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Research article

A preliminary mapping of individual, relational, and social factors that impede disclosure of childhood sexual abuse[☆]

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ABSTRACT

Uncovering the pathways to disclosures of child sexual abuse (CSA) and the factors influencing the willingness of victims to talk about the abuse is paramount to the development of powerful practice and policy initiatives. Framed as a long interview method utilizing a grounded theory approach to analyze data, the objective of the current study was to provide a preliminary mapping of the barriers to CSA disclosures through an ecological systemic lens, from a sample of 67 male and female CSA adult survivors, all of whom had recently received counselling services. The current project led to the identification of three broad categories of barriers that were each comprised of several subthemes, namely: Barriers from Within (internalized victim-blaming, mechanisms to protect oneself, and immature development at time of abuse); Barriers in Relation to Others (violence and dysfunction in the family, power dynamics, awareness of the impact of telling, and fragile social network); and Barriers in Relation to the Social World (labelling, taboo of sexuality, lack of services available, and culture or time period). This study points to the importance of using a broad ecological framework to understand the factors that inhibit disclosure of CSA, as barriers to disclosure do not constrain solely the victims. Results are discussed in light of their implications for research, prevention and intervention programs, and social policies and media campaigns, as the burden is on the larger community to create a climate of safety and transparency that makes the telling of CSA possible.

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The sexual abuse of children and youth is a widespread problem that affects 1 out of 8 people worldwide (Pereda, Guilera, Forns, & Gómez-Benito, 2009; Stoltenborgh, van IJzendoorn, Euser, & Bakermans-Kranenburg, 2011). This alarming rate clearly calls for extensive and powerful policy and practice efforts; yet, the development of effective strategies to deal with child sexual abuse (CSA) is hampered by the fact that many victims are undetected and their needs unrecognized. Using a grounded theory approach and ecological framework lens, the aim of the current research is to advance this field of inquiry by mapping the factors that prevent CSA victims from coming forward with a disclosure, in order to develop powerful practice and policy initiatives that facilitate the telling of CSA.

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Literature Review

Victims of CSA often delay reporting of their experience of abuse, or never tell. Based on a review of contemporary studies of CSA disclosure rates, [London, Bruck, Wright, and Ceci \(2008\)](#) concluded that between 55 and 69% of CSA survivors did not disclose as children. Although measures of timing vary across studies, they also observed that disclosures mainly occurred either promptly (within one month of the event) or many years after the abuse. Results from population surveys conducted in Canada and the US show similar trends: 70–75% of respondents reporting CSA waited five years or more before disclosing the abuse, or had never disclosed prior to the survey ([Hébert, Tourigny, Cyr, McDuff, & Joly, 2009](#); [Smith et al., 2000](#)). In addition to delaying CSA disclosure, children may deny the abuse despite corroborative evidence such as medical findings ([Lawson & Chaffin, 1992](#); [Lyon, 2007](#)), or proof through videotapes of the abuse ([Sjöberg & Lindblad, 2002](#)). In a study on alleged CSA victims, one third of those interviewed did not disclose abuse during forensic interviews, despite strong suspicion that abuse had occurred ([Hershkowitz, Horowitz, & Lamb, 2005](#)).

Disclosure can occur in various, potentially concomitant or sequential forms. [Alaggia \(2004\)](#) categorized the types of disclosure that adult survivors have made throughout their lives as purposeful, manifested through behaviours, intentionally withheld, or triggered by delayed memories. In examining CSA case reports, [Collings, Griffiths, and Kumalo \(2005\)](#) identified two broad dimensions of disclosure: Agency (child-initiated disclosure versus detection by a third party) and Temporal duration (event versus process). This process of disclosure is described as involving multiple dynamics, where victims actively withhold the secret, experience ambivalence between the wish to tell and the wish to keep it secret ('pressure cooker effect'), and eventually confide in the context of a trustworthy relationship ([McElvaney, Greene, & Hogan, 2012](#)).

With regard to the choice of confidants, [Malloy, Brubacher, and Lamb \(2013\)](#) examined 204 forensic interviews of alleged sexual abuse of children aged 5–13 years and identified that mothers and peers were the most common recipients of disclosure, and that most children who disclosed had told more than one individual. [Priebe and Svedin \(2008\)](#) examined a sample of 1,505 girls and 457 boys who reported an experience of CSA and found that only 8.3% had talked to professionals about the abuse. In a study by [Easton \(2013\)](#) involving 487 male survivors (62% abused by priests), only 15.1% of cases were reported to authorities. [Ungar, Barter, McConnell, Tutty, and Fairholm \(2009\)](#) and [Hunter \(2011\)](#) suggested that disclosure is often indirect, including refusal to disclose, engagement in risk-taking behaviours, or acting out, or in some cases, possible attempts to draw attention to their situation to facilitate disclosure. A pattern among children and youth is to disclose less directly to non-professionals (perceived as less 'endangering'), and move towards more direct strategies of disclosure, such as disclosing directly to professionals mandated to intervene ([Alaggia, 2004](#); [Ungar, Barter, et al., 2009](#)).

