 24% of women and 5% of men suffer sexual assault during their undergraduate college years, compared to only 1% of undergraduates who experience a concussion; however, most universities have extensive policies, procedures, funding, academic accommodations, and other support structures for concussed students, most often athletes, while providing little guidance, support, and accommodations to survivors of sexual assault. This inequity contributes to sexual assault survivors' unnecessary suffering.

Robust and accessible counseling services are another integral avenue of support. Survivors frequently cite such services as essential to their mental health and physical healing (Fleming et al., 2022). However, not all universities employ licensed counselors who specialize in sexual assault, and high turnover in psychological services can lead to some survivors falling through the cracks of the university's bureaucracy.

Many survivors identify friends as lifelines following an assault. Yet, research shows that, although well-meaning, friends tend to be unaware of the full range of resource offerings and, therefore, would also benefit from clearly written, well-publicized, readily available resources (Fleming et al., 2022). Survivors also tell of the perils of sharing their experience with trusted confidants only to be disbelieved and questioned, enforcing a victim-blaming culture. In addition, when alcohol is involved, friends are less likely to be supportive and, at times, join ranks with the assailant, resulting in deep feelings of survivor guilt and shame (Alaggi & Wang, 2020).

Walsh et al. 's (2025) research, consisting of 29 qualitative interviews with survivors, show a reluctance to utilize campus support services that lacked diverse representation, noting the additional cognitive lift required of having to explain cultural and gender differences alongside the details of the traumatic event. The normalization of the hookup culture and intensive party scene also contributed to survivors' reluctance to assign a sexual assault label to their experience, and thus decreased their likelihood of seeking support. In addition, survivors report limited memory of mandated sexual assault awareness programs upon college entry, likely contributing to their finding reporting practices nebulous and complex. A lack of advocacy and support throughout the process further complicated reporting and support seeking.

Bystander Intervention and Prevention Programs

Peers are central to students' college life, and those networks can be powerful deterrents to sexual assaults. Kenney et al. (2024) conducted six focus groups across two universities to explore how students protect themselves and their friends from sexual assault amidst social drinking. To ensure self-protection, students emphasized behavioral strategies such as avoiding environments where heavy drinking is likely to occur and forcefully asserting their boundaries, yet at the same time, they lamented that women's declarations are often dismissed due to gender norms and rape culture. Thus, across focus groups, students emphasized the importance of peer care strategies in social drinking environments, such as attending parties in groups, making excuses to remove a friend from a potentially dangerous situation, and reaching out to authority figures when reinforcement is needed. Various barriers to bystanders' assistance were also mentioned, including gender norms that caused women to fear physical retaliation when rebuking sexual advances.

In an effort to thwart attacks, bystander intervention training has shown promising results. Andrew and Yang's (2021) research, pulled from social cognitive theory, posits the impact of exposing students to case studies of positive bystander intervention, such as sharing the story of the two graduate students who intervened amidst Brock Turner's sexual assault of Chanel Miller at Stanford University, which Miller (2020) bravely documented in her memoir, *Know My Name*. Their research shows that bystander modeling increases students' self-efficacy, or their belief that they can make a positive difference by intervening.

Read et al. (2024) conducted a randomized trial with 51 close friend dyads (102 participants) who, prior to the study, regularly engaged in social drinking and were asked to participate in the PAIRS (Protecting Allies in Risky Situations) program. Half the dyads engaged in a 90-minute FMI, friend-based motivational intervention session, and the other half in a 12-week wait-list control condition. The FMI group demonstrated greater readiness to intervene and practiced more peer protective strategies, such as constructing a safety plan before going out, carrying protective devices, avoiding isolation, and utilizing safety signals when environments turned dicey, though the short timeline and relatively small sample size prevented evidence of statistical significance.

To prevent sexual assault violence and revictimization, research points to the effectiveness of initiating sexual assault education programs for freshmen immediately upon entry to campus, a timeline that helps to subvert the "red zone," a reference to the increased student sexual assault rates between the months of August and November. This time band is likely due to first-year students' discomfort and insecurities about being away from home, coupled with the adjustment to a new environment without the support of family and old friends during the transition. Moreover, if students are sexually assaulted, they often suffer in silence or confide in other new students, who,

like them, are attempting to adjust to their new school culture and are unaware of reporting practices and available resources (Kimble et al., 2008). It is important to note that although our research and the research of others (Cranney, 2015; Flack et al., 2008; Kimble, 2008) found evidence of the red zone, other scholars have not found empirical data to document its existence (Follingstad et al., 2022).

