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Experiences of Disclosure and Reactions of Close Ones from the Perspective of Child Sexual Abuse Survivors: A Qualitative Analysis of Gender Specificities

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ABSTRACT

The disclosure of child sexual abuse (CSA) is a complex process that remains partially understood, despite its crucial role in survivors' recovery. Gender specific experiences of disclosure have been little investigated while this information is crucial to better tailor interventions for survivors. This qualitative study aims to 1) explore survivors' experiences in disclosing to close ones, and 2) contrast experiences of male and female survivors. Fifty-one CSA survivors (25 women and 26 men) aged 18 years or older were recruited via community services for survivors. Two main categories emerged from thematic content analysis: 1) experiences of disclosure hindering CSA recovery or 2) ones fostering CSA recovery. Men felt ignored when their close ones were focused on their own emotions of indifference, helplessness and guilt toward CSA. Men felt guilty when confronted with reactions of blame for their own inaction or disempowered when pressured to remain silent or to forgive. Women felt ignored when their close ones showed anger toward their perpetrator. Women felt guilty when they were held accountable for CSA events or disempowered when pressured to take legal actions. Women, but not men, reported feeling considered through caring and heart-to-heart discussions. Recommendations for awareness messages and practitioners are discussed.

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Childhood sexual abuse (CSA) is an endemic social and health problem that affects many individuals, leaving sequelae that may persist in the long term. A systematic review and meta-analysis conducted by Barth et al. (2013), including worldwide data, showed that CSA rates range from 8 to 31% in women and from 3 to 17% in men. Similar rates were found in studies conducted among a

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representative adolescent population in Quebec (Canada), where 14.9% of girls and 3.9% of boys reported having experienced CSA (Hébert et al., 2019). Nonetheless, it is difficult to determine fully reliable prevalence rates of CSA because of several methodological differences between studies (e.g., conceptualization, measures) and also because CSA events often remain undisclosed and unreported to authorities (Martin & Silverstone, 2013). Disclosure of CSA events rarely occurs during childhood; most survivors wait years before disclosing, while some will never disclose (McElvaney et al., 2020).

A study conducted among a representative sample of adult CSA survivors from Quebec (Canada), reported that 57.5% of participants delayed disclosure for more than five years after the first episode (Hébert et al., 2009). Moreover, 20% had never disclosed the sexual abuse, with men being more likely not to have told anyone, when compared to women. For survivors who reveal their experiences of CSA, disclosures may occur in different settings, including informal ones (e.g., family members, friends, romantic partners) as well as formal ones (e.g., police and health providers). However, most disclosures are made to close ones (i.e., individuals they know and with whom they have a significant relationship, including family ties, friendship and romantic relationships) (Ahrens & Aldana, 2012), suggesting their key role in supporting survivors. Since survivors may reveal their abusive experiences on several occasions (e.g., to different relatives, to a new romantic relationship), disclosures of CSA events constitute an iterative and interactive process rather than a discrete event (Alaggia et al., 2019).

A large body of literature highlights the fact that disclosures of CSA events constitute key experiences that play an important role in survivors' recovery and well-being (Tener & Murphy, 2015). However, disclosures can be experienced positively or negatively, depending, among other things, on the reaction of people receiving the disclosure (Tener & Murphy, 2015). The literature review conducted by Tener and Murphy (2015) identified several positive and negative reactions received by survivors who disclosed. Positive reactions have been described by survivors as calm, supportive, and accepting. They encourage discussions surrounding the experienced abuse and reinforce the survivors' well-being by allowing them to incorporate more insights into their story and eventually reinterpret the narrative (e.g., understanding that only the perpetrator should be held accountable for the abuse). In addition, they can make survivors feel listened to, safe, believed and not judged (Gagnier & Collin-Vézina, 2016). Positive reactions are associated with a better psychological, relational, and sexual adjustment when compared to victims who did not receive such positive reactions (Godbout et al., 2014; Therriault et al., 2020). Conversely, Tener and Murphy (2015) reported that negative reactions can encompass manifestations of discomfort or hostility, disbelief or dismissing of the survivor's history. These negative reactions also consist in minimizing or normalizing the abuse, refusing to engage in further discussion or even

changing the subject abruptly. Some negative reactions can manifest in the form of being overly angry toward the perpetrator (e.g., screaming or showing aggressive behaviors) or acting insensitive toward the needs of the survivor. In the face of negative reactions during the disclosure process, survivors may avoid further disclosure, become distrustful in others (Godbout et al., 2014), or experience negative consequences such as psychological distress, depression, anxiety, PTSD, somatic symptoms, and sexual difficulties (Hébert et al., 2009; Therriault et al., 2020). Stigmatizing negative reactions (e.g., blaming the survivor for the abuse) are perceived by survivors as the most hurtful and detrimental (Kennedy & Prock, 2018). In addition to entailing greater negative impacts on the survivor's well-being (Godbout et al., 2014), negative reactions discourage survivors from seeking help (Kennedy et al., 2012), which may in return accentuate the burden of their trauma. Disclosure of CSA is therefore a complex process that remains only partially understood, despite its crucial significance to survivors' recovery (Tener & Murphy, 2015).

