

PARENTAL EDUCATION AND COMMUNICATION: EXPLORING
DELAYED DISCLOSURES OF CHILD SEXUAL ABUSE

A DISSERTATION

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BY

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DEDICATION

This study is dedicated to my wonderful husband, Jonathan Bailey, who provided me with patience, love, encouragement and support through this very long process. It is also dedicated to my two incredible children, Jenna and Brayden, who were very supportive and loving. My family was very patient with all the reading, studying, researching and writing. It is because of all the support and love from them that I was able to complete the dissertation. Thank you very much. I love you all more than I can say express.

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I am grateful to the participants of this study for their courage to discuss such a difficult topic. Your willingness to share has added to our level of understanding about why individuals delay or do not disclose CSA. Hopefully this information will be beneficial and provide more insight to policy makers, professionals and families that are dealing with CSA.

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ABSTRACT

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Child sexual abuse (CSA) disclosures are significantly delayed by many victims which can cause additional hardships on the victims and society. This study explored the role of communication and education in the parent-child relationship to investigate whether they facilitated in a quicker disclosure of CSA. In this retrospective study 11 adult survivors of CSA were interviewed about education and communication in their home growing up and how it affected their delayed disclosure of CSA. The interviews were transcribed verbatim and coded for common themes. This study provided insight into why disclosures are delayed or nonexistent. For instance, most of the participants reported that if the lines of communication were opened and their parents educated them about CSA, it would have led to them disclose sooner. There were nine themes that emerged from the data with helplessness being the overreaching theme. Participants felt helpless in dealing with the abuse whether it was from fear, shame, limited familial support, lack of education and communication. These findings help to explain some steps families can take in the area of CSA that can lead to quicker disclosures and minimize the damaging effects of CSA on their children and society.

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CHAPTER I

INTRODUCTION

Child sexual abuse (CSA) is described as a public health problem in America that negatively affects many individuals (Dipietro, Runyan, & Fredrickson, 1997). It is estimated that 1 out of 4 girls and 1 out of 10 boys have experienced CSA (Fieldman & Crespi, 2002). The negative effects are even greater when the CSA is not disclosed. Although CSA is traumatic, research supports that most children fail to disclose or delay disclosing the abuse (Alaggia, 2004; London et al., 2005; Smith et al., 2000). Research indicates that it is rare for children to report CSA immediately after it occurs (Arata, 1998; Russell, 1983; Smith et al., 2000; Sorenson & Snow, 1991; Tang, Freyd, & Wang, 2007). This is further supported by Jensen, Gulbrandsen, Mossige, Reichelt, and Tjersland (2005) who found that none of the children in their study told about CSA immediately after it occurred. Yee-man Ma, Yau, Ng, and Tong (2004) also found that the participants in their study did not report the CSA immediately after it happened. London et al. (2008) authenticated that disclosure rates are low with 55% to 69% of the adult participants admitting that they did not reveal the CSA during childhood. In addition, the review of literature conducted by London, Bruck, Ceci, and Shuman (2005) supports that the majority of children do not disclose CSA in childhood. London et al. (2005) reviewed many studies and explained that at face value 60% to 70% of adults did not remember ever disclosing their CSA as children.

The amount of time between the first incident of CSA and a disclosure varies based on the victim's characteristics and the abuse (Paine & Hansen, 2002). Yee-man Ma et al. (2004) examined the amount of time between the first incident of CSA and the first disclosure. The researchers compared CSA victims that experienced multiple incidents of abuse to those that had single incidents of abuse. They found that CSA victims abused by family members or by people they know took longer to disclose the CSA (Yee-man Ma et al., 2004). Yee-man Ma et al. also found that 89% of those that disclosed quicker (within six months) experienced single incidents of CSA. Whereas, participants that experienced multiple incidents took longer to disclose the CSA. The results indicated that 46% of them disclosed within 7 to 24 months and 40% took more than two years to disclose their CSA (Yee-man et al., 2004). These results are significant because they indicated that duration, frequency, and the relationship to the perpetrator did impact the timing of disclosure. This study is also significant because the findings reinforced that no participants in either group disclosed CSA immediately after it occurred.

Research supports that making a disclosure of CSA is difficult, which explains why most children delay disclosing or never disclose their abuse (Berliner & Conte, 1995; Paine & Hansen, 2002). Some of these children have a genuine fear of the consequences from disclosing the abuse (Berliner & Conte, 1995). This is further supported by Palmer, Brown, Rae-Grant, and Loughlin (1999) who found that the largest obstacle in disclosing CSA is the child's fear of the consequences. The fear the child

experience is not just for them, but extends to his or her family members (Palmer et al., 1999). Kellogg and Huston (1995) found that fear and embarrassment were the most common reasons for a delay or lack of disclosure of CSA.

Sorenson and Snow (1991) found that disclosing is a process, and it is not uncommon for victims to provide partial or vague (tentative) disclosures. In fact, the researchers found that 79% of the participants in their study denied their abuse or only gave a partial disclosure initially. It is a common misconception that CSA victims are capable of making an immediate and active disclosure when they are first interviewed about the CSA (Sorenson & Snow, 1991).

Research indicates that delayed disclosures are the norm (Alaggia, 2004; London et al., 2005; Palmer et al., 1999; Smith et al., 2000). In fact, research supports that nondisclosures of early sexual experiences are more common than immediate disclosures (Alaggia, 2004; Jensen et al., 2005; London et al., 2005; Smith et al., 2000). After reviewing several studies, 47% to 57% of the participants in their studies did not disclose CSA until they became adults (Arata, 1998; Lawson & Chaffin, 1992; Paine & Hansen, 2002; Smith et al., 2000). Walker-Descartes, Sealy, Laraque, and Rojas (2011) found that 45% of their participants still have not disclosed their CSA. Collings, Griffiths and Kumalo (2005) estimate the varying rates of nondisclosure for girls to range from 33% to 92% and for boys 42% to 100%. Kilpatrick, Saunders, and Smith (2003) reported that 86% of victims do not report CSA to the authorities. London et al. (2005) reviewed many studies and found that only 10-18% report the abuse to the authorities. This means,

based on the research, many victims do not disclose the abuse (London et al., 2005); therefore, the number of CSA cases is actually higher than what is reported.

Delayed disclosures and nondisclosures are detrimental to the victims and society for several reasons. Nondisclosures are problematic to the victim because they hinder the child from getting protection from further abuse and receiving necessary counseling to address immediate and long term effects (Paine & Hansen, 2002). Delayed disclosures or nondisclosures of CSA can lead to negative long term psychological and social effects on the victim that often manifest as low self-esteem (Herman, 1981; Ullman, 2003), issues in intimacy (Herman, 1981; Hunter, 2009), addictions (Hunter, 2009; Ullman, 2003), lower socioeconomic status (Lemieux & Byers, 2008; Ullman, 2003), repeated victimization (Herman, 1981), and issues with physical and psychological health (Arata, 1998; Berliner & Conte, 1995). Many CSA victims that delay disclosing or do not disclose the abuse often struggle emotionally, because they do not receive the emotional support, counseling, and other necessary resources that are necessary in helping them to heal (Ullman, 2003).

Delayed disclosures and nondisclosures can have a detrimental effect on society. For instance, delayed disclosures or nondisclosures place other children at risk by not identifying the perpetrator (Goodman-Brown, Edelstein, Goodman, Jones & Gordon, 2003; Paine & Hansen, 2002). According to Ullman (2003), without legal intervention, perpetrators do not have to acknowledge that their behavior is criminal and continue to abuse. In addition, long delays in disclosing CSA create weaknesses in the criminal case,

thus making prosecution of the offender more challenging (Smith et al., 2000). This crime is usually committed in secrecy; therefore, without witnesses and physical or medical evidence (DNA or sexual assault exams) to support the victim, the case is often solely dependent on the victim's credibility (Smith et al., 2000).