The efficacy of sexual assault prevention programming is reliant on knowing what subjects to cover. For example, it is essential to understand the impact of gendered and maladaptive scripts surrounding consent that students internalized prior to college (Littleton et al., 2009). Marcantonio et al. (2022) identified gender differences in how consent was interpreted, with men relying more on explicit and implicit verbal cues and women being more sensitive to implicit nonverbal cues from their partners.

Risk reduction training also appears effective. For example, students who use party-safety strategies, such as traveling to events together and not leaving each other unaccompanied, weaken the link between party attendance and sexual victimization rates (Jouriles et al., 2022). However, such programs can be interpreted as victim-blaming, especially when they are not paired with discussions around the consequences of normalized sexual violence embedded within rape cultures (Holzman, 2019; Petty et al., 2018).

Another consideration is how to make programming opportunities available to all students, for some populations are harder to reach than others. For example, students living off campus and those not involved in organizations or clubs report lower awareness levels of their university's sexual assault policies, possibly as a consequence of missing on-campus sexual assault prevention education offerings (Axinn, Vale, & Brauner-Otto, 2023). Yet, online courses do not appear to be the solution either. Data collected by Kimberly and Hardman (2020) across four universities in Mississippi showed no significant difference in students' knowledge regarding sexual assault legal policies or attitudes around healthy sexual behaviors following participation in online modules.

Socially Just College Campuses that Support Survivors

Yappen and Hamby's (2016) scoping review, mapping existing literature, reiterates the high prevalence of sexual assault on college campuses. Utilizing the Resilience Portfolio Model, the authors identify key personal and institutional factors that foster survivor resilience. These include individual practices such as hope, advocacy, and personal agency, as well as institutional supports such as confidential reporting and robust safety structures.

When considering how data is gathered, Presutti et al. (2026) found gateway questions, such as "Have you ever been raped?" to be significant barriers in collecting accurate data, resulting in a 9.1% rate of disclosure. Conversely, when behavior questions were used instead, inquiring, for example, about "forced penetration," reports increased fivefold, pointing to the importance of using behaviorally-specific assessments in campus climate surveys. In addition, Hjelm et al. (2026) adopted a collaborative model of evaluation, in which high school students and undergraduates took on the role as co-collaborators, participating in each phase of the evaluative process. Such an approach positions those most impacted as active agents of change through the use of a transformative participatory framework.

Moylan and Nason (2026) incorporated an ecological model, shifting away from a focus on individual behavior, and instead examining the cultural, structural, and environmental factors associated with sexual assault, found across 306 campuses and including 181,599 participants. Structural elements had low effect sizes, including enrollment size and the presence of Greek life

at the institution. Cultural climate, however, such as a binge drinking environment, high rates of student-reported loneliness, and a climate of discrimination, increased the likelihood of sexual assaults occurring. Protective or buffer factors include high levels of student diversity, underscoring the importance of campus-level interventions that address diversity, equity, and inclusion.

To help universities create socially just campuses, Beste (2017) offers three suggestions: establish an affirmative sexual consent standard, adopt a zero-tolerance policy for sexual violence, and eradicate the power differential norms that promote stereotypes and advance hookup cultures. Beste supports student-driven campus transformations along with administrative assistance and state and local government support. These are moves representative of what Freyd defines as institutional courage (Center for Institutional Courage, n.d.). “Institutional courage is the opposite of institutional betrayal – it is accountability, transparency, actively seeking justice, and making reparations where needed” (Smidt and Freyd, 2018, p. 494).

To begin this journey, colleges will need to make space for survivors of sexual assault to tell their stories, using these narratives as guideposts for measuring the safety and inclusiveness of the college culture, the responsiveness of leadership, and the effectiveness of current institutional policies.

Our study does just that, inviting the sexual assault survivors of one small state college to tell their stories.

Materials and Methods

Situating the Research

The impetus of this study grew out of the first author’s capstone, senior-level course exploring pertinent issues addressing women in today’s society, both stateside and globally, including unpaid work, maternal and newborn health, child marriage, rape as a weapon of war, and sexual assault on college campuses. Building on topics covered, for the final project, students embarked on a self-selected research study.