Gender-specific experiences of CSA disclosure and associated reactions

Both men and women are likely to face common experiences or reactions to disclosure. Yet, some experiences of CSA disclosure and associated reactions can be gender specific. Regarding men survivors, they are less likely to disclose their CSA experiences because of how they think they will be perceived if they do (Alaggia et al., 2019; Easton et al., 2014). For instance, men may fear being perceived as homosexual if their perpetrator is a man (Alaggia, 2005). These concerns may be due to heteronormativity present in society, which stipulates that socially acceptable behaviors are based on the assumption that heterosexuality is the norm (Habarth, 2014). In addition, men may not want to disclose because they are preoccupied with receiving stigmatizing responses such as being blamed for not defending themselves (Easton et al., 2014). This idea of being a passive "victim" goes against hegemonic norms of masculinity, which postulate that men should be dominant and aggressive. In return, this can lead men to blame themselves for, or feel ashamed of the abuse (Easton et al., 2014) and makes them less likely to disclose. Men are more often perceived as the perpetrators rather than the victims, as opposed to women (Sorsoli et al., 2008). When their perpetrator is a woman, male survivors are also more likely to be considered as lucky to have been "sexually initiated" by other men (Deering & Mellor, 2011). These social perceptions or expectations can invalidate the experience of men, for whom it will be more difficult to consider themselves as a victim and can prevent them from disclosing. Regarding the experiences of female survivors, they prevent themselves from disclosing because they are afraid of being blamed or not believed and they perceive themselves as responsible for CSA events (Alaggia, 2005; Alaggia et al., 2019). Although men are also concerned about being held accountable for CSA

events, this fear seems to particularly characterize female survivor experiences. Indeed, women are the main targets of rape culture, which blame women for the sexual abuse they suffer (e.g., stipulates that women are responsible for causing the abuse by the way they dress or they act). In addition, female survivors may not want to disclose due to the potential impacts of disclosure on others, especially on close ones (e.g., breaking up the family in case of intrafamilial abuse; McElvaney et al., 2014). Indeed, women are perceived as traditionally responsible for maintaining family bounds and cohesion (Toner & Akman, 2012), which may constitute a barrier for the disclosure. However, women tend to disclose CSA events more often and receive more positive reactions compared to men (Ullman & Filipas, 2005).

Although gender-specific barriers to CSA disclosure have been relatively well documented in the scientific literature, few studies have focused on understanding whether men and women face reactions that are gender-specific and how these reactions may shape their experiences of disclosure. Previous studies on the reactions to CSA disclosure in adult survivors are mostly or exclusively composed of female participants. This fact obscures the experiences of male survivors and hampers the identification of research into gender specificities. It is crucial to deepen our understanding regarding the components that make disclosure helpful or harmful for both men and women to better educate the public, and especially survivors' close ones, in responding appropriately. Thereby, it could lead them to become allies in the recovery of survivors. The identification of gender-specific experiences of disclosure and perceived reactions provide important cues on how gender standards and CSA related myths can impact close ones' perceptions and reactions toward survivors.

The general objective of this qualitative study is to document the experiences of adult survivors who have disclosed CSA to their close ones, while also documenting the reactions survivors perceived from their close ones upon disclosure. The two specific objectives are to 1) explore survivors' experiences of disclosing CSA to close ones, and 2) contrast the experiences of male and female survivors.

Method

Recruitment and participants

Qualitative data for this retrospective study were drawn from a mixed-methods study based on a concurrent triangulation design (Creswell & Zhang, 2009), which focused on the intimate and sexual trajectories of adult CSA survivors. For the qualitative data collection, a total of 51 adults (25 women and 26 men) were recruited through community organizations offering services to CSA survivors and other community organizations in the

greater Montreal area (Quebec, Canada). Recruitment forms detailing the subject of the study and inclusion criteria were displayed to participants. Inclusion criteria were 1) having experienced CSA in accordance with the Criminal Code of Canada (i.e., experiences of unwanted sexual behaviors prior to 18 years old or any sexual contact prior to 16 years old with someone 5 years older or in a position of authority), and 2) being 18 years of age or older (i.e., the age of majority in Canada). Disclosing was not a criterion for inclusion but was one of the themes of the study. Participants' age ranged from 24 to 66 years ($M = 44.65$, $SD = 12.63$) and they identified mainly as Canadian (88%). A greater proportion of participants reported that they were employed (55%), had a university degree (41%), were single (51%) and self-identified as heterosexual and cisgender (71%). CSA and disclosure characteristics reported by participants are presented in [Table 1](#).

Recruitment and procedures

Eligible participants were invited to the laboratory to complete a face-to-face interview. They first read and signed a consent form in which the study protocol was detailed to ensure adequate comprehension of the study goals, procedures, risks and benefits, confidentiality and voluntary-based participation. Then, they were invited to complete a questionnaire in which socio-demographic questions were asked regarding their age, gender, ethnicity, occupation, education, sexual orientation, and relational status. Afterward, they took part in a semi-structured interview, which lasted 90 minutes on average and was audio-recorded with their consent. An interview grid including open-ended questions about CSA experiences and survivor's perceived impacts on intimate relationships, sexuality, and help-seeking trajectories was developed. Interviews were conducted in French and then translated for publication while applying an anonymization procedure. The interviewers were graduate students who had received crisis management training. At the end of the interviews, participants' psychological distress was assessed with a short debriefing session and a list of psychosocial resources was provided. A week after the interview, participants were contacted to discuss their psychological state, and support could be offered. A compensation (\$30.00 CAD) was given to the participants for their time. This study was approved by the research ethics board of the Université du Québec à Montréal.