Several attempts have been made to find a relationship between the victim or the abuse characteristics, and the timing of disclosure. Research findings generally indicate that younger age at the onset of abuse, being male, having a close relationship to the perpetrator, and more severe forms of abuse contribute to delayed disclosure, though some studies have found contradictory evidence (see review by [London et al., 2008](#)). Indeed, disclosure of traumatic events is a very complex, iterative life-long process ([Hunter, 2011](#)) that cannot be influenced solely by the victim or the abuse characteristics. While patterns or types of disclosure are well documented in research, [Ungar, Barter, et al. \(2009\)](#) question "why young people perceive the experience of disclosing traumatic events as threatening and why so many delay disclosure to authorities for years" (p. 344). Despite the societal assumption that it is in the best interests of victims and society to talk about CSA, as it may lead to successful legal interventions and prosecutions ([McElvaney, 2013](#)), several negative impacts of disclosure have been documented: not being believed, or the situation actually worsening as a result of telling ([Barter, 2005](#)), becoming the subject of gossip, and causing additional family rift and disruption ([Staller & Nelson-Gardell, 2005](#)). Other victims reported that they felt the situation spiral out of their control ([Barter, 2005](#); [Paine & Hansen, 2002](#)). [Hunter \(2011\)](#) reported that of the 22 adults she interviewed about their experiences of telling as a child, all "had experienced some form of disclosure-related trauma, either because nothing changed for the better or because they were not believed or supported" (p. 164). Based on semi-structured interviews with 122 Swedish female survivors of CSA, [Jonzon and Lindbald \(2004\)](#) concluded that for many victims, reporting CSA in childhood was a hazardous process, as the outcomes were uncertain or even negative (e.g., the abuse did not cease despite being revealed). [Ullman \(2007\)](#) concluded both from her review of the literature and her own research conducted among 733 college students that negative outcomes following CSA disclosure are more likely in childhood than adulthood.

The challenges associated with CSA disclosure have been understood using different theoretical orientations (see review by [Paine & Hansen, 2002](#)), but no theory has yet reached consensus in this field. Even the seminal work of [Summit \(1983\)](#) on the 'Child Sexual Abuse Accommodation Syndrome' did not receive sufficient support in research (e.g. [London, Bruck, Ceci, & Shuman, 2005](#)). Despite the absence of a theory underlying the factors that impede CSA disclosure, several studies have provided empirical evidence of the barriers at play. These studies fall into three categories: information gathered through forensic interviews with children; interviews and surveys with children and adolescents; and retrospective interviews with adult survivors. Studies examining the barriers to disclosure published in peer-reviewed journals from the year 2000 onwards and listed in either PsycInfo or MedLine databases are briefly reviewed below, with a focus on dynamics other than those that pertain to victim characteristics (e.g., gender, age) or the abusive situation (e.g., intrafamilial versus extrafamilial abuse).

Forensic Interviews with Children

Distinct patterns highlighting dynamics that were predictive of delaying disclosure emerged across studies wherein researchers gathered information from police files and forensic interviews involving large samples of female and male children and adolescents of all ages (Goodman-Brown, Edelstein, Goodman, Jones, & Gordon, 2003; Hershkowitz, 2006; Hershkowitz et al., 2005; Malloy, Brubacher, & Lamb, 2011; Priebe & Svedin, 2008; Schaeffer, Leventhal, & Asnes, 2011). Common or recurring themes identified were: perceived responsibility for the abuse or self-blame; shame and other negative feelings; fear of negative consequences for themselves or others including losing relationships; threats made by the perpetrator and fear of being physically harmed following disclosure; relationship with the perpetrator, in that s/he could be perceived as a friend; lack of opportunity to confide in someone they could trust; lack of understanding (e.g. that the abusive situation was unacceptable); and co-occurrence with other family violence such as physical abuse. These latter findings were not, however, synonymous with Priebe and Svedin's study (2008) where physical violence in the home was not predictive of delay in CSA disclosure.

Interviews with Children and Adolescents

Through the Hidden Hurt Project, Ungar, Barter, et al. (2009) and Ungar, Tutty, McConnell, Barter, and Fairholm (2009) examined the multiple barriers to disclosing experiences of violence (not exclusively CSA) as voiced by adolescents. From focus groups and interviews with stakeholders, teachers, staff and prevention educators, emergent themes were: family and cultural values; fear; lack of confidentiality; lack of trusting relationships; negative responses; fear of the abuse being reported to authorities; and shame and secrecy. From interviews with adolescents, emergent themes were: fear of not being believed; lacking the words to describe the abuse/violence; lack of control over the process; lack of knowledge of resources; and perception of ineffectual responses to their disclosure. These findings echo studies by Staller and Nelson-Gardell (2005) and Schönbucher, Maier, Mohler-Kuo, Schnyer, and Landold (2012) using a similar approach with cohorts of 34 female CSA survivors aged 10–18, and of 26 female and male teenagers aged 15–18, respectively.

Recently, McElvaney, Greene, and Hogan (2014) highlighted both intrapersonal and interpersonal factors influencing disclosure. Interviews of 14 parents and 22 youth aged 8–18 revealed several factors that hindered disclosure: fear of not being believed; shame/self-blame; and fear and concerns for self and others. This latter result echoes findings from Jensen, Gulbrandsen, Mossige, Reichelt, and Tjersland (2005) gathered through interviews with 22 suspected CSA victims aged 3–16, and was also noted in Münzer and colleagues' interviews with 42 children and adolescents aged 6–17 (Münzer et al., 2014), alongside additional reasons for delaying disclosure, including threats by the perpetrator.

Finally, Jackson, Newall, and Backett-Milburn (2013) used qualitative data from a child phone line to examine 2,986 cases of CSA self-disclosure by children aged 5–18. The most important barriers to disclosure were: a sense of responsibility, or self-blame; shame; fear of consequences for themselves or others; threats from abusers; and fear of not being believed.