The second author, a student in the class, elected to review the literature on sexual violence on college campuses. After producing a stellar final project, she inquired about extending the work over the subsequent semester. Enthused by the idea, the first and second authors crafted and submitted the IRB, and upon approval, launched the study detailed below.

The goal of the study was to create a space for survivors of sexual assault to anonymously tell their story, and through diverse and expansive narratives, create a deeper understanding of individual students’ experiences around sexual assault and the culture of the university in which the assaults transpired.

The study was conducted at a small public university with just over 4,600 students (approximately 3,300 undergraduates and 1,300 graduate students), located in a rural town in the Southeastern United States, where most undergraduates (70%) elected to live on campus. Across the college community, 70% of undergraduates were traditional college age (18-21), 73% Caucasian, and 71% female.

Research as Storytelling

As narrative inquiry researchers, we adopted the lens of storytellers, opening up space for survivors to share their experiences. According to Connelly and Clandinin (1990), “Humans are storytelling organisms who individually and collectively lead storied lives. Thus, the study of narrative is the study of the ways humans experience the world.”

Narrative inquiry is both reflective and recursive, starting in the focus community, where stories are collected. These narratives are then transformed into fieldnotes, which are rewritten in a storylike form, encompassing elements of character, plot, and setting. The revised fieldnotes are brought back to the page to reconstruct a holistic plotline that illuminates the phenomenon studied, in this case, sexual assault.

Ethical Considerations

We obtained our university’s IRB approval before beginning the study (IRB Reference #: 2022-10-01).

To ensure participants’ understanding of the scope of the study and their rights to exit at any time without penalty, before starting the survey, participants were asked to read the following introductory statement:

To maintain your anonymity, you will not be asked to share your name, but in order to assure you understand and fully consent to participate in this survey, below we ask you to read the following statements and check the boxes indicating your anonymous consent.

The two statements are as follows:

Statement one:

I understand my participation in this study is entirely voluntary, and I may exit the survey and withdraw from the study at any time with no repercussions or penalties.

Statement two:

I understand my basic demographic information and the story I share may be used in academic journal articles, book manuscripts, and conferences. All information will be presented anonymously. For example, if I name a specific person or specific location on campus, the researchers will anonymize that information before sharing. For example, the name of a specific person will be changed to a pseudonym or simply referred to by the appropriate pronoun and the name of a specific restaurant will be referred to in general terms such as a “local restaurant.”

After consenting to the statements above and verifying they were 18 years of age or older, participants began the study. If they did not consent or were under age, they were exited from the survey but provided a list of university, local, state, and national resources for supporting sexual assault survivors. We also provided these resources to those who participated fully in the survey.

Data Collection

To maintain the authenticity of the storying process, we limited the questions asked and instead, opened it up for survivors to tell their story on their own terms.

Following participants' consent, we collected basic demographic information, including age, gender, race, current academic year (freshman, sophomore, junior, or senior), the month and year the sexual assault(s) occurred, location of the attack(s) (on or off campus), and if the sexual assault(s) was reported or not. Participants who were currently under 18 or who did not attend the focus university were dismissed from the survey.

Next, we asked three open-ended, long-form questions regarding the story of the assault, the university's response (if reported), and provided space for participants to share additional information if desired. Outside of consent to participate, no demographic or long-form questions were required, a purposeful decision to allow survivors to skip questions they found triggering or would prefer to keep confidential. The long-form questions were as follows:

1. As narrative inquiry researchers, we study people's stories. Below, please shares the story of your sexual assault(s). You may share your story in any format that feels comfortable. There are no requirements for what and how you share. If at any time you find sharing is causing undue pain or distress, please exit the survey and seek support from the resources listed above.
2. If you reported the sexual assault(s), what were your feelings surrounding the university's response? Do you have suggestions for what the university could have done differently or better to meet your needs and the needs of other survivors?
3. Is there anything else you would like for us to know? If so, please share your thoughts below.

Stories were collected over a four-month period using the survey tool Qualtrics. The survey was decimated in three ways. First, a description of the study and a link to participate were included in the weekly, campus-wide events and community email. Second, a study flyer, including a QR code linking to the survey and a list of sexual assault resources, was hung on the back of bathroom stall doors throughout campus buildings. Such placement offered wide visibility for the study and provided a private space for students to scan the QR code if they wished to participate. Third, the study was posted on popular social media sites frequented by students.