Analytical strategy

A conventional content analysis (Hsieh & Shannon, 2005) was conducted using a hybrid approach (i.e., mobilizing both deductive and inductive type of analysis; Fereday & Muir-Cochrane, 2006). The first step of the analysis, namely the coding procedure (i.e., breaking down the verbatim into meaning

Table 1. Characteristics of CSA and Disclosure.

| | <i>Men</i> <i>n (%)</i> <i>n = 26</i> | <i>Women</i> <i>n (%)</i> <i>n = 25</i> | <i>Total</i> <i>n (%)</i> <i>n = 51</i> |
|---|---|---|---|
| CSA characteristics | | | |
| Sexual acts ^a | 0 (0.0) | 1 (2.0) | 1 (2.0) |
| Without contact (voyeurism, exhibitionism, viewing of sex scenes) | 11 (45.8) | 4 (15.4) | 15 (29.4) |
| Fondling | | | |
| Penetration (oral, vaginal, anal) | | | |
| Perpetrator's identity ^b | | | |
| Romantic partner ^c | 1 (3.8) | 2 (8.0) | 3 (5.9) |
| Extended family member (grandparent, uncle, cousin) | 5 (19.2) | 4 (16.0) | 9 (17.7) |
| Stranger | 6 (23.1) | 6 (24.0) | 12 (23.5) |
| Acquaintance | 14 (53.8) | 12 (48.0) | 26 (51.0) |
| Immediate family member (parental figure, siblings) | 15 (57.7) | 17 (68.0) | 32 (62.7) |
| Frequency of CSA | | | |
| 2 to 10 times | 8 (30.7) | 9 (36.0) | 17 (33.3) |
| 10 to 20 times | 3 (11.5) | 5 (20.0) | 8 (15.7) |
| 20 to 50 times | 3 (11.5) | 4 (16.0) | 7 (13.7) |
| Too many times to count | 12 (46.2) | 7 (28.0) | 19 (37.3) |
| Duration of CSA | | | |
| Less than 3 months | 2 (7.7) | 2 (8.0) | 4 (7.8) |
| 3 months to 1 year | 6 (23) | 4 (16.0) | 10 (19.6) |
| 1 to 5 years | 10 (38.4) | 10 (40.0) | 20 (39.2) |
| More than 5 years | 8 (30.8) | 9 (36.0) | 17 (33.3) |
| Disclosure characteristics | | | |
| Number of close ones ^d | | | |
| None/ only disclosed via help services | 3 (11.5) | 1 (4.0) | 4 (8.2) |
| 1 confidant | 8 (36.4) | 5 (21.7) | 13 (26.5) |
| 2 confidants | 0 (0.0) | 2 (8.7) | 2 (4.1) |
| More than 2 confidants | 14 (63.6) | 16 (69.6) | 30 (61.2) |
| Identity of the close ones ^{be} | | | |
| Family member | 13 (59.1) | 15 (65.2) | 28 (60.0) |
| Friend | 10 (45.5) | 12 (52.2) | 22 (46.8) |
| Romantic partner | 8 (36.4) | 7 (30.4) | 15 (31.9) |
| Time of disclosure ^e | | | |
| Immediately after | 3 (13.0) | 4 (16.7) | 7 (15.2) |
| Less than 1 year | 1 (4.4) | 3 (12.5) | 4 (8.7) |
| 1 to 9 years | 1 (4.4) | 9 (37.5) | 10 (21.7) |
| 10 to 29 years | 10 (43.5) | 6 (25.0) | 16 (34.8) |
| 30 years or more | 7 (30.4) | 2 (8.3) | 9 (19.6) |

^aParticipants who reported more than one type of sexual acts are classified in the most 'severe' category

^bCumulative percentage exceeds 100% as participants could report more than one person

^cFor survivors victimized at the age of being in a romantic relationship

^d% are based on 49 participants since 2 participants preferred not to answer to this question

^e% are based on 46 participants since 4 participants never disclosed and 1 participant preferred not to answer

units related to the same concept), was conducted in the first place according to a deductive approach. For this purpose, a coding grid was developed based on current literature about CSA disclosure reactions. However, the coding grid remained flexible, and could be improved in light of content that emerged from the data and new codes were then added, which is more in line with an inductive approach. In order to standardize the coding process and ensure consistency (Noble & Smith, 2015), a team-coding approach (Weston et al., 2001) was set up and periodic meetings were organized. Difficulties encountered during coding and new emergent codes were discussed. The grid was

improved upon according to a common agreement amongst researchers and the coding process was adjusted accordingly.

The next step, which is the categorization (i.e., forming mutually exclusive conceptual categories using groupings of codes related to the same concept), was performed according to CSA disclosure reactions. Then, for each conceptual category that includes close ones' reactions grouped together because of their similarity, the feeling triggered by these reactions in participants was highlighted. The survivors' perspectives were integrated in the title of the subcategories in order to better account for their experiences in relation to these reactions. Within each subcategory, gender specificities related to perceived reactions were investigated (i.e., the nuances between what men and women reported within the same subcategory), but also between subcategories (i.e., looking at data trends reported mostly or exclusively by same-gender participants). During and after the categorization process, the categories and subcategories were revised independently by three researchers, and disparities were discussed until a common agreement was reached in order to ensure consistency of the findings (Noble & Smith, 2015). The entire data analysis process was iterative, as back and forths between the codes, the conceptual categories and the raw data were carried out. This reflected the researchers' effort to remain true to the participants' stories, which have fostered truth value (Noble & Smith, 2015). Analysis procedures were supported using *Nvivo 12 pro* software. Pseudonyms chosen by the participants were used to preserve anonymity.