Retrospective Studies with Adult Survivors

As a whole, studies conducted with children and youth who have come to the attention of authorities have highlighted a number of mechanisms that play a role in hindering disclosure. However, by virtue of their design, such studies cannot capture the extent of the potential barriers to disclosing CSA as they only include cases that were divulged and brought to the attention of authorities. Moreover, these studies have focused largely on the complex interaction of individual factors (Shackel, 2014), providing little insight into the array of influences at the relational, community, social, and cultural levels on the disclosure process. Indeed, paying attention to factors that impede disclosure at all levels is a means to advocate for greater social responsibility in creating safer places for children and youth to disclose.

In this vein, Alaggia (2010) has suggested analyzing barriers to disclosure from an ecological systemic standpoint, that is to recognize the complexity and interplay of factors acting at all levels to influence the disclosure process, using a framework which postulates that multiple, intertwined factors contribute to child abuse (e.g. Belsky, 1980). Through her analysis of 40 interviews with adult survivors, Alaggia concluded that not only is the occurrence of child abuse a multi-faceted process, so is the disclosure of this abuse. Indeed, the disclosure process involves individual characteristics (e.g. developmental factors), family dynamics (e.g. presence of other forms of maltreatment, social isolation), neighbourhood and community factors (e.g. fear of not being believed by teachers), and cultural and societal attitudes (e.g. media messages, stigma and labelling). The relevance of this framework is further supported by findings from previous qualitative studies with adult survivors that, although not rooted in an ecological model per se, describe disclosure barriers at the various levels (Alaggia, 2005; Alaggia & Millington, 2008; Alaggia & Turton, 2005; Donalek, 2001; Hunter, 2011; McGregor, Julich, Glover, & Gautam, 2010; Sorsoli, Kia-Keating, & Grossman, 2008). All studies conducted qualitative interviews, with the exception of two which employed long form questionnaires (Deering & Mellor, 2011; McGregor et al., 2010). Studies included a mix of participants (exclusively female; exclusively male; mixed) who were recruited through community and/or clinical populations. With the exception of McGregor and colleagues' study that involved 61 male and female survivors, most inquiries were conducted among small cohorts of survivors (about 15–20 participants).

Individual barriers to disclosure most frequently reported in research with adult CSA survivors are similar to those reported in children and youth studies, including: feelings of guilt and shame; self-blame; developmental factors affecting

the understanding of and ability to talk about the abuse; fear of retaliation, of being blamed, or not being believed, emotional safety, and repressed memories. At the family level, barriers are related to the presence of violence in the home; poor communication patterns; desire to protect the family; rigid gender roles; social isolation, and expected or experienced negative reactions to disclosure. At the sociocultural and structural level, barriers are related to taboos; lack of direct questioning by others about potential abuse; lack of attention to children's voices in society; expected or experienced negative reactions to disclosure, including those based in racism and stereotypes; and conflicting media messages regarding teenagers and seduction. Sociocultural barriers reported more specifically by males include: being abused by a woman (which may be socially perceived as sexual exploration rather than abuse); lack of social acceptance of males as victims; and fear of uncertainty regarding sexual orientation.

Despite inherent methodological limitations of interviewing adults about CSA experiences – including potential forgetting of information and re-interpretation of the event in hindsight with the knowledge of adulthood, studies conducted among adult survivors have offered insight that can underscore the different layers of influence on CSA disclosure, from individual to collective dynamics. The field is still awaiting a model that integrates findings into a cohesive portrait to conceptualize barriers to disclosure. The current research was undertaken with the objective of mapping such barriers to CSA disclosures through an ecological systemic lens, using in-depth analysis of data from a mixed sample of CSA adult survivors.

Method

Sampling

A purposive sample of adults was recruited through community-based sexual assault or adult counselling/mental health services in three Canadian metropolitan areas (Greater Montreal, Ottawa, and Greater Toronto) between May 2011 and October 2012. In accordance with the upper limit of legal age of majority in Canada, all participants had to be 19 years of age or older. To fulfil requirements of the ethics research committee, all participants had to be currently receiving or had recently received counselling services for their CSA experiences, as a means to exclude participants who could potentially experience upsetting feelings by divulging their CSA experiences for the very first time through this research. No definition of CSA was established by the research team; rather, recruitment was inclusive of participants who self-identified as having been sexually abused as a child. Accordingly, the recruitment material (posters and brochures) made available in recruitment sites stated: "Are you a man or a woman above the age of 19 who experienced child sexual abuse in their history?" Participation in this research was voluntary, and had no impact on access to services provided by the agencies. Individual information gathered in the context of this research was kept strictly confidential from the agencies where participants were recruited.

The initial sample was comprised of 68 participants. One interview was excluded from the current analysis because the participant did not provide consent for the interview to be recorded. Among the 67 participants that comprised the final pool, 51 identified as female (76%) and 16 male (24%), ranging in age from 19 to 69 years ($M = 44.9$). Most of the participants were between 40 and 49 years old ($n = 25$; 37.3%), were recruited from the greater Montreal area ($n = 45$; 67.2%) and spoke French ($n = 39$; 58.2%).