Delayed disclosures are also problematic because the more time that passes between the abuse and the disclosure, the more likely the child's memory will begin to fade, which can hinder prosecution. Smith et al. (2000) stated that "from a legal viewpoint, a victim's immediate disclosure of abuse to caretakers, followed by a prompt notification of legal authorities, often represents the ideal response to childhood sexual victimization" (p. 274). However, this only occurs in a minority of CSA cases; therefore, many perpetrators are not prosecuted (Smith et al., 2000).

Research has addressed several issues that can contribute to delayed and nondisclosures from the victims such as gender (Hunter, 2011; Kia-Keating, Grossman, Soroli, & Epstein, 2005; Salter et al., 2003), one's culture and religion (London et al., 2005; Lovett, 2004; Mossige et al., 2005), age of onset of CSA (Sorensen & Snow, 1991; Williams & Banyard, 1997), the severity of the abuse (Lemieux & Byers, 2008; Yee-man Ma et al., 2004), the relationship to the perpetrator (Tang et al., 2007; Yee-man Ma et al., 2004), family support (Hunter, 2011; Lawson & Chaffin, 1992; Lovett, 2004; Staller & Nelson-Gardell, 2005) and environmental stressors on the family which include financial problems (Fox & Chancey, 1998), marital discord (Holden & Richie, 1991; Cummings, Iannotti, & Zahn-Waxler, 1985; Harrist & Ainslie, 1998), and chronic illness

of a parent (Chen & Fish, 2012). Lastly, repressed memories are another issue that can delay disclosures of CSA (Briere & Conte, 1993; Williams & Banyard, 1997). Each of these issues seems to impact the timing and decision to disclose the CSA.

Statement of the Problem

A large segment of the population is affected by CSA. Research shows that one out of four girls and one out of ten boys are victims of sexual abuse (Fieldman & Crespi, 2002). Again, this is only an estimate since many of the CSA cases are not reported based on earlier findings (Fieldman & Crespi, 2002). Due to the fact that CSA is done in secrecy and evident signs of abuse are rare, it is up to the children to disclose the CSA (Walker-Descarets, Sealy, Laraque, & Rojas, 2011). However, in most cases these disclosures are extremely delayed or do not occur (Arata, 1998; Smith et al., 2000; Walker-Descarets et al., 2011). Children are fearful to disclose for a variety of reasons which perpetuates the problem (Sauzier, 1989; Ullman, 2003). Tang, Freyd, and Wang (2011) explained the importance for the child to make a disclosure because the disclosure is vital in actually stopping the abuse and obtaining legal intervention. Therefore, it is imperative that strides are made to get victims to report their abuse as soon as it occurs.

It is postulated there are many benefits to society and victims when disclosures are more immediate. Early disclosure means fewer victims because the abuser is identified (Ullman, 2003). In addition, the quicker the disclosure the higher the prosecution rates because victims are more likely to have clearer memories (Ullman, 2003). Likewise, there would be greater opportunity to obtain DNA evidence with an

immediate disclosure, as opposed to delayed disclosures, where evidence is lost (Smith et al., 2000). Furthermore, disclosures are beneficial to the victim because it ends their abuse and allows them to get the necessary resources to heal emotionally and physically.

Purpose of the Study

Over the last 20 years, little has changed in the area of disclosures according to Hunter (2011). Paine and Hansen (2002) stated that there is a plethora of information about CSA, but the research is limited regarding the circumstances surrounding CSA disclosures. This is echoed by Collings et al. (2005) who also stated there is a substantial amount of research on CSA disclosures; however, there seems to be a gap in the research addressing the circumstances around the child's disclosure. Jensen et al. (2005) stated very few studies address the incentive and facilitation for the child to make the disclosure. Hanson, Resnick, Saunders, Kilpatrick, and Best (1999) stated that studies are conducted regarding CSA disclosures, but very little is known about the factors that lead a child to disclose the abuse. There is a great deal of research regarding CSA; however, more research is needed to aid our understanding on how to encourage individuals to move from not disclosing to disclosing CSA (Hunter, 2011).

The United States has attempted to promote early intervention and CSA awareness by creating mandatory reporting laws, campaigns to increase public awareness, and programs that address prevention education (Paine & Hansen, 2002). Some schools have held assemblies about CSA in an attempt to bring awareness and encourage the children to disclose if they have experienced sexual abuse.

Unfortunately, many of these programs do not reach some children before the abuse occurs. Palmer et al. (1999) pointed out that in intra-familial CSA; many of the abusive patterns are established before the child reaches school age. Therefore, the children do not understand what CSA is or what to do about it. As early as the 1980s, DeYoung (1987) explained the lack of understanding in young children, about CSA, has many negative ramifications for these children. The absence of understanding means children often do not disclose the abuse immediately after it occurs, nor do they know there is an urgency to disclose (DeYoung, 1987). In addition, because the patterns are established while the children are young, many do not understand that the abuse is wrong, could reoccur, or that the adult could be dangerous (DeYoung, 1987).

These programs are helpful, however more must be done because delayed disclosures and nondisclosures are still more common than immediate disclosures (Collings et al., 2005). The problem still exists because prevention programs have been unsuccessful at addressing the issues that make disclosing difficult for victims (Paine & Hansen, 2002).

Parental education and communication are key components in addressing delayed disclosures and nondisclosures. However, most parents are not talking to or educating their children about sex or sexual abuse (Jensen et al., 2005) because it is a difficult topic for parents and children to discuss (Trinh, Steckler, Ngo, & Ratliff, 2009). Due to the fact that most parents and children do not have open lines of communication and have limited knowledge about CSA, children are unprepared to handle CSA when it occurs.

Children also do not know how to address the sensitive topic of sex with their parents. Jensen et al. (2005) found that it is challenging for children to start a conversation about a topic that is confusing, stress producing, and shameful, especially when these conversations are not commonplace in their homes. As a result, CSA victims conceal their sexual abuse behind fear, shame, guilt, and secrecy, which explains why delayed disclosures of sexual abuse do not occur for extended periods of time (Tang et al., 2007). This study investigates whether communication between parents and children decreases the amount of time between the sexual abuse and the disclosure.

Theoretical Frameworks

There are three theoretical frameworks used in this study to view delayed disclosures or nondisclosures. These frameworks include Bronfenbrenner's ecological model, Curran's traits of a healthy family, and Bowen's family systems. Each framework will provide a different perspective on delayed disclosures.

Bronfenbrenner (1979) stated that our behavior evolves from the interaction between the person and family with their environment. Bronfenbrenner identified five systems that interact with each other. Bronfenbrenner stated that these systems are two-directional, meaning the systems' interactions have reciprocal effects on each other. The first system is the microsystem which consists of an individual or a family. Bronfenbrenner defines a microsystem as "a pattern of activities, roles, and interpersonal relations experienced by the developing person in a given setting with particular physical and material characteristics" (p. 22). The second system is the mesosystem, which

“comprises the interrelations among two or more settings in which the developing person actively participates such as, for a child, the relations among home, school, and neighborhood peer group; for an adult, among family, work, and social life” (p. 25). The third system identified by Bronfenbrenner is the exosystem which he describes as “one or more settings that do not involve the developing person as an active participant, but in which events occur that affect, or are affected by, what happens in the setting containing the developing person” (p. 25). The macrosystem “refers to consistencies, in the form and content of lower-order systems (micro-, meso-, and exo-) that exist, or could exist, at the level of the subculture or the culture as a whole, along with any belief systems or ideology underlying such consistencies” (p. 26). It is clear through Bronfenbrenner’s ecological model that a delayed disclosure or nondisclosure has reciprocal affects for the individual and family (microsystem) all the way up to the government (macrosystem). For instance, a victim of CSA that delays disclosing until adulthood or never discloses does not receive the necessary resources such as counseling or intervention to end the abuse. For many CSA victims, their level of functioning whether emotionally, physically, financially, or socially, is negatively impacted. These long term consequences often affect their ability to parent and maintain employment. It also contributes to medical issues and mental disorders (Berliner & Conte, 1995). These negative consequences of CSA impact other ecological systems. Each ecological system has a reciprocal relationship with other systems; therefore, it demonstrates how CSA impacts all systems, whether it is microsystem, mesosystem, exosystem, or macrosystem in some way.