Results

In the total sample of 51 adult CSA survivors, four reported not having disclosed their experiences to any close ones. Conceptual categories were developed based on the narratives of the 47 participants who reported at least one disclosure experience to a close one. The qualitative analyses yield that the disclosure of CSA experiences and the reactions perceived from close ones fall into two main categories: 1) experiences of disclosure hindering CSA survivors' recovery, and 2) experiences of disclosure fostering CSA survivors' recovery. Table 2 presents an overview of the experiences of disclosure in survivors and the perceived reactions of their close ones with gender specificities when applicable (i.e., blank spaces indicate that no gender specificity was observed for this subcategory).

Experiences of disclosure hindering survivors' recovery: reactions leading to stigmatization, powerlessness and revictimization

Negative experiences of disclosure were evoked by most of the survivors ($n = 41$; 19 men, 22 women), where they were confronted with various reactions from their close ones such as avoidance, rejection, disbelief, trivialization,

Table 2. Categories, Subcategories and Gender Specificities.

| Categories | Subcategories | Gender specificities | |
|---|---|---|---|
| Experiences of disclosure hindering survivors' recovery: Reactions leading to stigmatization, powerlessness and revictimization (<i>n</i> = 41; 19 men, 22 women) | Ignored: Reactions centered on the close one's emotions (<i>n</i> = 25; 15 men, 10 women) | Men: Ignored when close one's reactions demonstrated <i>helplessness, indifference and guilt</i> Men: Guilty when close ones blamed them for <i>not disclosing earlier or for not ending CSA events themselves</i> Men: Disempowered when close ones pressured them to <i>keep the secret, to forgive the perpetrator or to avoid taking legal actions</i> Men: Shameful when close ones <i>confronted them about the abuse and its related consequences</i> | Women: Ignored when close one's reactions demonstrated <i>anger toward the perpetrator</i> Women: Guilty when close ones blamed them for <i>triggering CSA events and committed physical violence toward them</i> Women: Disempowered when close ones pressured them to <i>take legal actions</i> Women: Shameful when close ones <i>showed pity toward them</i> |
| | Guilty: Reactions centered around blame and violence toward the survivor (<i>n</i> = 13; 7 men, 6 women) Disempowered: Reactions centered on the takeover of the survivor's decisions and actions (<i>n</i> = 5; 4 men, 1 woman) Untrustworthy: Reactions centered on doubt and trivialization toward CSA events (<i>n</i> = 4; 2 men, 2 women) Shameful: Reactions centered on bringing CSA to the forefront and pitying the survivor (<i>n</i> = 4; 1 man, 3 women) Rejected: Reactions centered on cutting ties and disgracing the survivor (<i>n</i> = 3; 2 men, 1 woman) | | |
| Experiences of disclosure fostering recovery: Reactions leading to exculpation, validation and empowerment (<i>n</i> = 20; 8 men, 12 women) | Validated: Reactions centered on acknowledging CSA and the perpetrator's responsibility (<i>n</i> = 11; 6 men, 5 women) Helped: Reactions centered on accompanying the survivor or taking actions to end the abuse (<i>n</i> = 10; 3 men, 7 women) Considered: Reactions centered on heart-to-heart discussions and caring (<i>n</i> = 5; 5 women) | | Women: Only women reported feeling considered <i>through heart-to-heart discussions and the care provided by their close ones</i> |

control, blame and violence. These types of reactions prompted revival of their CSA experiences, along with negative feelings associated with them. Such negative reactions revictimized survivors who were already dealing with their initial trauma. Mmale survivors reported being blamed for not disclosing earlier or for not ending CSA events themselves, as compared to women who mostly felt blamed for triggering the abuse. Disempowerment was experienced by men when their close ones tended to take control of their decisions or actions and pressured them to remain quiet about these events, to forgive the perpetrator, or even to avoid filling a complaint. For women, disempowerment

was experienced when they perceived pressure to take legal actions against their perpetrator. Men were mostly the ones to be shameful when their close one confronted them with the abuse and its related consequences; women were more often pitied.

Ignored: reactions centered on close one's emotions

When disclosing CSA events to close ones, fifteen men and ten women felt ignored. In some cases, the close one demonstrated overwhelming emotions (i. e., anger and guilt), while in other cases they showed a lack of reactions or emotions (i.e., indifference, incomprehension, helplessness). For many survivors, being confronted with this type of reaction seemed to imply that their emotions were not considered and that they could only rely on themselves to recover.

Only men reported being confronted with emotions such as helplessness, indifference and guilt from their close ones. The impression of being misunderstood was evoked by one male participant, John, who explained that his father “did not understand . . . maybe to protect [his] mother.” Philippe, for his part, reported a long-lasting lack of responsiveness from his sister and father: “My sister, she felt a little bad. She doesn’t really know what to do with this [his disclosure]. My father neither, even today.” In the same vein, the fact that CSA events did not provoke a strong reaction in his mother brought Jacques to believe that he could only rely on himself in the end: “She did not step up to the plate that much. I felt like I had to manage that [CSA] all by myself.”