Data Analysis

MAXQDA coding software was used for analysis. 129 survivors participated in the study. Their current age ranged from 18-54, though all were traditional college age when the assault occurred, with the majority (77%) between the ages of 18 and 21. Survivors were asked to self-identify their gender. A list of choices was not provided. Participant-created categories included female, male, nonbinary, gender fluid, and transgender male, with the largest percentage identifying as female (83%). Caucasian participants numbered slightly higher than the general Caucasian school population, comprising 80% of the study and 73% at the university. Students identifying as Black or African American were reflective of the school's population, making up 11% of the studied participants compared to 12% of the university community. Race categories falling below 3% included Alaska Natives, Native Hawaiian or Other Pacific Islander, Asian, and those identifying as "other" or "prefer not to say".

Reflective of research on the red zone (Cranney, 2015; Flack et al., 2008; Kimble, 2008), the majority of the survivors (40%) were freshman, followed in numeric succession by sophomores (31%), juniors (23%), and seniors (6%) with the sexual assaults predominantly occurring during the months of September, October, and November with another spike in March, which we

hypothesize correlates with Spring Break, a time many college students travel in large groups to party destinations (Follingstad et al., 2022; Kimble et al., 2009). Though first-year students are required to live on campus, most sexual assaults occurred off campus (60%). The majority (62%) of the assaults went unreported, and 90% of survivors knew their assailant.

The narratives from the three qualitative questions were inductively coded, and overlapping codes were combined into a single code. To triangulate the data, the first author conducted the initial round of coding, while the second author and an additional research assistant performed subsequent rounds. Dispersive interpretations were discussed and resolved. Across the three qualitative questions, 24 primary codes emerged, which were collapsed into six categories that were largely chronological in nature, and finalized into four themes reflective of the essence of the data: ambiguity and trust violations, ongoing impact, social and institutional betrayals, and suggestions from survivors.

To honor the voices of survivors, we pair each theme with direct quotes. Identifying information was removed or altered to maintain anonymity while keeping the integrity of the story. Descriptors and pronouns were taken directly from survivors' storylines. We frequently use the pronoun he, because that was the pronoun survivors almost exclusively recorded.

Theme 1: Ambiguity and Trust Violations

The first theme speaks to the various ways survivors came to define the sexual assault, the factors that contributed to the dubiety, and the explicit boundary violations that transpired prior to and during the assault.

Initially, most survivors reported feelings of ambiguity, not identifying the event as a sexual assault.

As a freshman, I was in a relationship with someone. At the time, I did not recognize this as rape, but I would go to parties and come back to my dorm intoxicated, where my boyfriend would be waiting for me and would continue to rape me even if I became unconscious. This situation was recurring.

He then went out to his car to get a condom after pleading with him that I didn't want to. I laid on the bed sobbing as he tried to convince me to just let him try. I had no knowledge of him inserting his penis until he did it. He did not get consent and he used coercion to get me to have sex. I was raped. However, I was looking through "rose-colored glasses" and convinced myself that this was something that I wanted. It wasn't until after we broke up, that I realized that this was non-consensual.

Lending to the ambiguity, the majority of survivors knew their assailants. Survivors described their connection as someone living in their dorm, a classmate, a friend of a friend, a friend, or a boyfriend. Per those relationships, survivors initially extended trust.

After I said I wanted to go to my home, he got me a car and said he would get me home. I got to his house, and he got me another drink; already not able to fully understand where I was, he took me to the room, and you can figure it out from there.

I was playing drinking games at my apartment with my roommates and three friends. I had too much to drink and was carried to my room where it occurred.

In the context of relationships, survivors spoke about setting clear boundaries, yet the assailant violated their desires and trust.

He also pressured me into having sex without a condom because 'it feels better.'

During the spring semester of Freshman year, I started dating a boy in my hall, and throughout the 4 months we were dating, I would spend most nights in his room since he had no roommate. At least 3 times a week, unless we were home for break or something of that nature, he would ask if I could do things (I don't feel comfortable typing it out, but you can infer what I mean). 8 out of 10 times I would say no or dodge the question and he would continue to ask and guilt trip me into giving in. We even had a conversation where I told how I felt he was constantly talking me into sex, and he made the usual apology, brought up past trauma, and shifted the conversation away. After that conversation, nothing changed, and I continued to be pressured into sex and kinks that I did not consent to.