Likewise, Curran's framework added to our understanding of disclosures through identifiable traits of healthy families and how those traits assist in the disclosure process. Curran (1983) conducted research to determine what traits were common in healthy families. She surveyed 501 professionals from various fields that worked with families. Fifteen traits emerged from the survey as healthy family traits; however, only six will be included in this research. The first trait that most healthy families share is referred to as "communicates and listens," which means family members actively listen and talk to each other (Curran, 1983). The second trait is "affirms and supports one another," meaning every member of the family is supported, not just certain members (Curran, 1983). The other four traits were farther down the list (numbers 4, 8, 10 and 15) but relevant to the topic. These traits include "develops a sense of trust," which means a basic sense of trust even when that trust gets violated (Curran, 1983). Another trait is "admits to and seeks help for problems," which is defined as the family realizing a problem exists and seeking help outside the family if necessary (Curran, 1983). Curran described "a shared religious core" as a common set of values and beliefs that serve as a key source of strength for the family (Curran, 1983). The last trait of Curran's to be discussed is "a strong sense of family which includes rituals and traditions." These rituals and traditions are from one's immediate family as well as in their family history. This strong sense of family means knowing that you will never be alone (Curran, 1983). Curran also described that the family members love each other because of who they are,

not because of what they have done. This study examines the effects of these healthy family traits to see if they have any influence over disclosures.

Finally, the family systems theory increases our understanding of how delayed disclosures and nondisclosures affect the victim and the family unit. According to Bowen (1994), this theory centers on “the facts of functioning in human relationships systems” (p. 416). Bowen used the term “systems” to describe the inborn and expected behavior that takes place between family members.

Family systems theory states each member of the family affects and influences the other members of the family and the family’s functioning (Chibucos, Leite, & Weis, 2005). Each family member is viewed as a part of the family, who has rules which are defined as roles, behaviors, communications, and hierarchies (layering of subsystems both in and out of the family) to follow (Chibucos et al., 2005). Family systems theory states that family members are emotionally connected and affect each member’s thoughts, feelings and actions. The members are interdependent on each other (Chibucos et al., 2005). It is this interdependence on each family member that holds families together (Chibucos et al., 2005). The family unit experiences changes in response to information that is received from within or outside the family (Chibucos et al., 2005). Therefore, a change in the functioning of one member creates reciprocal changes in the functioning of other family members. These inputs and outputs demonstrate the amount of information received by the family which impacts their level of functioning (Chibucos et al., 2005). This theory also discusses boundaries which are the interaction between the

family and its environment (Chibucos et al., 2005). These boundaries are defined by individuals inside and outside the family (Chibucos et al., 2005). Chibucos et al. (2005) explained that “boundaries are characterized by degrees of rigidity that influence how much information is allowed into or out of a family system” (p. 280). Therefore, a family with more rigid boundaries would be less affected and more isolated from the environment (Chibucos et al., 2005).

In reviewing the important concepts in family systems theory, it is apparent that CSA affects the victim and the family unit. Due to the interdependence between members, if a member is victimized or a member violates the rules, there are rippling emotional, physical, or financial effects on the victim, as well as, the family unit. In addition, if the abuse is by a parent, it also upsets the hierarchy of systems in the family, which affects the established rules, boundaries, and level of functioning of the family. Examining disclosures through a family systems lens illustrates how a delayed disclosure or nondisclosure occurs, especially in cases where the perpetrator is a parent.

Research Questions

This study was guided by two research questions:

R1. Do CSA survivors believe that educating parents on CSA and the factors that contribute to delayed disclosures would lead to quicker disclosures of CSA?

R2. Do CSA survivors believe that the time between the incident of CSA and the disclosure would decrease if there were open lines of communication about sexual issues (puberty, sex, sexual abuse) between parents and their children?

Definition of Terms

For the purposes of this research, the following operational terms are defined to aid the readers in their understanding of the terminology as it is used in this study. Many of these definitions are from the Texas Penal Code, specifically chapter 21, which addresses sexual offenses, and chapter 22, which addressed assaultive offenses (Beckham, 2013). Other definitions are defined according to empirical studies and those definitions will be utilized here.

- *Accidental disclosure* means an unplanned statement or action that is made about the CSA without the intent to reveal the abuse (Campis et al., 1993).
- *Active disclosure* is a complete, clear and detailed account of the CSA (Sorenson & Snow, 1991). It is referred to as *purposeful disclosure* which means “an intentional and deliberate revelation of the abuse with the clear intent of revealing its existence.” (Campis, Hebden-Curtis, & Demaso, 1993).
- *Aggravated sexual assault* and *sexual assault* (Texas Penal Code, §22- 22.011) are defined as intentionally or knowingly causing the penetration of the anus, sexual organ, or mouth of the child by the offender or having the child penetrate the anus, mouth or sexual organ of the offender (Beckham, 2013). The difference between aggravated sexual assault and sexual assault is the age of the child. The offense is considered aggravated if the child is 13 years of age or younger (Beckham, 2013).

- *Child* (Chapter 56. Rights of Crime Victims, Art. 56.32) is defined by the Code of Criminal Procedure as a person younger than 18 years of age (Beckham, 2013).
- *Child sexual abuse* (CSA) is defined by Johnson (2004) as “any activity with a child before the age of legal consent that is for the sexual gratification of an adult or a substantially older child” (p. 462). CSA includes indecent exposure, indecency with a child, and aggravated or sexual assault of a child. This definition is derived from chapter 21 of the Texas Penal Code (Beckham, 2013).
- *Child sexual contact or indecency with a child* (Texas Penal Code, §21- 21.11) is defined as touching the anus, breast or any part of the genitals of a child with the intent to arouse or gratify oneself sexually (Beckham, 2013).
- *Delayed disclosure* is defined as the delay between the onset of sexual abuse and the disclosure (Alaggia, 2004). This delay varies from many days, to months, or even years.
- *Denial of CSA* is defined as the initial statement given by the child in which the child denies experiencing CSA (Sorenson & Snow, 1991).
- *Disclosure* as defined by Nagel, Putman, Noll, and Trickett (1997) is the process in which CSA is revealed or discovered. This revealing or discovery comes from the child making an outcry or by an adult witnessing the abuse and/or its effects (Palmer et al., 1999).
- *Family support* includes the victim feeling support from their family. This support can be in different levels from partial to full support (Everson, Hunter,

Runyon, Edelsohn, & Coulter, 1989). Full support includes the family believing the children, providing emotional support, and protecting the child by reporting the perpetrator to authorities (Everson et al., 1989; Palmer et al., 1999). Partial support from a family means the child received one or two forms of support, such as, emotional, being believed, and protection from perpetrator but not all these forms of support (Everson et al., 1989; Palmer et al., 1999).

- *Indecent exposure* (Texas Penal Code, §21- 21.08) is defined as a person exposing his or her anus or any part of his or her genitals with the intent to arouse or gratify the sexual desire of any person (Beckham, 2013).
- *Nondisclosure* is defined as never revealing or disclosing the abuse to anyone.
- *Perpetrator* is an individual who has sexual contact through exposure, touching, or penetration with a person under the age of 17 with the intent to arouse or gratify oneself sexually. This definition is derived from chapters 21 and 22 of the Texas Penal Code (Beckham, 2013).
- *Sexual intercourse* (Texas Penal Code, §21- 21.01) is defined as the penetration of the female sex organ by the male sex organ (Beckham, 2013).
- *Tentative disclosure* is a partial or vague revealing of CSA (Sorenson & Snow, 1991).

The Researcher

I am a licensed professional counselor currently employed by a Texas District Attorney's Office in the child abuse unit. I have worked in my present position for over

14 years and also counseled CSA victims for about two years prior to my job at the District Attorney's Office. I have a bachelor's degree in psychology and a master's degree in counseling. I am currently completing a doctoral program in family studies. My training, experience, and education have shaped the lens through which I view this topic.