Reactions centered on the confidant’s feelings of guilt were also reported, impacting the disclosure experiences of men. Samuel mentioned that he felt discomfort in discussing CSA experiences with his mother, who seemed to feel guilty or be reminded of her own abusive experiences: “I always felt uncomfortable talking about that [CSA], especially with my mother. I never understood if that’s because she felt, like, guilty for not doing much or because she felt uneasy because she was sexually abused in childhood herself.” As for female survivors, confidants’ emotions focused more on anger toward the perpetrator. Vanessa discussed how her close ones’ reaction bypassed her own emotions and needs following her disclosure: “[They said] ‘we hate him, we should go hit him . . . ’ I’m like: ‘well no, don’t go hit him. In the worst case, I should do it. But if I don’t want to, it’s not up to you to do it.’”

For close ones, focusing on their own emotions were sometimes too difficult to deal with and also led to specific avoidance reactions such as ending a conversation, silencing the survivor or focusing only on positivity. These types of reactions left both male and female survivors feeling ignored and invalidated in their experiences and needs. The reaction of Victor’s mother shows that it was more difficult for her to be attentive to her child’s needs due to her own trauma and her fear of rekindling painful emotions: “My mother didn’t

want to hear about it because it was too painful. She didn't want me to talk about it with her." Another reported reaction aimed at alleviating the close ones' own unpleasant emotions was to suggest that survivors focus only on positive emotions and aspects of life (i.e., toxic positivity or spiritual bypassing). Although they may have had good intentions, their reactions sent the implicit message that the survivor's emotions and issues were illegitimate, as voiced by Élise:

My mother was more like, 'we're not talking about this anymore. It happened, now it's over. We're turning the page, we're moving on. Think about something else, try to nourish good ideas, we need to be positive in life.' These types of phrases we've all heard of: 'Turn the page.' I could write a chapter on this expression. I profoundly hate this expression. When you turn a page of a book, you're still in the story.

Guilty: reactions centered on blame and violence toward the survivor

Seven men and six women discussed disclosure experiences where they perceived to be blamed. Women perceived that they were mostly blamed for provoking their CSA experiences, while men perceived blame for not having taken action against their perpetrator. Marilyn explained that from the point of view of her mother, the way she was dressed contributed to the sexual abuse she experienced:

She told me it was my fault, that I had provoked him: 'It was up to you to avoid parading in front of him in your short nightgowns.' Hey, I was thirteen, she was the one buying my clothes.

Some men reported that the blame was rather placed on them for failing to take action following the abuse. In Christian's case, it was because he did not run away from his perpetrator: "The first reaction I got when I talked about my family's stories [CSA] is that they would have gotten the hell out if they were me."

Three men and three women voiced that they had to face psychologically or physically violent behaviors after they disclosed, which led them to feel guilty. Such violent reactions were intended to silence them in order to avoid repercussions that could result from disclosure. For instance, Ludger, a male participant, mentioned that his girlfriend used his disclosure to hurt him, which led him to withdraw:

I opened up a little bit more [about the CSA events] and she then brought those things back in my face. She used those things to hurt my feelings . . . It did hurt me, and then I didn't talk about it anymore.

Physical violence as a reaction to disclosure was only reported by one woman named Melanie, who was not believed by her father: "My father

tackled me against the wall and was holding me by my throat. He said: ‘You’re not going to say nonsense to me.’

Disempowered: reactions centered on the control of the survivor’s decisions and actions

Four men and one woman reported that they were confronted by close ones who, from their perspective, wanted to take control of the subsequent decisions and actions following disclosure, which left survivors feeling disempowered. For male participants, these reactions were focused on asking them to forgive the perpetrator or to keep silence about the CSA they endured. Larry’s sister told him that he “has to learn to forgive” after he disclosed to her. As for another man named Abdoul, silence was demanded from his parents, probably because CSA was something very taboo for them, which brought them back to their childhood stories:

It was like: ‘You don’t talk about it [CSA]’. Because they probably saw, heard, or knew things that happened in their childhoods when everything was taboo. So, it was like . . . ‘He should keep it on the hush.

Florence, who was the only woman who felt disempowered, evoked her mother’s reaction as rather pressuring her to file a complaint. In addition to not feeling supported by her mother, her disclosure had an impact on their relationship: “For a long time she didn’t respect my choice of not reporting [CSA], she didn’t understand me, and she was angry about it. And it created tension.”

Untrustworthy: reactions centered on doubt or trivialization of CSA

From the perspective of two men and two women, reactions from some of their close ones made them feel untrustworthy. John related to one of his unreceptive friend’s reaction, which was marked by disbelief: “I called him. I talked to him a little, mainly after I became aware of the sexual abuse. He was not receptive. He didn’t believe me.” The feeling of being untrustworthy was also reported by Magalie, for whom her mother’s reaction of doubt was a difficult experience:

We [Magalie and her sister] said, ‘Well, your brother [Magalie’s uncle], sometimes he does strange things.’ She [her mother] goes, ‘What do you mean? It can’t be!’ And then we told her. She didn’t believe us at first, and that was kind of rough.

Two male and four female participants reported experiences of disclosure during which they were not taken seriously by their close ones, which, from their point of view trivialized and minimized their CSA experiences. For Christopher, telling his mother that he had been sexually abused by his father

did not stop the abuse. On the contrary, it led his father to continue abusing him but in a different way. The fact that his father continued the abuse indicates that his mother's reaction was not helpful, probably because his disclosure of CSA events or the events themselves were not taken seriously by her:

I told my mother. Shortly after, she had dinner with my father and the sexual abuse he perpetrated on me stopped. But until the age of about 20, he exhibited himself and masturbated in front of me.