I told him from the start of our relationship that I wanted to wait until marriage. He said that he would wait. However, every time we were in the bedroom together, he pushed the limits. This particular time, we had been drinking. He told me that I didn't want to lose my virginity because I was scared that it would hurt. I told him I was nervous about that, but I was making the choice to wait. He kept pressuring me and told me that it wouldn't hurt. He then went out to his car to get a condom after pleading with him that I didn't want to. I lay on the bed sobbing as he tried to convince me to just let him try.

Trust violations also occurred when survivors agreed to participate in activities that were supposed to be amidst a group of people, and then they were unexpectedly left alone.

I was left alone in the room with the boy, watching a movie. It was supposed to be a whole group.

Furthermore, many survivors reported being unconscious when the attack occurred, a complete and total violation of trust and decency.

We went to bed around 3 am, and I woke with him fondling my body as I slept. He then pulled my shorts and underwear off. I froze and didn't stop him until I heard the crinkle of a condom wrapper.

He put a date rape drug in my drink, and I don't remember much, but I woke up with him raping me. I told him to stop, but I couldn't really move well. He said to just relax, and it would be over soon. I passed out again, or at least I don't remember much else, and then when I woke up, I was in his bed, and his friends were hanging out with him in his room. I got up and left without saying anything. One of his friends saw me on campus a couple

of days later and admitted that he put a date rape drug in my drink. His friend seemed really sorry that it happened.

The girl I went with ended up leaving me. While I was there, I drank a beer. I feel a hand going up my leg from boy one while I am limp facing boy two. I suddenly was unable to move or speak. I started to gag and they walked me to the bathroom. I began vomiting and peeing myself. I black in and out as they began to penetrate me while vomiting up my dinner in their bathroom. I mumbled for a change of clothes but was only given a shirt before getting my original clothing taken away. I was drug from boy 1's room to boy 2's room. Boy 2 brought me a trash bag and a blanket. I thought he was protecting me until he came over with a box of condoms. He got on top of me. I felt his body weight completely suffocate me. The last words I heard before blacking out were "Baby, call me daddy." I woke up the next morning confused, unsure where I was and terrified for an unknown reason. He climbed down his bunk bed and told me to get dressed. The entire drive back to my dorm was terrifying. I knew something negative happened but I was unsure of the extent of damage done.

We want to be clear that saying no is not a necessary precursor to evading an attack; yet most survivors in our study said no repeatedly, trusting that their voice would be honored, yet that plea was ignored.

He said I could hang with him in his room until my friends got back. I went to his dorm, and as soon as I walked into his room, he made a move on me. At the time, I was used to guys doing things to me without asking, so I was just a little uncomfortable and hesitant, but once he started to have intercourse with me, I knew it was not what I wanted. But no matter how many times I said no or stop or that he was hurting me, he did not stop until he was done with me. Even though I cried almost the entire time, he would not stop.

Theme 2: Ongoing Impact

The second theme captures the significant and ongoing impact of the sexual assault, and how, despite requesting support and accommodations, survivors were often left to fend for themselves, leading to heightened feelings of betrayal.

Following the attack, many survivors navigated intense emotional and physical repercussions.

My boyfriend at that time was very manipulative and controlling. I was very unaware of what was going on. When we got into the relationship I had never been in a relationship prior nor had ever had sex. My partner used that to his complete advantage telling me because of his experience he knew what was best for me and my body. When I would tell him I was in pain or the violence of the nature of our sex resulted in bleeding and severe pelvic pain, he didn't care. He got me extremely intoxicated and raped me. I have absolutely no memory of the assault itself but it has

resulted in physical deformities in my pelvic floor due to trauma, and MDD, along with panic disorder and PTSD.

Exacerbating the suffering, survivors were often forced to navigate environments where their safety was continuously threatened by the perpetrator's ongoing presence.

He followed me into the Walmart parking lot.

Every time I see him on campus, I cringe because he smiles and winks at me.

Since he was my same major, I really could not make a break from him. He told me that he had power over my academic affairs and I better allow him to do stuff.

And though survivors requested help and flexibility, they rarely received the support they needed.

I asked to finish my last 2 months online and head back home to try and get the help I needed and was threatened by professors that they would fail me regardless of Title IX.

Survivors also lamented that due to the ongoing impact of the sexual assault, they found it challenging to engage in subsequent relationships, even ones that were safe and healthy.

After we broke up, I still suffer from the effects of what he did. When I am with another partner, when they put their hands near my genitals, I cry. I get so scared to see him, and I get panic attacks easier now.