Design

Ethics approval was obtained from McGill University research ethics board. Written or recorded verbal consent was gained prior to conducting phone interviews with participants. The interviews were conducted by three research assistants, all of whom held a master's degree in social work and were registered social workers at the time of the interviews. Two were native English speakers and one was a native French speaker. The interviews were conducted in the preferred language of the participant, and with an interviewer of the same mother tongue. The interview was informed by the long-interview method, which McCracken (1988) describes as "a sharply focused, rapid, highly intensive interview process" (p. 7) and is thus suited to elicit information about precise complex and dynamic processes, such as disclosure of CSA. The interview consisted of a core set of ten lines of questioning, to which relevant clarifying questions and prompts were attached. Although a standard format for each line of questioning was provided to the interviewers, the interviews were semi-structured wherein the interviewer could follow a participant's lead or narrative. During the interview, the participants were asked to describe all of their disclosure experiences; they were probed to share details of each disclosure experience, including information such as to whom they had disclosed, what led to the disclosure, and what the experience was like for them. The participants were also asked about what could have helped them through the disclosure experiences, what could have helped them disclose earlier, and whether there is any person they wish they had told. The interviews lasted between 24 and 159 min, or 69 min on average. Finally, a list of resources was provided to the participants should they be in need of further counselling and interviewers made one follow-up phone call a week after the interview to ensure participants were not experiencing upsetting feelings.

Data Analysis

Data analysis was conducted using a grounded theory strategy (Charmaz, 2006; Strauss & Corbin, 1997). This approach is in keeping with other qualitative research endeavours in the field and offers a way to understand the meaning that people

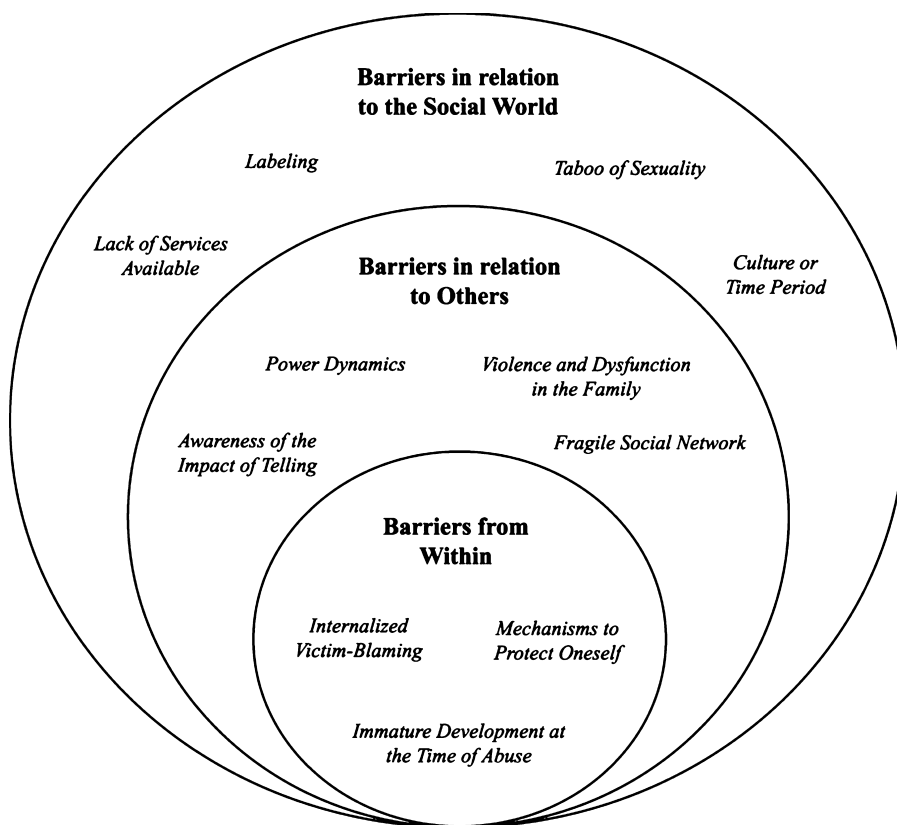


Fig. 1. Conceptualization of the barriers to CSA disclosure across three levels.

attribute to their experiences. It is rooted in a constructivist–interpretivist paradigm, whereby the subjective reality of both the participants and the investigators is recognized and integrated into the design (Schwandt, 1998).

The interviews were digitally recorded and transcribed verbatim by research assistants. Coding was done by hand and through NVivo 8 software, following Charmaz’s (2006) methodical coding procedure. During the initial round of coding, researchers highlighted all instances wherein participants referenced barriers to CSA disclosure. Particular attention was paid to disclosure barriers during childhood or around the time the abuse was occurring. Seventy (70) codes were identified during the initial round. Codes were then grouped together according to synonymy and overlapping, and categorized into 11 subthemes (axial coding). Following this categorization, identification of patterns led to the application of an ecological framework for final analysis and organization of the subthemes into three broad categories: Barriers from Within, Barriers in Relation to Others, and Barriers in Relation to the Social World. Two research assistants and the principal investigator of the study were involved throughout each step to ensure that all nuances and possible directions in the data were compared and debriefed. Final categories and subthemes are represented in Fig. 1 and described in detail in the results section.

Trustworthiness of research carried out within a constructivist–interpretivist paradigm is evaluated according to the criteria of credibility, transferability, dependability, and confirmability (Guba, 1981; Shenton, 2004). Credibility was established in the following ways: researchers’ clinical expertise in conducting interviews with CSA survivors; congruency of method and data with previous studies on CSA disclosure and conceptual models as described in the preceding literature review; periodic debriefing between the researchers; and by achieving general consensus in presentations by the principal investigator to recruitment sites and at several conferences (including the 2013 European ISPCAN conference). Concerning transferability, the context of this research is well described, and recruitment of participants from multiple sites across a large geographical area in central Canada allows for the representation of two regional groups (Ontario and Quebec) and two language groups (English and French). The detailed methodology of this research demonstrates dependability through a grounded theory model, which could be replicated. To promote confirmability, during the design and analysis phases the research team acknowledged and discussed their inherent biases and lenses as academics from the dominant majority.