A woman, Ariane, also perceived reactions of trivialization regarding CSA experiences and avoidance of conversations about the abuse in her family, which were motivated by a need to preserve the family image:

The hardest part was that my grandfather wanted to minimize and stifle that [CSA], because in Italian families, appearances are very important . . . We had to avoid talking about it. And after all, it wasn't the end of the world. He told us: 'well, he didn't rape you'.

Shameful: reactions centered on bringing CSA to the forefront and pitying the survivor

Three women and one man reported shameful experiences of disclosure related to their close ones' reactions, which consisted of bringing CSA to the forefront. A man named Justin reported feeling shameful because the woman he was dating reacted in a stigmatizing manner where she told him that she felt aware of his abusive experiences because of his sexual performance:

I told her what happened to me, and she told me: 'Well, I knew that you were abused in your childhood.' I said: 'How did you know?' She told me: 'Because of the way you make love, I could tell.'

Bringing CSA experiences to the forefront also made Anna feel shameful, since her friend's constant reminders of her abusive experiences reduced her to being only a victim, when her need was rather to move forward toward recovery:

She [her friend] kept bringing me back to this [CSA] when I most wanted to forget what had happened. All of my past, all of my present, all the actions I'd make, she would look at them with this lens.

Reactions of pity from their close ones were reported only by women following their disclosure. As illustrated by Jolene, this type of reaction contributed to further victimization and did not give survivors the freedom to qualify their own experiences: "People say: 'My God, what you've experienced is terrible'. And they don't see it the way I've experienced it . . . They see me as a victim: 'She's experienced hard things, we pity her.'"

Rejected: reactions centered on disgracing and cutting ties with the survivor

Experiences of disclosure where survivors felt rejected were discussed by two men and one woman. Rejection can take the form of cutting ties with survivors or even telling them that they were never loved. As spoken by Philippe, his father made it clear that he was a disgrace to him:

The day after the disclosure, we talked to each other . . . He admitted that, in fact, he never loved me, he was ashamed of me and that he deliberately closed his heart to who I was as a child.

A similar feeling was evoked by Terry, a woman whose father told her that “he didn’t love [her] after [she] disclosed that [she] had been sexually abused.

Experiences of disclosure fostering survivors’ recovery: reactions leading to exculpation, validation and empowerment

Less than half of the participants ($n = 20$; 8 men and 12 women) reported experiences of disclosure that fostered their recovery, where they perceived positive reactions from their close ones. These positive reactions proved to be very helpful and freeing for many survivors and enabled them to regain control over their lives. The same proportion of men and women reported experiences of exculpation from their abusive experiences following disclosure, and mostly through validation. However, receiving emotional support from close ones, including the experience of being listened to, validated, cared for and positively reinforced, was reported almost exclusively by women. Tangible support involving accompaniment and taking action to stop the abuse was also reported mainly by women.

Validated: reactions centered on acknowledging CSA and the perpetrator’s responsibility

Experiences of disclosure in which survivors felt validated were discussed by six men and five women. Some survivors reported disclosure experiences where their close ones believed them and acknowledged the perpetrator’s responsibility. As the narrative of Arthur highlights, this type of reaction was very helpful in his recovery:

Contrarily to a lot of families, I didn’t have to justify, apologize or feel guilty about it [CSA] because my mother immediately took a stand in my favor. It’s something that has certainly been very helpful in the aftermath.

As Marie mentioned, even if only one person in a group believes the survivor after their disclosure, it validates their experience and still carries a strong impact on their lives:

My father was the only person who said: 'Maybe she's telling the truth.' Because some say: 'Well she's a teenager, maybe she's just doing that to piss people off.' But he's the only one who told me that what I disclosed might be true and I will always remember it.

Validation of a survivor's traumatic experiences was also perceived when close ones acknowledged the perpetrator's responsibility by cutting contact off with them, as Joss evoked: "My mother, for sure she believed me. She didn't want to talk to my sister [his perpetrator]." For Ariane, validation came from her parents who explicitly told her that her abuser did not have the right to do this to her:

My parents took it well [the disclosure], meaning that they were very receptive with respect to what I was telling them. And they told me it was not something you do, that it was not OK for him to do that.

Helped: reactions centered on accompanying the survivor and taking actions to end the abuse

Three men and seven women reported that they received tangible support from their close ones after they disclosed to them, which helped them to face the abuse as an adult or to end it when they were a child. As evoked by Jack, being asked what he wanted to do with the CSA experiences by his friend helped him to make an informed decision, which was empowering: "We saw each other again to have dinner and talk about it [CSA] a little bit, and then she said: 'What do you want to do about it?'" Two men and one woman who disclosed in childhood reported that the person to whom they disclosed had directly taken action to end the abuse. Such action could involve reporting the abuser or removing the survivor from the environment where the abuse occurred. Arthur evoked that his mother went to the principal to report that he was sexually abused in school: "My mother was really shocked [to learn about CSA events]. We went to school. She talked to the principal." Laurianne mentioned that when she disclosed the CSA events to her friend's mother, the latter told her own mother in order to end the abuse:

She [her friend] told me: 'Well, this isn't normal, he can't do that to you'. And then, she went to get her mother and she said: 'Tell that to my mother'. And then, I told her mother, and she said: 'No, we have to talk about this. Tomorrow morning, we have to talk to your mom.'

Considered: reactions centered on heart-to-heart discussion and care

Five women and no men reported experiences of disclosure that made them feel considered; their close ones were there and cared for them in difficult

times. Kate recalled her close friends' sensitive reactions, where they showed openness to discussion:

They had good reactions: 'Look, if you need to talk about it, call me. I can understand that you're working towards getting better, and that you're going to fall again, and that you'll need your crutch every now and then, but I love you like that.' This is really supportive, it's really helpful.