Theme 3: Social and Institutional Betrayals

The third theme reflects the interpersonal and structural failures experienced by survivors, regardless of whether they chose to report the sexual assault.

For survivors who chose to report the assault to a dorm supervisor, professor, or administrator, most felt their concerns were minimized or dismissed, and their requests for accommodations were denied, favoring the protection of the assailant over the survivor.

The dorm supervisors urged me to keep it hush hush and then brushed it under the rug.

The professor who I told about the attack and who I had looked up to and trusted before, tried to suggest that I was taking the guys intentions the wrong way. After getting the Title IX stating that if I needed any help in the meantime to reach out, I heard nothing, and nothing happened. He was still placed in my same classes and he still tried to reach out over our class chat system to come hang out at his house over the break.

I am now 23 and still feel the trauma of being raped daily. My grades were so bad after the incident my first semester they had the nerve to send me on academic probation after being raped, and they did not help or support me in any way. They claim to be there for students who are sexually assaulted.

Survivors who chose to report the sexual assault to the campus police were overwhelmingly disappointed by how they were treated and how their report was handled, citing a lack of compassion and victim-blaming

The university police failed me.

The campus police were inconsiderate, rude, and victim-blaming.

I went to the Campus PD the next morning to make the report. They cared more about the fact I was underage drinking (18 at the time of the rape) rather than the fact I was raped by someone after being obviously drugged by them.

Moreover, survivors spoke of the university's reputation for ignoring reports, especially when they transpired off campus, plus their failure to provide survivors with protection from repeat offenders.

I've heard a lot of my friends tell me who to stay away from the university because they let them back on campus. Plus, I know there's often a lot of victim-blaming. Would he even have any consequences?

Because it was off campus, they wouldn't have done anything, and that is bullshit."

He has sexually assaulted many girls, and he is still on this campus. Is it because he's a sports star?

Most survivors, however, chose not to disclose the attack, minimizing the severity out of fear of the fallout.

I didn't report it because I felt like it wasn't serious enough. He's now my ex, and he's out of my life forever.

I never told anyone because I didn't want to be embarrassed. I didn't want to have to face my family or tell my boyfriend, who goes to another college."

Theme 4: Suggestions from Survivors

The final theme encompasses firsthand suggestions from survivors for how to make a safer, more equitable, and trauma-informed campus.

Many survivors urged the university to broaden the definition and expand the discourse surrounding sexual assault, lamenting that the only discussions that transpired were during orientation of freshmen year.

Please inform people of what sexual assault is and that it includes coercion. Don't let them not realize it until it's too late as I did. I would've reported it if I had known.

Have mandatory, ongoing talks about consent and safe sex. Nobody remembers the quick modules during freshmen year.

Repeatedly, survivors implored the hospital situated around the corner from the university to employ a SANE (sexual assault nurse examiner) nurse, which did occur the year following our study's wrap-up. Prior to that hire, survivors who reported their assault were required to drive over an hour to a neighboring city in order to be evaluated, often traveling alone with a male police escort.

The local hospital needs a forensic nurse. I had to go to another town for the exams.

Survivors also spoke of the opaque nature of the reporting process, describing it as confusing and lacking follow-through.

Why isn't Title IX more transparent with where your case is? Whether it's processing, rejected, etc? It's frustrating and exhausting to never know what's going on or if something else will randomly pop up.

Maybe what could be helpful is some general information about the process of reporting and what happens after that. Do you automatically believe the victim and seek justice, or do you conduct an investigation? How long would it take, and do you have to see the assaulter again? I think knowing the answers to these questions would help you decide whether to report.

Finally, students requested more support resources and protective measures to ensure physical and psychological safety on and off campus.

I would like to see support groups and organizations that help us support one another. And if there are groups, they need to be advertised a lot more on campus.

Something should have been done for my safety after being too scared to report criminally, but I still spoke up, and some sort of escort could have been provided and not by another student. A direct phone number for an emergency, specifically for my case, could have been provided.

Discussion

As narrative inquiry researchers, we do not enter the work with a specific hypothesis or predetermined codes for analyzing the data; instead, we collect the narratives of individuals who have experienced a shared phenomenon, and then invite the codes to bubble up, providing a vivid picture of the shared narrative, through first-hand storytelling (Clandinin, 2007).