Summary

In chapter one, delayed disclosures and nondisclosures are discussed. It is apparent in the statement of the problem why delayed disclosures and nondisclosures are problematic for the individual and society. The purpose of this study is to address ways to decrease the delay in disclosing CSA by using open communication and parental education. The theoretical frameworks used to view this topic are Bronfenbrenner's ecological theory, Curran's healthy family traits, and Bowen's family systems theory.

There are two research questions presented. First, do CSA survivors believe that educating parents on CSA and the factors that contribute to delayed disclosures would be beneficial in decreasing the amount of time between the first incident of CSA and disclosure? Second, do CSA survivors believe that the time between the incident of CSA and the disclosure would decrease if there are open lines of communication about sexual issues (e.g., puberty, sex, sexual abuse, etc.) between parents and their children?

The operational definitions of terms are listed. Finally, information regarding the researcher and the researcher's lens are provided.

CHAPTER II

REVIEW OF LITERATURE

There are several issues that contribute to a delayed disclosure from the victim such as gender, culture, religion, age at onset of CSA, severity of the abuse, relationship to the perpetrator, family support, family stressors and repressed memories. Research on each of these factors was reviewed to see if they had an impact when the victim made a disclosure of CSA.

Gender

Research has debated whether one's gender affects the rates of CSA disclosures (Tang et al., 2007). Most research seems to support that gender plays a significant role in whether CSA is disclosed (Hunter, 2011; Hunter, 2009; Kia-Keating et al., 2005). For instance, research supports that males have a more difficult time disclosing CSA than females (Alaggia & Millington, 2008; Hunter, 2009). Fear (Hunter 2011) and gender socialization (Alaggia & Millington, 2008) are two issues that seem to increase the likelihood of males having delayed disclosures or nondisclosures. During a qualitative study in Australia, Hunter (2009) interviewed 13 women and 9 men, who had a sexual experience with an adult before the age of 15. In the study, a male participant, who had a sexual experience with an adult male, admitted that he had never told his friends or family because he had a fear that they would believe he was a homosexual.

Kia-Keating et al. (2005) found that males abused by males reported concerns about their own heterosexuality. The male participants conveyed fears that they had some type of hidden homosexuality characteristics which played a role in why their offender selected them. These concerns had a great impact on when and if the participants ever disclose the CSA. However, Tang, Freyd, and Wang (2007) stated the notion that males are more reluctant to disclose CSA, then females, does not have strong empirical support.

There is also a misconception that victims of CSA will later become offenders (Alaggia, 2005). Salter et al. (2003) found that most victims of CSA do not become offenders. However, even the perception of this being possible hampered the likelihood of a disclosure from male victims (Alaggia, 2005).

On the other hand, Hunter (2009) found that females were more likely to disclose earlier than males. Hunter speculated the reason for this was because females place greater values on relationships with others than that of males. Therefore, women tend to share more with others which Hunter saw as beneficial for increasing the likelihood of a disclosure.

Gender socialization also seems to impact delayed disclosures and nondisclosures (Alaggia, 2005; Alaggia & Millington, 2008; Hunter, 2009). Western society assigns specific traits to each gender. Females are viewed as vulnerable and subordinate to males (Hunter, 2009). For instance, in the United States it is more accepting for females to be

labeled as “victim” because it is more in line with the traditional female traits (Hunter, 2009).

In western society, males are socially defined as strong and as the ones that provide protection: therefore, being labeled as a victim of CSA calls their masculinity into question (Alaggia, 2005; Kia-Keating et al., 2005). Western society appears to minimize male victimization because being a “victim” is perceived as weak and it goes against the ascribed gender role (Alaggia, 2005; Alaggia & Millington, 2008). Widom and Morris (1997) stated that “social pressures against reporting early childhood sexual experiences and embarrassment may lead to greater reluctance among men to report; whereas, it may be socially more acceptable for women to report such histories” (p. 35). Therefore, gender socialization definitely makes it more difficult for a male to disclose CSA and seek treatment (Alaggia & Millington, 2008). Gender socialization illustrates how the macrosystem (society/culture norms) impacts the microsystem (victim) by influencing when and whether the victim discloses. This is supported by Alaggia (2005) who explained that certain cultural concerns may serve as a barrier for disclosure.

Research appears to support that both males and females describe common emotions that impair their ability to disclose. Hunter (2009) identified three main barriers which emerged relating to delayed disclosure or nondisclosure. These barriers are feelings of shame, self-blame, and fear (Hunter, 2009). Fear includes many consequences such as not being believed, being punished, or hurting other family members (Hunter, 2011). CSA victims also fear that disclosing will divide their family emotionally and

physically (Paine & Hansen, 2002; Sauzier 1989). The shame that the victims experience has to do with feeling dirty or embarrassed. Self-blame looks to be a common emotion among CSA victims. The perpetrator frequently uses grooming which is a process that desensitizes the child to being touched. The process begins slowly, with nonsexual touches, and graduates to sexual touching (Berliner & Conte, 1990). Grooming makes some children feel like they are willing participants in the abuse, because they do not stop the touching before it turns sexual (Berliner & Conte, 1990). This creates problems because children feel responsible for their abuse (Berliner & Conte, 1990). According to Hunter (2011), the females admit feeling more fearful whereas, males report feeling more ashamed during childhood.

In contrast, Sauzier (1989) found that gender and disclosures were unrelated. Sauzier (1989) evaluated 156 children who were sexually abused by family members. The participants took part in clinical interviews, received crisis interventions, and completed many standardized research measures, with follow up data collected from 115 of the participants 18 months later. Sauzier's found no support that gender, age, race, and structure of the family influence disclosures. DiPietro, Runyan and Fredrickson (1997) also conducted a quantitative study on children suspected of CSA and their findings appear to support Sauzier's findings that gender does not play a role in disclosures.

Culture and Religion

Many researchers stress that ethnicity, culture, and religion do play a role in the rates of CSA disclosures (London et al., 2005; Lovett, 2004; Mossige et al., 2005; Tang

et al., 2007). Lovett (2004) reviewed the literature and explained that religion and ethnic cultures have a significant impact on the child and whether or not they disclose.

Paine and Hansen (2002) stated that while the literature regarding child victims of ethnic and cultural minorities is limited, it is expected that CSA victims from minority groups face more obstacles in their attempt to disclose CSA. London et al. (2005) explained that culture creates some barriers to disclosure. In western culture, there are barriers that hindered CSA disclosures. For instance, Mossige et al. (2005) stated that children are aware that discussing sexual issues in western culture is considered taboo. This lack of communication has negative impacts on disclosures. Tang et al. (2007) stated, "Our society supports a culture of tentative, cautious disclosure" (p. 21). As a result, if a disclosure is given, it is usually a partial disclosure to gauge the reaction of others. Western society acknowledges children are individuals with their own rights; however, children are still subordinate to adults (Yee-man Ma et al., 2004). Adults still control all the resources which can make the child feel powerless (DeYoung, 1987). Children are often fearful to disclose CSA against adults, especially when the abuser is a parent.

In eastern cultures, the needs of the collective whole such as the family and community are more important than the needs of an individual (Yee-man Ma et al., 2004) which can be viewed as a hindrance in disclosing CSA (Tang et al., 2007). This is stressed by Paine and Hansen (2002), who stated that children raised in cultures with

collectivistic values are less likely to disclose CSA because it portrays a negative view on all generations of their family from the past to future.

Yee-man Ma et al. (2004) examined the characteristics of CSA cases that were referred for psychological services in Hong Kong. They found it was important to maintain the family's reputation and integrity even at the expense of the individual's needs (Yee-man Ma et al., 2004). The participants indicated that powerful boundaries in Chinese culture prevent victims and their families from reporting CSA to the authorities (Yee-man Ma et al., 2004). In this culture, shameful matters are kept within the family so as to not disgrace the family (Yee-man Ma et al., 2004). According to Yee-man Ma et al. (2004) reporting CSA to the authorities is an invasion of a family's private problems. Moreover, the Chinese culture is patriarchal; therefore children are subordinates to their parents and elders (Yee-man Ma et al., 2004). As a result, parental rights are often given precedence over children's rights (Yee-man Ma et al., 2004). The child's subordinate position makes disclosing CSA against another adult more difficult (Yee-man Ma et al., 2004). In the Chinese culture, children fear that adults will not believe the child's accusations and will disregard the disclosure (Yee-man Ma et al., 2004).