Results

Of the 67 participants, half ($n = 34$; 50.7%) did not disclose their CSA experiences before the age of 19. Thirty-one (31) participants (46.3%) verbally disclosed to someone before the age of 19, two of which disclosed after the abuse was witnessed

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and reported by a third party. Disclosure is defined here in a very inclusive manner, meaning that the person told at least one person about being sexually abused, regardless of whether or not the person was believed, actions were taken, or any other details were disclosed. For the remaining two participants, one made indirect attempts to disclose; and the other was told later in life they had disclosed but reported having no memories of doing so. Among the 31 participants who disclosed in childhood or adolescence, most did so to more than one person ($n = 25$; 80.6%). Twenty-one (21) participants disclosed to their parents (67.7%). The other categories of disclosure confidants included friends and peers ($n = 16$; 51.6%), authorities (child protection services and police forces; $n = 9$; 29%), other professionals ($n = 14$; 45.2%), dating partners ($n = 9$; 29%), siblings ($n = 9$; 29%), other family members ($n = 3$; 9.7%), and other adults ($n = 9$; 29%; e.g. neighbour). No noticeable differences in perceived barriers to disclosure were noted between subgroups of participants (e.g. those who made disclosures as children compared with those who made their first disclosures as adults, as those who disclosed in childhood also faced barriers before telling).

Although the interview grid did not include questions that asked directly about characteristics of the CSA experiences, most of the participants revealed some information pertaining to the abuse events. The experiences ranged from single events with one perpetrator to multiple events with multiple perpetrators, and from exposure to pornography to vaginal and anal penetration. Among the 67 participants, 30 (45%) provided explicit details that confirmed experiences of intrafamilial CSA, defined as an abuse perpetrated by a biological, step or foster parent, by a sibling, or by an extended family member living with the victim at the time of the abuse (e.g. uncles/aunts). Extrafamilial abuse was described by 44 participants (66%) and was defined as involving a perpetrator that had no family relationship with the victim or an extended family member not living with the victim at the time of the abuse (e.g. grand-parents). Most cases involved a male perpetrator ($n = 60$; 90%).

Analysis of the barriers to disclosure reported by the study participants led to the identification of three broad categories, namely Barriers from Within, Barriers in Relation to Others, and Barriers in Relation to the Social World, reflecting the various levels of influence laid out in the ecological systemic framework (Fig. 1). The following is a comprehensive presentation of these three categories and their subthemes. Although the barriers are presented as distinct categories, it is pertinent to keep in mind the inextricability of the individual and relational barriers from their social context. Fig. 1 illustrates how Barriers from Within are embedded within Barriers in Relation to Others, which are, in turn, embedded within Barriers in Relation to the Social World.

Barriers from Within

Included in this category are participants' inner turmoil and emotional responses to the abuse that prevented them from telling. Three subthemes were identified: internalized victim-blaming, mechanisms to protect oneself, and immature development at time of abuse.

Internalized victim-blaming encompasses experiences of embarrassment and shame, which were often related to self-blame and feeling responsible for the abuse. One participant explained:

"I kind of wanted to say [what I was rebelling against] but you know still firmly believed that I had gotten myself into the situation and it was my fault you know, and so that was the biggest barrier. . . I felt like I should have known better." (P65, M, 33) [Participant number, Gender (M: male; F: female), Age at time of interview]

Another participant highlighted a comparable feeling of self-blame:

"You know you're not just exploited but exploitable, that there's something. . . wrong with you that you would have. . . uh you would have attracted something like this to happen to you." (P47, F, 44)

Participants emphasized feelings of being apart and having their self-esteem and self-worth shattered, as described here:

"When you're being abused, you don't have self-respect, you can't look people in the eye. You feel dirty. It feels like you don't belong. You feel like you're not as good as anyone else. You feel like you don't deserve anything." (P54, F, 62)

Participants explained how these feelings also led to feelings of isolation and alienation, which one individual described as a pain that was unbearable and others articulated as having an invisible 'handicap'. Participants described how the abuse had altered or destroyed their identity and articulated feeling dirty, infected, or alien in comparison to others.

"I mean, when you're a kid, you do, you feel like an alien, you feel you're infected, you feel like you're so. . . you're such an extraterrestrial from everyone else, you're so apart, and the last thing I wanted was to reinforce that." (P2, M, 38)

Mechanisms to protect oneself includes experiences of minimizing the abusive experience both consciously and unconsciously by convincing oneself that they could deal with it on their own or by repressing the memories altogether.

"I was - I was never gonna tell anyone because I - I don't want - I just wanted to forget about it. If I could deal with it myself. . ." (P58, F, 41)

"I had blocked it off and put it down inside me. . . I just sort of made it like it didn't happen. . . after putting it down, and burying it for all those years." (P54, F, 62)

Participants explained their lack of disclosure in childhood was attributed to forgetting about the abuse until they experienced flashbacks in adulthood.

“Okay, like you use denial number one, you don’t want to believe that your father did this or your uncle or whatever and then it has a mind of its own. . .the flashbacks happen, you don’t know when they are going to happen.”(P55, F, 69)

Coping strategies perceived as barriers that impeded disclosure included dissociating or using substances to numb the pain, as well as hypervigilance and an inability to trust in others.

“For me, and I’m sure it’s the case for lots of abused children is you. . .you withdraw from the outside world and you uh you create this inside world that you’re living in. I wasn’t in contact with the outside world even when I was in high school. . . I wasn’t present in the class. I was in the class but. . .I was in my own world I wasn’t listening to the teacher or what was going on. . .and so for me living like that it was kind of safe. . .uh disconnecting from the outside world being only in my inside world.” (P68, F, 42)

“So ya, my trust was destroyed and. . .it’s all mixed up who you trust and who you don’t trust, it’s all confused.” (P62, F, 50)

Immature development at the time of abuse refers to the survivors’ recollections of being ill-equipped when the abuse occurred to fully comprehend the situation, which hampered their capacity and willingness to tell. These experiences included a lack of understanding of sexuality, confusion about the abuse, and potential outcomes of telling.