Our study aimed to amplify the voices of sexual assault survivors on the campus of one small state university, a population that boldly told us they felt silenced and ignored. Their collective words served as an instructive tool for understanding the environmental factors and ingrained gendered scripts that combined to create a culture where sexual assaults transpired, and in their aftermath, left survivors feeling alone, invisible, and betrayed. Across narratives, the common themes that emerged aligned with the larger body of literature on sexual assault.

Reflective of the red zone, the majority (47%) of sexual assaults occurred between the months of August to November, with the largest percentage (40%) of survivors identifying as freshmen, a vulnerable timeframe and demographic in which college students have yet to build a stable and reliable friend base and may be unaware of campus support resources (Cranney, 2015; Flack et al. 2008; Kimble, 2008). March numbers showed another uptick, most likely contributed to Spring Break festivities. Aligning with Nobel et al.'s (2012) research, most of the sexual assaults

occurred off campus. Fearful of ridicule, rebuke, or dismissal, the majority (62%) of sexual assault survivors chose not to report the attack, and most (92%) knew their attacker (RAINN, n.d.).

Specific to our study, four overarching themes emerged, consistent with the broader body of research. The survivors in our study spoke about the challenges they encountered initially in naming the attack as a sexual assault, in part due to gendered norms often amplified on college campuses, as articulated in Barker and Galliher (2020). Many initially minimized the gravity of the attack, a possible self-protection strategy, shielding themselves from disbelief and ridicule, a finding supported by Sabri et al. (2019). In keeping with Alaggi and Wang's (2025) research, study participants often suffered a second betrayal when friends and confidants dismissed their concerns, or worse, sided with the attacker, amplifying the original trauma wound. As O'Callaghan et al.'s (2021) research revealed, the ways in which individuals take in and react to a sexual assault disclosure are diverse, ranging from parental figures questioning the survivors' relationship decisions and behaviors to partners feeling like the outside trauma negatively impacted their level of closeness.

The fallout from the sexual assaults documented in our study was significant and ongoing, leaving survivors with deep feelings of shame and self-blame (Shah & Gu, 2020). Hassanpour et al.'s (2025) research revealed shame as a significant clinical correlate with sexual assault, consequently calling for more counseling services to adopt protocols that directly address the corrosive power of such feelings. The survivors in our study also spoke of the physical harm inflicted during the attack and the long-term negative health consequences, which is reflective of Schou-Bredal et al.'s (2022) research examining the connection between prolonged health repercussions and the decline in survivors' perceived quality of life in the wake of a sexual assault.

Across narratives, the survivors spoke about the multilayeredness of institutional betrayal, from administrations that were callous and dismissive, to police officers who engaged in victim blaming, for example, focusing on underage drinking instead of the trauma of the attack, to institutional barriers that prevented support and flexibility, such as taking courses online to avoid contact with the assailant. These experiences are consistent with the literature on institutional betrayal (Casey & Bhattacharya, 2024; Monteith et al., 2022; Parnitzke & Freyd, 2014; Rosenthal & Freyd, 2022).

Across stories, survivors offered suggestions for creating a safer and more just college campus. They spoke of the necessity of combatting rape culture as first defined by Brownmiller (1971) and rape myths as originally shared by Burt (1980), reiterating the need for faculty, administrators, and law enforcement officers to be trained on trauma-informed protocols that would allow them to respond to disclosures with compassion, extending acceptance and belief, instead of dismissing or countering a survivor's story, a theme shared by Cantor et al. (2020), Kerr, et al. (2025), and Lathan et al. (2023).

In the context of friendships, survivors shared the importance of attending functions in groups, not leaving each other alone in unfamiliar environments or circumstances, plus the potential power bystanders have to thwart an attack. The literature points to the effectiveness of increasing the number of peer-support training sessions and educating students on compassionate ways to respond to a disclosure (Fleming et al., 2022; Jouriles et al., 2022; Kenney et al., 2024; Read et al., 2024). Moreover, survivors asked for more frequent and transparent discussions around consent, particularly as it pertains to respecting stated boundaries and how consent must be considered absent when someone is under the influence of a substance, has blacked out, is asleep, or is unconscious. The need for such discussions and programming has been documented in the literature by Axinn et al. (2023) and Holtzman (2019).

Survivors also shared the complexity associated with reporting a sexual assault, from navigating the process to dealing with the unexpected silence and uncertainty pertaining to investigative outcomes, a concern validated across multiple studies (Karjane, 2002; Moschella et al., 2023; Taylor, 2018). In addition, following a disclosure, survivors were disappointed by the limited counseling services available and the difficulty of obtaining access, and they implored the university to better publicize opportunities and expand offerings, a finding echoed by Casey & Bhattacharya (2024) and Whitehouse et al. (2025).