Vanessa explained that her mother got close to her and was very caring after she disclosed: "She slept, tightly holding me that night . . . The day after [her disclosure], she was really nice to me." Melanie also reported this type of reaction from her friends, who practiced positive reinforcement and empowered her by emphasizing her courage, which left a deep impression on her: "It [disclosing] went super well. And it was the comments afterward: 'You were good.' In my yearbook, a girl I knew wrote me: 'You are a model of courage.' This one, I'll never forget."

Discussion

Findings from the current qualitative study highlight the central importance of survivors' close ones' reactions when disclosing CSA experiences, since it impacts survivors' recovery. The first type of disclosure experiences, ones that hindered recovery, were the most reported by survivors. Several participants perceived that their close ones were only focused on their personal emotions when receiving their disclosure, which led survivors to repress their own emotions and to feel ignored. In some cases, close ones' expressed emotions, such as anger toward the abuser, can legitimize a survivor's own emotions and CSA experiences. Although these reactions were not necessarily ill-intentioned, they might have discouraged survivors from talking more about these events, at the expense of their own well-being. In other cases, reactions that focused on taking action were reported to be both helpful (i.e., accompanying the survivor or stop abuses directly) and harmful (i.e., taking over the survivor's decisions and actions). Helpful reactions were distinguished by the underlying motivation to protect the survivors and to end abuse with continuous attention to the survivor's needs and recovery rhythm, while harmful reactions contributed to silencing the survivors regarding their experiences or needs.

Perceived negative reactions of rejection, disbelief, trivialization, pity, takeover, blame, and violence were also found to hinder survivors' recovery and revictimize them. Survivors expressed that they experienced painful fallout related to negative reactions in which they felt ignored, guilty, disempowered, untrustworthy, shameful, and rejected. These findings are in line with the landmark Traumagenic Dynamics Model (Finkelhor & Browne, 1985) stating that traumatic sexualization, stigmatization, helplessness and

betrayal are key dynamics that explain the harmful repercussions of CSA. The results suggest that disclosure offers a precious and vulnerable window in which survivors may, with positive support, have a fragile opportunity to process the trauma they endured. When confronted to negative reactions, survivors seem to reexperience trauma-related feeling and dynamics, paralleling the abuse and thus, undergoing a double victimization. Conversely, supportive and validating reactions that demonstrate sensitivity and legitimization of CSA experiences, or ones that allow to make decisions for themselves were found to be empowering and helpful in a survivor's recovery process.

Gender-specific reactions from close ones that echo rigid social standards emerged in survivors' narratives. Negative reactions perceived by male survivors upon disclosure included blaming them for not taking steps to prevent or stop the violence or taking control of their decisions and actions. These reactions to male victimization may reflect unhealthy social expectations of boys and men. For instance, the conception that men should always be active, be able to defend themselves and never be in the position of a victim is rooted in hegemonic norms of masculinity (Javaid, 2017). The pressure male survivors face to keep CSA experiences a secret or to forgive their perpetrator may also be related to the fact that male sexual abuse remains taboo and tends to bring shame (Easton et al., 2014; Sorsoli et al., 2008). Women, on the other hand, are more likely to be blamed for provoking CSA. Reactions of this nature may find roots in patriarchal attitudes, female gender roles and rape culture (Alaggia, 2005). According to rape culture, women can often be portrayed as the provoking the abuse and thus are held responsible for CSA events. Female gender roles (e.g., women are more vulnerable) may encourage female survivors of CSA to be seen as poor victims who should be pitied and taking care of. The fact that only women reported positive reactions centered on care and heart-to-heart discussion reflects the difference between stereotypical masculine and feminine gender norms. Reactions of the confidants are thus consistent with these gender standards since they stem from what confidants think survivors need or want (e.g., women need to talk about their emotions while men do not).

Strengths, limitations and suggestions for future research

This study is innovative, as very few studies have investigated gender-specific experiences of CSA disclosure with a qualitative method that contrast male and female survivor experiences. A qualitative methodology enables for the deepening and refinement of our understanding of the positive and negative reactions survivors experience and the meanings they attribute to these experiences. Exploring survivors' perspectives has the potential to empower them in their recovery, by allowing them to express their story from their own

narrative. This study also shed light on male survivor experiences contributing to fill a gap in the literature (Gagnier & Collin-Vézina, 2016).

Despite the contributions of this study, some limitations need to be addressed. This retrospective study does not allow us to see if the survivors' narratives have evolved over time and a memory bias may be present since survivors were asked to share their disclosure experiences, sometimes years after the events occurred. Longitudinal studies would allow for a better understanding of survivors' journeys and capture reactions received closer to the time of disclosure. However, participants were required to complete a life history calendar in addition to the interview, which may temper memory bias (Nelson, 2010). Empirical saturation could not be reached for all categories and subcategories considering that the broader focus of the study was on CSA contexts and sexual trajectories in adulthood. Further research could recruit a larger number of CSA survivors, and primarily focus data collection on experiences of CSA disclosure and close ones' reactions in order to produce data in a reasonable scope. Furthermore, due to the design of the study and the limited literature investigating gender specificities of CSA disclosure, it is difficult to assess whether gender specificities are a true reflection of the experiences of all survivors or are more specific to this sample and its characteristics. It would be relevant to develop measures that better capture reactions to CSA disclosure that are gender sensitive. The current study did not investigate personal and social factors likely to modulate disclosure experiences and its associated reactions (e.g., CSA characteristics, age at the time of disclosure, family context, social network; see review of Ullman, 2002). For instance, several studies have indicated that age is an influential factor in CSA disclosure, with survivors being more likely to disclose in adulthood (Alaggia et al., 2019; Hébert et al., 2009). Advancement in age may imply more "opportunities" for disclosure, and therefore more risks of facing negative reactions, but at the same time it may also imply a greater capacity to deal with these negative reactions (e.g., putting things into perspective, getting something out of the experience).