Paine and Hansen (2002) stated that an individual's culture directly affects one's willingness to make a disclosure. Basically, if the CSA victim does not believe their parents would seek legal intervention or therapeutic assistance due to cultural influences, then a disclosure is less likely to occur (Paine & Hansen, 2002). This tied in with Curran's (1983) trait of "admits to and seeks help for problems" which talks about the

importance of seeking assistance outside the family when there is a problem such as CSA. As stated above, if the victim does not feel they will receive any assistance because of the family's cultural beliefs, then there is no benefit for the child to disclose. Nothing is likely to change for the child; and instead, often it almost certainly gets worse. It also reinforces Curran's trait that families needed to support all members of the family, not just particular family members, like the father, because he is in leadership role. Children need to be supported if they are to make a disclosure. Curran identifies the establishment of basic trust within the family as a required healthy trait in order for a disclosure to occur.

An exploratory study conducted by Fontes (1993), supports that ethnicity affects the disclosure rates of CSA. There were 12 participants in the study which included five Puerto Rican female clients, one Hispanic, two North American, and four Puerto Rican psychotherapists who reside in the United States. Each participant had either experienced CSA or worked with victims of CSA. The researcher conducted interviews with each participant and found that certain cultural norms and factors related to being an oppressed minority in the United States were identified as enhancing the difficulty in disclosing CSA for Puerto Rican children. These findings support Bronfenbrenner's ecological model, because it demonstrates how children experience cultural pressures that make a CSA disclosure unlikely. These pressures begin with society and filter to the individual. Fontes (1993) stated that although the participants were low income Puerto Rican women, these same pressures could apply to immigrants of other ethnicity that are living

in the United States. Fontes also found that the participants felt discrimination from the dominant culture, thus creating feelings of mistrust (Fontes, 1993). This is problematic for minority children because to end the abuse, they have to report the offense to agencies such as law enforcement, schools, the criminal justice system, and individuals in the social services they do not trust (Fontes, 1993). In short, the lack of trust in the dominant culture further contributes to the low rate of disclosure.

Fontes (1993) also found that immigration and poverty are other cultural barriers that hinder CSA disclosures. For instance, immigration is challenging because often extended family is not in the United States, which limits the amount of emotional support available to the immigrant family. This makes CSA victims feel more isolated (Fontes, 1993). Likewise, poverty plays a significant role in a delayed disclosure because it restricts the amount of emotional support that a victim receives (Fontes, 1993). Poverty limits the ability to travel to friends, family, and counseling services (Fontes, 1993). Therefore, these children often go without counseling services, even if the counseling is free, because they still need money to travel to counseling.

In regards to religion and spirituality, there is limited research that examines its effects on CSA (Gall, Basque, Damasceno-Scott, & Vardy, 2007). Based on past research, insight is gained on the effects of spirituality and CSA. It is clear that religion and spirituality are instrumental in whether a disclosure is made or not. For individuals that have a positive relationship with God or a higher being, religion provides a source of comfort and refuge in the time of crisis such as CSA (Rowatt & Kirkpatrick, 2002).

Curran's (1983) healthy trait called "a shared religious core" describes a common practice of values and beliefs within a family that is a source of strength. This was echoed by Gall et al. (2007) who found that "a personal sense of relationship with God or a higher power may serve as a significant protective factor for CSA survivors" more than traditional religion (112). In contrast, Imbens and Jonkers (1992) conducted an exploratory study in the Netherlands with different results. The study consisted of adult women who were 20 years old or more and had experienced incest. The researchers found that some of the women negatively viewed God or the higher power as harsh, unloving and retributive, because He had not protected them from experiencing CSA (Imbens & Jonkers, 1992).

Age at Onset of CSA

The age of the child at the onset of CSA is examined to determine if age influences delay disclosures or nondisclosures. Although there are numerous studies (Alaggia, 2010; Hershkowitz, Lanes, & Lamb, 2007; Nagel, Putnam, Noll, & Trickett, 1997; Sorensen & Snow, 1991) available regarding the age of onset of CSA, there is controversy regarding the role age plays in CSA disclosures.

Some research supports that the victim's age is a factor in the disclosure. Alaggia (2010) found that the younger the child is at the time of CSA, the more problematic the disclosure. Williams and Banyard (1997) found that females who experience CSA at a younger age are less likely to make a disclosure of abuse. Other research holds that CSA occurring at a young age is a reason for delay, accidental disclosures or nondisclosures

(Nagel, Putnam, Noll, & Tricket, 1997; Sorensen & Snow, 1991). Finally, Smith et al. (2000) found that younger children who experience CSA are more likely to have delayed disclosures when compared to older children. In contrast, Hershkowitz, Lanes, and Lamb (2007) found that older children between the ages 10 to 12 are more hesitant to disclose the CSA and, as a result, delay disclosing the abuse. However, the younger children between the ages of seven to nine are more likely to disclose promptly. These findings contradict many other studies.

Another study found that adolescents are more likely to make disclosures about CSA (Kellogg & Huston 1995). DiPietro et al. (1997) conducted a quantitative study using a medical lens. They studied predictors of disclosures during medical evaluations for children in whom CSA was suspected (DiPietro et al., 1997). Using logistic regression they found that the older the age of the child, the more disclosure is likely (DiPietro et al., 1997).

In contrast, London et al. (2005) stated there were no consistent findings to indicate that the age of CSA onset is associated with failure to disclose. Other researchers found that age does not have any relationship on whether a child discloses or not (Arata, 1998; Kellogg & Huston, 1995). Widom and Morris (1997) concluded that the age of onset of CSA does not have any effect on the likelihood of disclosure. Yee-man et al. (2004) also found that the age of a child when CSA begins does not seem to be a significant factor regarding disclosures.

Other studies have looked at the types of disclosures that are determined by the age of onset of CSA. Campis, Hebden-Curtis, and Demaso (1993) found that the age of the child affects the type of disclosure that is made by a child. For instance, younger children usually reveal CSA unintentionally (through acting out, physical symptoms, or accidental slip of the tongue), whereas, older children tend to disclose more intentionally (Campis et al., 1993). These findings are further supported by Sorenson and Snow (1991) who found that preschool children are more likely to make disclosures that are accidental whereas, adolescents' disclosures are more purposeful. The age group in the middle, school age children, does not seem to have a distinct type of disclosure pattern (Sorenson & Snow, 1991).

Age might not affect when and whether a child discloses, however, it is significant in determining to whom the child discloses the CSA. Yee-man Ma et al. (2004) found a significant difference between older and younger participants regarding to whom they made their disclosures. The results indicate that 50% of the participants made their first disclosure of child sexual abuse to their parents and 33% disclosed to professionals such as teachers and social workers. The researchers found that younger participants disclosed to family members, usually the parent, whereas, the older children disclosed to a person outside of their family.

Severity, Duration, and Frequency of Abuse

There is a plethora of research that examines whether severity (Arata, 1998; Lemieux & Byers, 2008; Russell, 1986; Yee-man Ma et al., (2004), duration and

frequency of CSA contributes to delayed disclosures. Research indicates that the severity of CSA has immediate and potential long term effects on the victims and contributes to delayed or absent disclosures (Arata, 1998). Russell (1986) found that CSA victims who experienced oral, anal, or vaginal penetration were more traumatized than those that reported no penetration. This is supported by Arata (1998) who found that the more severe the assault was, the less likely a disclosure would be made.

These findings were maintained in a quantitative study conducted by Lemieux and Byers (2008). The researchers conducted interviews with 272 college females that experienced CSA. The researchers focused on the relationship between CSA and the participant's sexual well-being. They found that those who experienced fondling usually did not have adverse sexual outcomes. However, those victims who experienced penetration or attempted penetration seemed to indicate having more negative sexual functioning (Lemieux & Byers, 2008).

