

## Manuscript In Preparation

### Abstract

#### **Comparative Experiment with Female Sexual Assault Survivors with PTSD**

An 18-month randomized clinical trial was completed with 25 female survivors of sexual assault with PTSD. Three treatments were compared in this experiment: (a) an evidence-based therapy designed for sexual assault survivors, primarily involving cognitive changes along with behavioural exposure --- *Cognitive Processing Therapy (CPT-R)*; (b) a new therapy called *Observed & Experiential Integration (OEI)*; and (c) a collection of calming and grounding techniques referred to by the acronym *BRAIN* (Breathing, Relaxation, Autogenics, Imagery, and grouNding), the control. We did not include an inert placebo or waitlist control because (a) participants were regularly exposed to trauma triggers through script-driven symptom provocation during assessments; and (b) we therefore wanted to ensure that all participants received therapy early rather than waiting more than a year for treatment which could reasonably be expected to provide symptom relief. Quantitative, qualitative, and psychophysiological measures were included in the research design. Assessments occurred at pre-treatment, post-treatment, 3-month follow-up, 6-month follow-up, and final periods. Participants were randomly assigned to the three groups and to therapists within groups. Assessors were blind to treatment assignment, treatments were manualized and shown to be equally credible in the eyes of participants, and standardized measures were used (Clinician-Administered PTSD Scale – CAPS, and Impact of Event Scale Revised – IES-R). After the 6-month follow-up, a treatment cross-over occurred. Those who had received OEI in the first phase received CPT, those who had received CPT received OEI, and those in the BRAIN control group received OEI because it had outperformed the BRAIN control treatment at the 3-month follow-up. There were significant reductions in PTSD symptoms for all three groups from pre- to post- and from post- to 3-month follow-up assessments. There were no significant differences in PTSD symptom severity between the three groups other than the 3-month follow-up, when OEI was found to be more effective than the BRAIN control. By the 6-month follow-up there was a rebound in PTSD symptoms for all groups, likely because for six months no participants had received any treatment other than calming and grounding. After the cross-over and second phase of treatment, PTSD symptom severity was again significantly reduced, but did not differ between groups. Through interviews at 3-month follow-up and final assessments, it was found that 75% of participants found OEI most effective for reducing the severity of their PTSD symptoms and many also found CPT helpful for reducing guilt, shame, and self-blame. In conclusion, it appears that OEI is at least as helpful as CPT, and all three treatments resulted in symptom reductions.