Despite recruitment efforts to target different survivor groups, the sample was exclusively composed of self-identified cisgender participants, reflecting a lack of diversity. In the same way, it is important to consider the Canadian social context in which gender norms outlined in this study are embedded. This study should therefore be replicated in other countries or among different cultural communities. Participants were recruited from community organizations, and their responses do not necessarily reflect those of survivors who do not use support services. Recruiting samples that illustrate a diversity of characteristics among survivors, and not only those who use services, would provide a more accurate picture of their realities. More research on the disclosure experiences of minority populations, particularly those at the

intersection of minority identity (e.g., Black or Indigenous women, LGBTQ communities), should be conducted to acknowledge their specific experiences.

Implications for practice

It is essential to develop and disseminate awareness messages that encourage the recognition and disclosure of CSA experiences in different populations or targeting different audiences (e.g., men and women). The public needs to understand that children have limited resources to protect themselves from an abuser and thus are at risk of experiencing CSA, while facing several barriers that will prevent its disclosure (Alaggia et al., 2019). Boys and adult men are particularly reluctant to disclose their CSA experiences, partly because of their socialization and integration of dominant norms of masculinity (e.g., being strong and protecting oneself). Thereby, disclosures of CSA events can lead them to feel more vulnerable and weak (Easton et al., 2014). It is crucial to deconstruct gender stereotypes early on with children to foster better protection from CSA situations, as well as disclosures and help seeking. Given that the findings highlighted that an inappropriate response can seriously impact survivors' recovery, awareness messages should specifically promote the reactions to encourage and avoid when an individual receives a disclosure. Reactions such like believing survivors, being attentive to their needs and compassionate, and accompany them to resources for help or taking actions to end the abuse are essential.

Using a gender-sensitive approach is necessary for efficient awareness campaigns. Awareness messages intended to male survivors would benefit from focusing on believing and acknowledging the events as abusive and normalize that they could not 'defend themselves' for all sorts of reasons, since CSA experiences undermine the dominant norms of masculinity. On the other hand, messages that are more targeted at female survivors should focus on exculpation and empowerment, by avoiding blaming, pitying or infantilizing them, which are reactions that rape culture can encourage. Critical reflection and deconstructing persistent gender stereotypes associated with CSA should also be carried out early on with children and teenagers, by fostering sex education and easily available information to parents. Disclosures of CSA events might however be difficult for some confidants who can be triggered, shocked, overwhelmed or not react appropriately for different reasons. Awareness messages should also encourage survivors to disclose in settings that may be safer (e.g., when they trust their confidant, can assess that there is a greater chance of receiving a positive reaction, and consider themselves able to face a negative reaction) or to persist in their disclosure process (e.g., try again with another person if the first one does not respond favorably or does not respond at all), in order to protect against CSA experiences and prevent re-traumatization.

To assist survivors in their recovery journey, it is important for therapists and community stakeholders who provide cares to CSA survivors to address the experiences or the lack of disclosure. Therapy and intervention can provide a safe space for disclosure, and the professional's adequate response can then positively impact the survivors' recovery. The therapeutic work may also help survivors to make sense of or to handle previous reactions, and feel validated regarding their feelings, while also empowering them in what they want to do with these experiences. Practitioners could address the notion of automatic body responses to trauma events (i.e., freeze, flight, fight, faint) and tonic immobility associated with freeze response (Katz & Nicolet, 2020). This could reduce the stigma felt by survivors who did not react during CSA events, especially for men who were blamed for not defending themselves. Interventions and care intended for survivors should be grounded in anti-oppressive and trauma-sensitive approaches. It is critical to bring survivors to feel empowered to foster recovery in the aftermath of an abusive experience that has taken away will or power from them. Cultural norms (e.g., one's perception of female virginity), socioeconomic status (e.g., possible financial consequences related to estranging a perpetrator from one's family when they financially provide for the family), religious background (e.g., shame related to intrafamilial CSA; Fontes & Plummer, 2010), and other systemic factors should be taken into account when the possibility of CSA disclosure is addressed in the context of intervention or therapy. Using a trauma-sensitive approach, practitioners should be aware that negative reactions might be explained by a traumatic state provoked by disclosure. Working with window of tolerance (model of autonomic arousal; Siegel, 1999), practitioners could improve survivors' metabolization of their trauma and reactions of close ones. However, emotional and affective skills may be needed for close ones to be able to provide optimal responses and to refer to proper resources when they notice that the survivor may need help that overwhelm their knowledge or capacity, in order to avoid survivors' retraumatization.

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Ethical standards and informed consent

All procedures followed were in accordance with the ethical standards of the responsible committee on human experimentation of the Université du Québec à Montréal and with the Helsinki Declaration of 1975, as revised in 2000. Informed consent was obtained from all patients for being included in the study.

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