The duration and the frequency of CSA also impacts disclosures (Yee-man Ma et al., 2004). Yee-man Ma et al., (2004) examined frequency and duration to see if these variables affected disclosure rates for the participants. For the duration, 21 participants suffered abuse that lasted a year or less while seven participants reported CSA that lasted five to nine years. Regarding the frequency, 17 participants described the frequency of CSA as 10 times or less while two participants reported that the abuse occurred more than 100 times per year. Other participants did not report frequency so some data in this category was missing. They compared participants that experienced single incidents of

CSA versus multiple incidents of CSA. They found that 89% of those in the single incident group disclosed the CSA within six months, whereas the remainder of the group took seven to 24 months to disclose. On the contrary, participants in the multiple incidents group took longer to disclose with 46% disclosing within 7 to 24 months, and 40% disclosing after two years. Only 14% of the multiple incidents group disclosed within six months. The difference between the two groups is significant when comparing the frequency and duration of CSA. Therefore, from this study, severity, frequency, and duration appear to have an impact on when a CSA disclosure is made (Yee-man Ma et al., 2004).

Arata (1998) conducted a study with 204 adult females that reported a history of CSA. Arata found that if the CSA lasted longer than a year a disclosure was less likely to occur. In addition, the more physically severe the CSA was also hindered the chances of a disclosure.

Relationship to Perpetrator

There is a great deal of empirical support that the relationship to the abuser plays a significant role in when and if a victim discloses (Smith et al., 2000; Tang et al., 2007; Yee-man Ma et al., 2004). According to Imbens and Jonkers (1992), power inequality is an issue between the perpetrator and the victim. Paine and Hansen (2002) stated that “the victim-perpetrator relationship is not only most often a familiar one, but is also often an emotionally close and significant one” (p. 276). It is not uncommon for the perpetrator to be a parent or a parental figure in the child’s life (Sorenson & Snow, 1991). This means

that many perpetrators are in position of authority and are responsible for caring for the child (Sorenson & Snow, 1991). This puts the child at a disadvantage and in an awkward position. Tang et al. (2007) explained that victims of intra-familial abuse are more likely to have a delayed disclosure compared to extra-familial abuse. Arata (1998) found that disclosures are less likely to occur when the perpetrator is related to the victim.

This is further supported by the research of Yee-man Ma et al. (2004) who used a clinical psychology lens to compare the abuse characteristics and disclosure patterns of two groups of Chinese children who were sexually abused. Participants were divided into two groups based on whether they experienced multiple incidents (MI) or single incidents (SI) of CSA. The results indicate that 21 of the perpetrators in the MI group were family members with 13 being the biological parent. In contrast the SI group found that only two perpetrators were family members. This difference was significant ($\chi^2(2, N=58) = 18.71, p < .01$). The SI group had six cases where a stranger committed the CSA. Yee-man Ma et al. (2004) found that fear, shame, family loyalty, significance of the perpetrator in the family unit, and the victim's desire to protect their perpetrator all have an influence on when and if the victim discloses the abuse. Yee-man Ma et al. (2004) revealed that the participants abused by family member or a person whom they know takes significantly more time to disclose after their first incident of abuse. The average in this situation is 17 to 36 months. The findings reveal that children in the MI group tolerated the abuse longer than the SI group. According to the results when the perpetrator was a family member it took an average of three years to disclose. The average for participants sexually abused

by a stranger was 15 days to make a disclosure. The characteristics of the perpetrator and relationship with the victim played a significant role in whether the victim made a disclosure (Yee-man Ma et al., 2004).

In a quantitative study by Smith et al. (2000), data from a nationally representative sample, the National Women's Study (NWS) (Resnick et al., 1993), was examined. The sample included adult women who were raped in childhood. This research investigated the time that had passed between the rape and the disclosure as well as to whom these women made their disclosure. This study compared women who made early disclosures with women who delayed disclosing to see if they could identify variables that made a difference between the two groups. Smith et al. (2000) found that delayed disclosures were common. In their study, 28% of the participants had not reported the child rape to anyone prior to the research interview. In addition, 47% of the participants did not disclose for over five years after the rape. Predictive patterns of disclosure that included the child being older in age and where the rape was committed by a stranger were also found. The results revealed that rape by a stranger was associated with shorter delays in disclosure. However, the younger age of the child at the time of the rape, the perpetrator being a family member, and the repeated experiences of rape were associated with longer delays of a month or longer.

Another finding of Smith et al. (2000) is the protective nature of the child towards others, including their family members and the offender. The closer the relationship to the perpetrator the less likely it is the victim will disclose the abuse. In the cases of intra-

familial CSA, victims struggle with making the disclosure because it means reporting their loved ones to law enforcement (Smith et al., 2000). In addition, victims have a fear about how the disclosure will disrupt their family. The family systems view explains how family members are interdependent on each other. Each member has a role and part in the family system. As a result, the victim understands that by disclosing CSA, one family member might have to leave, thus causing disruptions to the family unit and its level of functioning (Smith et al., 2000).

The belief that there is a need for the child to protect others is further held by Jensen et al. (2005), who found that some children report having deep concerns about the consequences for the perpetrator and their family if they disclose the CSA. In addition, some children discuss feeling sorry for the perpetrator. In short, Jensen et al. (2005) found that children delay disclosing, because they are sensitive to the needs of their caregivers and fear the consequences that a disclosure would have for their family and the offender.

Lastly, since the perpetrator is usually close to the victim, it is not uncommon for the perpetrator to frequently warn the victim about the emotional or physical pain the family would suffer if the secret (CSA) is disclosed (Paine & Hansen, 2002). Often the perpetrator instills a burden of responsibility on the child to protect the family and the offender from the pain or consequences (Paine & Hansen, 2002). Based on all research it is easy to understand how a relationship to the perpetrator affects disclosures.

Sauzier (1989) also conducted a study that compared intra-familial and extra-familial CSA victims. The researcher found that when the perpetrator is the child's natural parent, the child is less likely to disclose the abuse. In addition, Sauzier also found that 53% of his participants who were abused by a natural parent never disclosed about the abuse. As for the extra-familial CSA, although Sauzier found that this group was more likely to disclose immediately, only 39% of them disclosed the abuse.

Family Support

Research has been conducted to determine the role that parental support plays in disclosures. Berliner and Conte (1995) found that the children in their study reported they wanted to tell, but were afraid of the reactions of others. Jensen et al. (2005) found children are sensitive to adults and use the reactions of adults as a guide to what can and cannot be discussed. Tang et al. (2007) reviewed research from a psychological trauma lens and stated that social support is a critical component to the disclosure process. Children need a supportive family structure or scaffolding in order to reveal their experiences of CSA (Jensen et al., 2005).

Research indicates that family support affects disclosures in two specific ways. First, the negative reactions of the parents, family members, or the community hinder the disclosure process itself. The child must feel as though he is believed. Sauzier (1989) stated, "but children are understandably reluctant to say what adults are reluctant to hear, be they parents, teachers or therapists" (p. 455). Usually the first disclosure is a partial one that is described as a type of testing the waters to see what type of reaction they get.

Staller and Nelson-Gardell (2005) define the process of disclosure as “iterative” because the adult’s reactions to the disclosure impacts whether the child discloses anything further or denies the abuse occurred. Jensen et al. (2005) found that children are sensitive to the reactions of others and to the possibility of misinterpretation of their disclosure.

Second, the level of support received from parents, family and others influences the psychological state of the child. If the parents have a negative reaction and do not provide the necessary emotional support, then additional trauma has potential to occur to the child. Lovett (2004) conducted a literature review of the research and used a social work lens to explain that once a child does decide to disclose the abuse, the reaction of caregivers and professionals either adds to the healing process or causes further trauma to the victims. Davies, Austen, and Rogers (2011) stated that secondary victimization occurred when a child discloses CSA to an individual and that person “makes further negative evaluations of the victim” (p. 601). Hunter’s (2011) findings indicate that parental reaction is very important and causes additional trauma if nothing changes for the victim or the victim is not believed or supported.