“I was eight so for me back then I didn’t know that sex could happen in that position. . .it was so hard to put together because it was such a confusing experience for me. . .like I just didn’t know what happened to me, I really didn’t.” (P66, F, 34)

“Will she believe me? Will she blame me? Will she be angry at me? Because there’s also the sense that when it first started. . .I didn’t really know or understand it was wrong.” (P7, F, 26)

Additionally, participants explained lacking tools or language to disclose the abuse, as expressed by the following participant:

“How do you say it. . .like how does a nine year old say. . .this is what’s happening to me?” (P62, F, 50)

Indirect attempts to tell and bewilderment at how or why their parents did not know were also mentioned.

“Like, give me attention, like parent wise, like something’s happening (. . .) I would pick their uh, flowers, and break them across the street and I would take tomatoes and squish their tomatoes” (P3, F, 46)

Barriers in Relation to Others

Barriers in Relation to Others are the intermediate-level barriers to disclosure that are linked directly to the participant’s family members, caregivers, peers, or a significant adult presence in their life such as a teacher or school personnel. Four subthemes were identified: violence and dysfunction in the family, power dynamics, an awareness of the impact of telling, and a fragile social network.

Violence and dysfunction in the family included situations where other forms of violence in the child’s home contributed to general feelings of being unsafe or a fear of escalation. One participant explains:

“There was conjugal violence in my family as well so it was very like, I was always walking on eggshells in my home anyways.” (P7, F, 26)

Another participant expands upon this type of experience to highlight the prioritizing and protection of others, or a sacrifice of self:

“I couldn’t really talk about it, ‘cause my mom, my mom was being battered at the same time and I didn’t want to cause any trouble in the family.” (P58, F, 41)

Victim-blaming or disbelief of the child’s disclosure by caregivers or family members who would be in a position to protect the child also contributed to a child remaining silent.

“Part of it is I try to excuse my parents but really they did fail me and my mom actually did come into the room while he was doing something to me and. . .she punished me. . .she screamed at me and punished me and just nothing ever stopped.”(P50, F, 41)

Power dynamics included two forms of manipulation that the child was subjected to by the perpetrator, either manipulation in the form of grooming, or manipulation in the form of a direct threat.

“(The perpetrator) said ‘I am so sorry, you know, I got really carried away, but you’re so special. . .nobody else knows how special you are’.” (P48, F, 58)

“(The perpetrator) threatened to kill me and my family if I told them. So that’s why I didn’t tell until I was 15.” (P3, F, 46)

Power dynamics were also relevant when there was general secrecy and containment within the family.

"I think that's what happens sometimes with sexual abuse. That the family doesn't want to talk about it. And it – that can be handed down. . . an attitude. . . can be handed down from generation to generation." (P51, M, 55)

Finally, power dynamics were pertinent when pertaining to the complexity of the relationship with the perpetrator depending on their status within the community or as a family member or breadwinner for the home.

"The abuser was on my mom's side of the family and I was very much aware that my family would be ripped apart by the situation and I didn't want to be the cause of it." (P7, F, 26)

Awareness of the impact of telling included participants fearing the perceptions or reactions of others if they disclosed, including blame, anger, and rejection.

"Yeah, there have been several times where I was gonna say something, I was like, 'No, keep it to yourself, because you don't want people running away from you, you don't wanna be alone, you wanna have friends'." (P5, F, 32)

"You don't know what you're doing [when you disclose], but you know that you are opening a big hole into the world." (P2, M, 38)

Participants also explained that they feared consequences if the police or authorities would become involved. They explained that following a disclosure they tried to avoid actions from authorities because they found their approach intimidating, were excluded from the investigative process, or feared the unknown of what would happen next.

"(There) was four or five of them in there (an office at the school) including the school principal. . . a police officer at the door. . . um asking me all kinds of questions. . . I remember my parents being brought up. . . and I was told to sign a piece of paper. . . stating that they know. . . were aware. . . and it scared me half to death and I thought my parents were going to be arrested. Ya I thought that they were going to take my parents away so I said 'nothing's happening to me and I don't know where you got your information from but it's all wrong'. . . 'cause I just knew that it was so bad'." (P62, F, 50)

Fragile social network included accounts of participants who simply had no one to tell, or felt that there was no one equipped to receive the disclosure including peers and teachers or other supports in schools.

"I just – I wish there had been someone to tell." (P59, F, 48)

"But. . . like friends, family, even somebody like who – who is a great friend, not everybody is gonna understand and wanna hear, it's uncomfortable, it makes them feel awkward, and I experienced a lot of rejection from family, like even to this day, like. . . rejection, rejection, [laughs] rejection." (P5, F, 32)

". . . maybe it's like information overload and people just don't wanna hear about that ugly stuff, I don't know." (P59, F, 48)

Barriers in Relation to the Social World

Finally, Barriers in Relation to the Social World acknowledge the context in which the abuse occurred. Four subthemes were identified: labelling, taboo of sexuality, lack of services available, and culture or time period.

Labelling refers to the stigma attached to being seen or treated as a 'victim' and in seeking services for the abuse, or for resulting mental health challenges, and fear of being called 'crazy'.