Taken together, narrative inquiry research invites readers to hear stories directly from those who experienced them and, within those powerful tellings, be moved to take impactful action. The sexual assault survivors in this study challenged their university to abandon the words, behaviors, and actions of institutional betrayal and instead show institutional courage, actively and transparently, building a trauma-informed and socially just campus (Smidt and Freyd, 2018).

Implications

The implications of this study are broad, applicable to a variety of colleges and universities. Most striking is the missing voices of sexual assault survivors across the literature. Though their stories are thoughtfully told through themes, percentages, and numbers, we rarely hear their actual words, and these words are immeasurably powerful. Though it is easier for administrators and policymakers to dismiss statistics, for they somewhat remove us from the human condition, direct narratives from those who have suffered yet garnered the courage to speak their stories aloud are difficult to ignore, especially when they are contextualized within a specific university. We hope these stories don't simply stir up emotions; they inspire action. For administrators and those involved in university governance, this study speaks to the importance of regularly soliciting such stories, fully knowing that Annual Security Reports required by the Clery Act only include formally disclosed sexual assaults, and most survivors, understandably, choose not to report.

The second implication is the necessity to combat cultures that propel rape myths and proliferate rape cultures, which requires intentional community building, education on healthy relationships and safe sex practices, and embedded coursework throughout the college curriculum, making it a natural part of the university's discourse. Moreover, we hope students will be invited to help shape and lead these essential conversations.

The third implication is the clear need for expanded health services, providing students with immediate trauma-informed care directly following an assault, coupled with continual and prolonged psychological support services that are confidential, free of charge, and easily accessible.

The fourth implication is the dire need to extend and expand the current model of sexual assault educational programming, which is delivered primarily on campus during the opening weeks of freshmen year. Such timing, though an essential entry point, is grossly insufficient, underscoring the need to broaden the conversation to a more diverse population, including off-campus residents, graduate students, faculty, staff, administrators, and law enforcement officers. Programming should be repeated semiannually and include pertinent topics such as broadening the definition of sexual assault, consent, protective strategies for self and others, reporting options and procedures, and resources available.

Lastly, to build a safer and more just college campuses, eradicating the institutional betrayal experienced by the survivors in our study and representative of the larger literature, campuses are encouraged to examine and adopt the Center for Institutional Courage's (Freyd, 2022) 12 Steps to

Promote Institutional Courage originally articulated in Freyd's 2018 article *When Sexual Assault Victims Speak Out, Their Institutions Often Betray Them*, with a particular focus on the following steps: Commit to seek truth and engage in moral action, despite unpleasantness, risk, and short term cost; respond well to victim disclosures (& create a trauma-informed reporting policy); bear witness, be accountable, apologize; cherish the whistleblowers, cherish the truth teller; conduct scientifically-sound anonymous surveys; regularly engage in self-study; and be transparent about data and policy. To ensure such work transpires, it is advisable to create a committee composed of students, faculty, staff, administrators, and law enforcement officers, thereby ensuring diverse perspectives, expertise, and accountability.

Limitations

Though valuable and indicative of a narrative inquiry research approach, the choice to collect the voices of survivors at one small state college limits the data to a particular demographic and geographic location. To protect the privacy of each survivor, we chose to use an electronic survey tool rather than in-depth interviews. The anonymous nature of our study, which we felt was essential, did, however, prevent us from conducting potentially helpful follow-ups.

Author's Contribution

Dr. Dorothy C. Suskind and Ms. Gretchen Yoder collaboratively conceptualized and designed the study and methodology, collected the data, analyzed the data, and worked on early drafts of the paper. Dr. Dorothy C. Suskind led further writing drafts and final edits.

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This study was approved by Longwood University's Institutional Review Board (IRB Reference #: 2022-10-01).

Informed Consent Form

As required by our IRB, all participants shared their anonymized consent prior to engaging in the study. This form is available by email request to the corresponding author (Suskind, suskinddc@longwood.edu).

Data Availability Statement (DAS)

The data that support the findings of this study are available from the corresponding author upon reasonable request. Due to the sensitive nature of the research and ethical restrictions related to the privacy of research participants, the data is not publicly available.

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Conflict of Interest

The authors have no conflicts of interest to disclose.

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