A study conducted by Vural, Hafizoglu, Turkmen, Eren, and Buyukuysal (2012) found that as a victim’s perception of maternal acceptance increases, the probability of experiencing depression usually decreases. Therefore, the researchers concluded that positive parental relationships are essential to the victim’s well-being and ability to overcome the trauma of CSA (Vural et al., 2012).

Additional evidence was found in a study by Lawson and Chaffin (1992), which examined the disclosure rates of 28 CSA participants. The researchers compared children with supportive caretakers to those with non-supportive caretakers to see if there was a difference between the disclosing rates. These researchers found that children who have supportive caretakers are three and a half times more likely to disclose CSA than the children with non-supportive caretakers. This lends support to Curran's (1983) second healthy trait which is "affirming and supporting each other." This trait demonstrates the importance of the child feeling loved and worthwhile within his family system.

Brand and Alexander (2003) used a psychological lens to investigate the levels of adult functioning for female survivors of childhood incest. They found that making disclosures can have some negative consequences, which contributes to poor adult functioning. These negative outcomes are more likely in a dysfunctional family system. The family systems theory discusses the emotional connectedness and interdependence on each family member. In the dysfunctional family, the accommodating family member, such as the victim, absorbs the building tension within the family leading to possible future problems such as substance abuse, suicide, depression, and eating disorders.

Hunter (2011) reviewed the literature and stated that we need to obtain a better understanding of the process of disclosing CSA. The researcher used narrative inquiry methodology and analyzed the data using the Rosenthal and Fischer- Rosenthal's technique of data analysis. A purposive sample was used which consisted of 13 women

and nine men, who ranged in age from 25 to 70 years old. A requirement to participate in the study was that the participants had to have had an early sexual experience (15 years old or younger) with an adult (defined as 18 years or older). The results indicate that children rarely disclose early sexual experiences without support. In addition, the study found that in unsupportive families where the children are experiencing feelings of fear, shame, and self-blame about the CSA, a disclosure is highly unlikely to occur. Arata (1998) found that reactions and current functioning impact whether a victim discloses the abuse as a child or an adult.

Hunter (2009) studied gender differences and the participants' response to their early sexual experiences with adults. The researcher identified many barriers to disclosing such as gender, limited emotional support, and children protecting parents. Hunter explained that as CSA victims reach adulthood, their circumstances change and they are more likely to disclose for a variety of reasons. Some of the reasons that disclosure is easier include greater support systems, no longer residing with their parents, increased self-esteem, less fear, the realization that the abuse is not their fault, and decreased feelings of shame (Hunter, 2009). The findings seem to indicate that to get quicker disclosures children should be taught to overcome these inhibitors. Children must reside with their parents while they are minors, however the other inhibitors would possibly be overcome if parents work with their children. Hunter's research also identifies the urgent need for more research to help society understand how to get people to move from not telling towards making a purposeful disclosure. Hunter explained that

despite the obstacles that most of the participants face, they eventually move from not telling towards disclosing the CSA to adults. This supports Hunter's view that disclosure is a developmental process that is very difficult, but not impossible, for young children.

Hunter (2009) acknowledged many limitations with the study, such as a small sample size and that the participants were not a true representation of the CSA population. In addition, there are limitations with the methodology, such as the participants were recruited through the media (Hunter, 2009). Also, the findings were dependent on the memories of the participants, which may or may not be accurate. Hunter stated that "the findings were limited to a particular social, cultural, and historical context except inasmuch as participants described how their narratives had changed and developed over time" (p. 395). While this research does have many limitations, it also provides good insight into understanding how gender affects disclosures. Furthermore, this research identifies some main barriers to disclosure and validates that most children do not disclose CSA as children. This study is also valuable because it does not seek out "survivors" or use the term "child sexual abuse" (Hunter, 2009). Instead, it asked men and women about their early sexual experiences with adults and accounted for the notion that for some individual's experience were not traumatic (Hunter, 2009). For instance, the men in the study do not like the label victim-survivor. By not labeling the experience as "sexual abuse" it allows participants to speak about their early sexual experience with an adult in a less limiting and stigmatizing way (Hunter, 2009).

Parental education, communication, and support are beneficial in trying to combat this phenomenon. Jensen et al. (2005) found that it is difficult for children to initiate conversations about an incident, which is done in secret, because it is confusing and stressful, and they do not fully understand. It is also suggested by Jensen et al. (2005) that adults should provide scaffolding for the child to empower and encourage them to make a disclosure.

Family Stressors

Research provides several reasons that parental support might not be available to the child and possible effects this has on disclosure rates. Some of those reasons include financial stressors, marital discord, and chronic illness of one parent to name a few.

Financial stressors include a parent losing a job, being unemployed for an extended period of time, or being employed, but receiving no increases in pay or a lower wage. Changes in the source of income for some families create financial strains (Fox & Chancey, 2014). Bronfenbrenner's ecological model demonstrates how the mesosystem (job/income) affects the microsystem (family). The changes in employment and income often lead to increases in tensions and unsteadiness within the family unit (Fox & Chancey, 2014) which impacts the parental-child relationship.

Another stressor on the parent-child relationship is marital discord. Conflict between the parents affects the parent-child relationship (Harrist & Ainslie, 1998). According to Cummings et al. (1985), children are affected by parental conflict and feel the effects from it even if they do not observe the conflict. Conflict in the marital

relationship frequently disrupts the parent's relationship with their child (Harrist & Ainslie, 1985). These disruptions in the parent-child relationship are manifested as unsupportive parenting (Block, Block, & Gjerde, 1988), poor communication, an emotionally unavailable parent, anger and irritability towards their children, a disconnection in the parent-child relationship, and erratic punishment (Holden & Richie, 1991). It seems fair to say that a breakdown in the parent-child relationship hinders the likelihood of a disclosure taking place. The fact that the parent's relationship affects the parent-child relationship is an example of Bowen's family system theory. The theory states that one member can affect other members of the family.

A parent with a chronic illness is another family stressor that has bearing on when a disclosure is made because stress increases for the child (Korneluk & Lee, 1998; Pedersen & Revenson, 2005). Possible reasons for increases in stress include children having limited availability and access to that parent (Armistead, Klein, & Forehand, 1995; Osborn, 2007), having to help more with the household duties (Armistead, Klein, & Forehand, 1995; Osborn, 2007), changes in their schedule or daily routines (Osborn, 2007), potential financial hardship on the family as a result of the medical expenses or loss of income (Osborn, 2007), and in some cases, facing the potential loss of a parent (Armistead, Klein, & Forehand, 1995; Chen & Fish, 2012; Korneluk & Lee, 1998). Based on the research, it seems that most CSA victims report being fearful to disclose the CSA (Berliner & Conte, 1995). According to Yee-man Ma et al. (2004), some issues such as family loyalty, protecting family members and possibly the perpetrator, fear of

consequences of disclosing, and shame are very debilitating to a victim and hinders them from disclosing the CSA. Some families have additional stressors that can inhibit an individual from disclosing the abuse.

Repressed Memories

There are several studies that maintain that individuals delay disclosing their abuse because they do not remember being abused (Briere & Conte, 1993; Herman & Schatzow, 1987; Williams & Banyard, 1997). Briere and Conte (1993) findings suggest “that such memory disturbance may arise from cognitive mechanisms invoked in order to avoid the painful affects associated with recall of especially violent abuse episodes” (p. 29). The researchers found that it is not uncommon for CSA victims to self-report amnesia about the abuse (Briere & Conte, 1993). Briere and Conte (1993) found that 59% of the participants in their study reported having periods that they do not remember the abuse. There are several predictors that seem to trigger the victim to repress the CSA. These triggers include being abused at an early age, suffering abuse over an extended amount of time, abuse by multiple perpetrators, experiencing physical mistreatment, and a fear of death if they disclose the abuse (Briere & Conte, 1993).