"I was always afraid because of what happened to me that I would be locked up when anybody found out, like put in a nut house or something, that people would think I was crazy." (P62, F, 50)

Men in particular feared homophobic responses from others when the perpetrator was of the same sex, or explained how the social construction of masculinity prevented them from disclosing.

"I was just ya know, I didn't want anybody to think I was gay or anything 'cause I didn't think I was and I didn't want to keep that in me, but it seemed to, ya know, be the cost of fitting in ya'." (P65, M, 33)

"Men are of course, in my day you're taught to be tough. . . don't show emotion. You know? That's only for. . . weaklings, and fairies or whatever, right?" (P52, M, 58)

Taboo of sexuality barriers resulted from a lack a discussion of sexuality in society and within home and schools. Participants explained they did not know what was 'normal' or 'not normal' about sexuality in their childhood, or that they had no knowledge about sex or what constitutes inappropriate behaviour or abuse, or where to find information accordingly.

"If I had known that there were predators out there and that adults can do this to children, even if it's like graphically to explain to me. (. . .) I know that if somebody had told me. . ." (P47, F, 44)

"I can remember asking my mother something about sex, and her throwing a big medical book at me and said 'look it up'. That was the only help I got from my mother when it comes to sex. It would have made a big difference." (P56, F, 65)

Lack of services available included participants noting the absence of services in mainstream education, as well as information on available help.

“No one even talked at our school. You know, that would be amazing, for people to give talks in schools. To school children and say ‘If anyone is touching you here, that’s wrong and you don’t need to keep doing that, you have a voice and you gotta tell somebody’.” (P1, F, 42)

Culture and time period barriers surround the broader invisibility of sexual abuse in society throughout time.

“Back then, you didn’t talk about that, you didn’t go to your teacher, you didn’t go to your nursery or doctor. You had nowhere to go back then. Child abuse was so well-hidden back in the 50s.” (P56, F, 65)

“I don’t think it would have crossed teachers’ minds the same as it might have today. . .like I don’t think teachers were as aware of warning signs.” (P50, F, 41)

Discussion

Based on contemporary research on the telling of CSA, this grounded theory research explored barriers to CSA disclosures experienced in childhood and adolescence, as voiced by 67 male and female adult survivors. Through an ecological systemic lens that highlights the multiplicity and complexity of influences at the individual, family, community, social, and cultural levels, a multi-level conceptualization of disclosure barriers was created.

The first level of barriers labelled Barriers from Within, includes the following subthemes: internalization of victim-blaming; protecting oneself; and immature development at time of abuse. Overall, this level highlights the participants’ inner turmoil and emotional responses to the abuse that prevented them from telling, as well as the negative self-perception and destroyed sense of identity in comparison to others following the abuse. It reveals how the experiences of minimizing the abusive experience hampered disclosure, as well as the lack of knowledge and skills at the time of abuse that made participants ill-equipped to report the situation.

The second layer of factors, Barriers in Relation to Others, includes themes that relate to: violence and dysfunction in the family; power dynamics; awareness of impact of telling; and fragile social network. This level sheds light on situations where other forms of violence in the child’s home contributed to general feelings of being unsafe or a fear of escalation as well as manipulations in the form of grooming or direct threat that kept them silent. Additionally, this theme encompasses the feared perceptions or reactions of others when considering disclosure and the reality of having no person in their life they felt they could confide in.

The last level, Barriers in Relation to the Social World, includes broader themes such as: labelling; taboo of sexuality; lack of mainstream education and services; and culture/time period. This level reveals disclosure issues that relate to the stigma attached to being a victim of CSA in our society; the absence of information and discussion around sexuality as a whole; the lack of services available or made known to children; and the broader invisibility of sexual abuse in society throughout time.

Altogether, these results point to the relevance of using a broad ecological framework when understanding the factors that inhibit CSA disclosure. This model echoes past research with children, youth, and adults who experienced CSA and provides a framework upon which future work on CSA disclosure can be expanded. Although the taboo of CSA might not be as prominent as a few decades ago when it was rarely spoken of, veiled issues still prevent victims from reaching out to authorities to reveal the abuse they suffer. The burden should not be on the child to navigate a traumatic experience through social and structural obstacles that keep CSA in the dark. The burden is on the larger community to create a climate of safety and transparency, where the abuse of children is simply not tolerated, and where their support is paramount.

Limitations

This research presents limitations that warrant caution in generalizing findings to understanding barriers at play for all CSA victims across diverse social locations. Similar to other studies of this kind, all participants in this research self-identified as CSA survivors and no attempt was made to verify the veracity of subjects’ reports. Also, participants had all previously disclosed their CSA experiences before participating in the interview, and even more importantly, they had all received counselling services in relation to their victimization experiences. Individuals who were sexually abused but have never disclosed may face a host of additional barriers to disclosure given that they have never found a way to break the silence about the abuse. CSA survivors who seek counselling in adulthood may also present different characteristics than children, as they are coming forward to clinics with continuing mental health problems and struggles due in part or fully to the abuse. They may have encountered more barriers to disclosure than other CSA victims that present resilient adaptation following the abuse. This preliminary mapping should therefore not be used to confirm veracity of CSA cases by contrasting individual disclosure pathways against this emerging conceptualization, which is likely not representing the full spectrum of barriers or of positive disclosure experiences.

Moreover, this analysis focused only on adults’ recollections of experiences that occurred anywhere from a few years to several decades in the past. In addition to being influenced by memory recall issues, this model may not accurately represent the barriers that are currently impeding children and youth from coming forward with a disclosure. Barriers at the social, community and cultural levels are likely to have been mediated by the growing attention placed on CSA in our society,

or through the implementation of media campaigns and prevention programs. Exploring factors that inhibit and promote disclosure in current cohorts of children and adolescents through the lens of ecological theories is therefore warranted.

Another limitation is the relative ethnic and cultural homogeneity of the sample recruited. Ethnic and cultural affiliations may influence the way by which the process of disclosure is experienced and can influence the telling and reporting of CSA (Fontes & Plummer, 2010). The barriers experienced by CSA survivors from social and cultural locations other than those of English and French Canadians may well have gone unrepresented in the current research. The 'Barriers in Relation to the Social World' that were identified in this research are likely to represent those of a specific group of individuals, or may not encompass the full array of barriers that take place across different cultures. Future research should therefore aim to document the barriers of CSA survivors through the lived experiences of non-Caucasian, non-Western victims to expand and enrich the current proposed conceptualization.

Future Directions for Research

To expand our understanding of the complex, multi-determined impact of disclosing for CSA victims, future research should pursue two main objectives: to better understand the lived experiences of victims with institutional responses such as child protection services and police following disclosures, and to document not only the negative, potentially harmful outcomes that resulted from disclosures, but the potentially positive outcomes of disclosures.

Regarding institutional responses to disclosure, services for sexually abused children and youth have gone through an extensive transformation in the past decades, which include: the implementation of a standardized forensic interview protocol in several Western countries; inter-agency protocol agreements between child welfare agencies and the police to enhance collaboration between services; as well as specialized Child Advocacy Centres. Despite documented positive outcomes associated with these changes, such as reducing the need for children to testify multiple times; increasing conviction of perpetrators; improving support to children and families (see for example Jones, Cross, Walsh, & Simone, 2007; Lamb, Orbach, Hershkowitz, Esplin, & Horowitz, 2007), the ways in which these services impact the post-disclosure experiences of youth has received limited consideration.

With regard to potential positive outcomes of effective disclosures, one interesting question that has not yet been examined in research is whether positive outcomes that follow informal disclosures of CSA (e.g. feeling supported and believed by peers) and formal disclosures of CSA (e.g. getting access to treatment services) may reduce future victimizations in adolescence. Indeed, among other long-term effects, CSA places youth at increased risk for sexual re-victimization in adolescence (Hornor, 2010; Lalor & McElvaney, 2010) and dating violence in early romantic relationships (Hébert, Daigneault, & Van Camp, 2012; Hébert, Lavoie, Vitaro, McDuff, & Tremblay, 2008). A recent longitudinal inquiry has suggested a causal chain process, whereby the extent of CSA exposure is related to adolescent risk-taking and low self-esteem, which in turn leads to increased risk of future victimizations (Friesen, Woodward, Horwood, & Fergusson, 2010). Effective responses to disclosures could be an opportunity for alleviating individual and family factors that place children at risk for CSA and further victimizations, for instance through empowering youth and de-shaming the experience. A better understanding of the relationship between CSA, disclosure experiences, social and legal actions, and later victimizations would thus provide great insight into breaking cycles of violence.

Practice and Policy Implications

The current research posits that disclosure is not only a matter of courage; rather, multiple barriers prevent abused children and youth from divulging the sexual violence they experience. Having a better understanding of the process and of the factors that influence disclosure may favour practices that are more responsive to survivors' needs, including counselling, awareness, and prevention, and that reduce the potential risks associated with disclosure. Intervention programs for victims of abuse can integrate these findings on barriers to disclosure to provide support that will empower victims, by recognizing and normalizing the multiple reasons that may have led them to withhold the secret of CSA for a long period of time.

These findings can also inform prevention programs implemented among general populations of children and youth. School-based prevention programs should promote a non-blaming discourse towards victims and recognize the multiple barriers to disclosure. This knowledge is essential to inform programs whose aims should be not only to empower youth to tell, but to take a more holistic perspective by focusing, for instance, on better equipping potential recipients of disclosure (Ungar, Barter, et al., 2009; Ungar, Tutty, et al., 2009). Considering that peers are often the first confidants youth turn to, prevention programs must not only equip children and youth to identify sexual abuse situations, but prepare them to become sensitive and reliable confidants for their friends.

Findings from this research can also bring fundamental leverage to revisit social policies that guide actions taken with sexually abused children and youth, for instance by including mandatory training on CSA to all professionals working with children and youth, which would strengthen their abilities to facilitate the disclosure of CSA (e.g. creating a safe place for children to talk), and to react appropriately when faced with a disclosure (e.g. having a reassuring and supportive attitude). This recommendation echoes Jensen et al.'s (2005) conclusions that stressed the importance of a "dialogical process that becomes less difficult if the children perceive that there is an opportunity to talk, and a purpose for speaking, and a connection has been established" (p. 1395).

Findings from this study also provide insight for media campaigns to highlight the challenges that victims experience and offer solutions to overcome these roadblocks to disclosure, rather than simply telling victims they should talk about the abuse. Given the wide coverage that CSA cases receive, mass media can play a vital role in further enhancing awareness towards CSA in our societies, and in providing information free of sexism, prejudices and sensationalism when reporting on CSA. Some interesting political reappraisal processes and cutting-edge prevention programs have emerged lately, such as the German ‘Speaking helps’ campaign (<http://www.sprechen-hilft.de/>), see Rassenhofer, Spröber, Schneider, & Fegert, 2013), which hold great promise to raise awareness of CSA, reduce social stigma, and promote a non-blaming, compassionate discourse towards victims in our communities. Ultimately, it is this shift in societal discourse that could in turn influence more victims to come forward with formal disclosures.

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