Summary

In chapter two, research is reviewed to determine what past and current research reveals about our understanding of CSA disclosures. The research illustrates that the majority of CSA victims do not disclose the abuse immediately after it occurs (Jensen et al., 2005; Yee-man Ma et al., 2004). Research also reveals several factors that impact

why disclosures are delayed or do not occur, such as gender (Alaggia & Millington, 2008; Hunter, 2009; Salter et al., 2003), culture and religion (Lovett, 2004; Tang et al., 2007; Yee-man Ma et al., 2004), age at the time of CSA (Alaggia, 2010; Williams & Banyard, 1997), severity and duration of CSA (Lemieux & Byers, 2008; Russell, 1986; Yee-man Ma et al., 2004), relationship to the perpetrator (Smith et al., 2000; Tang et al., 2007; Yee-man Ma et al., 2004), family support (Hunter, 2011; Jensen et al., 2005; Tang et al., 2007), family stressors (Harrist & Ainslie, 1998; Fox & Chancey, 1998; Chen & Fish, 2014), and repressed memories (Briere & Conte, 1993; Williams & Banyard, 1997). It is important to increase awareness about CSA and the patterns of disclosure in an attempt to initiate earlier disclosures (Kellogg & Huston, 1995). Earlier disclosures would not only benefit CSA survivors and their families, but society as a whole.

CHAPTER III

METHODOLOGY

This research investigated the circumstances of delayed disclosures and nondisclosures of CSA. There are several factors that contributed to disclosures being delayed or non-existent. Understanding these factors is significant because they are contributing to the ongoing problem of CSA. The goal of this research is to explore whether parental education and communication decrease the amount of time between the CSA incidents and the disclosure.

This study uses a framework that combined three components when creating the research design (Creswell, 2009). These components include philosophy, strategies of inquiry, and the specific method (Creswell, 2009).

The philosophy of the design originated from a social constructivist worldview. The assumptions of this worldview are that individuals strive to understand the world around them and assign subjective meaning to their experiences (Creswell, 2009). A social constructionist researcher understands that there were wide-ranging and numerous meanings for experiences; therefore, they do not attempt to narrow meanings into a few categories or themes, but instead considers all views (Creswell, 2009). In social constructionist view, open ended questions are ideal because they let the participant construct the meaning of the situation (Creswell, 2009). These meanings are shaped by

one's interactions with others, in addition, to cultural and historical norms (Creswell, 2009).

The second component, strategies of inquiry, is phenomenological research which influenced the procedures in the design (Creswell, 2009). Daly (2007) stated, "The purpose of a phenomenological study is to investigate the lived experience of one or more individuals in relations to a phenomenon of interest" (p. 97). According to Creswell (2009) phenomenological research is "the essence of human experiences" which is described by the participants (p. 13). It is important in phenomenological research that the researcher put aside their personal experiences so they do not influence the researcher's understanding of the participant's experiences (Creswell, 2009). This type of study examines the commonalities that participant's experience which provides a deeper understanding of the phenomenon (Creswell, 2007). Daly (2007) described phenomenological studies as a conscious experience.

The last component of the research design is the specific research method used in the study which is qualitative. The qualitative method influences the techniques utilized for data collection, analysis, and interpretations that the researcher offers for their study (Creswell, 2009).

A qualitative approach seemed best for this study because it provides "insider" information that could not be obtained through other quantitative means such as surveys, questionnaires, and observations. Qualitative research is considered naturalistic because it is not done in a lab (Creswell, 2009). The data is collected by direct contact with the

participants in their environment thereby giving the researcher additional information about how the participants behave (Creswell, 2009).

The goal of the qualitative research is to generate additional information from the experiences, insights, and feelings of these participants to further our knowledge about CSA disclosures. It investigates whether victims of CSA believe that educating parents and opening the lines of communication will lead to quicker disclosures.

The Participants

The purposeful sample included 11 participants in the study. There were two males (18%) and nine females (82%). The racial makeup of the participants included six Caucasians, three Hispanics, one African American and one Bi-racial. The participants ranged in age from 25-71, with the average age of 49.6.

The requirements to take part in the study were the participants must be adults (18 or older), victims of CSA, raised by one or both biological parents, reside in the North Texas area, and speak English because the researcher was not bilingual. If the participant met the above requirements, there were no other exclusions. All races, genders, ethnicities, religions, and social economic status were included.

The Procedure

This study was presented to the Internal Review Board (IRB) of Texas Woman's University (Appendix A). Approval from the IRB was obtained prior to any research being conducted. The IRB was in place to protect human participants by minimizing the amount of harm that individuals experience as a result of participating in a research

study. Therefore, any recommendations made by the IRB to the researcher were implemented to provide additional protection to the participants in this study.

The prospectus was also submitted to the graduate school at Texas Woman's University for approval. The study received approval from the graduate school (Appendix B).

Next, the researcher sent out letters (Appendix C) to agencies who specialized in the area of child abuse about the study. These locations were selected because the researcher was recruiting a purposeful study. The participants were recruited because they experienced the phenomenon being studied (Ryan et al., 2007).

The letters identified the researcher and explained the research was being conducted for Texas Woman's University. The letter discussed the nature and scope of the research. The researcher also included a copy of the recruitment flyer with the letters to provide additional information about the study. Furthermore, the letter requested permission to hang a recruitment flyer at their agency. In the letters to the Children's Advocacy Center for Denton County and the Family Place in Dallas, the researcher also requested permission to use their facility to conduct the interviews in small private offices.

Once the researcher obtained letters of permission from the director of the Denton County Children's Advocacy Center, the Family Place, and private counselors (Appendix D), the recruitment flyers were displayed in each agency. The recruitment flyers (Appendix E) provided the title of the study, the requirements to participate, the time

requirements, the contact information of the researcher, and the potential risks to the participants. Anyone interested in the study was asked to contact the researcher by email or by phone.

After the participant contacted the researcher about participating in the study there was a brief discussion over the phone with the potential participant (Appendix F). This discussion included informing the potential participant about the study (Ryan et al., 2007). In addition, the researcher discussed potential risks to the participant for their participation in the study, such as discomfort or pain discussing a sensitive topic and the possible loss of confidentiality. The participants were informed that confidentiality will be kept as much as possible (Ryan et al., 2007). Also, the researcher explained to the participant that a consent form (Appendix G) and demographic form (Appendix I) needed to be completed. In addition, the researcher discussed with the potential participant that an audio recorded semi-structured, face to face interview would be conducted with each participant. The researcher further explained that since the interviews were face to face, the researcher would know the identity of the participants and none of the responses would be anonymous. The researcher also clarified that their identity would not be revealed to anyone outside of the study. In addition, the participants were assured that the identifying data such as the consent form and demographic forms will be kept separated from the non-identifying data such as field notes and interviews. Both types of data were securely placed in a locked desk in the researcher's office for a period of two years. At the end of the two year period, all the data will be shredded and destroyed. The

participants were informed that the maximum time requirement for their participation in the study would be two and a half hours. There was also discussion with the participants that the interviews were audio recorded and later transcribed verbatim. Participants were notified that the transcriber would not interact with them or have any identifying information regarding the participants. Each interview was identified by a participant number. Participants were told that their participation was voluntary; therefore, they could end their participation at any point in the study. If the participant decides to participate, an interview date and time was arranged.

On the day of the interview, the participant was given the consent form and a list of counseling referrals (Appendix H). The researcher went over the consent form with the participant and answered any questions. The researcher explained each participant would get a list of counseling referrals to ensure that each participant had a safe place to debrief and receive emotional support, if necessary.

Next, the researcher gave the participant a demographic questionnaire to complete. While the demographic form was being completed by the participant, the researcher made a copy of the signed consent form and gave it to the participant for their records.

Once the forms were completed, the researcher assigned a number to the participant. This number was written on the informed consent, demographic form, and the field notes. The participant's number went on the transcripts once they were transcribed. The researcher did not use identifying information on the taped interviews.

Prior to the recorded interview the participant was reminded that their participation was completely voluntary and they could stop their participation at any time.

In the interview, the participants were asked 17 open ended questions (Appendix J) with a few follow up questions if needed. There were five sections to the interview which included communication during childhood, parental education during childhood, characteristics of abuse that delayed disclosures, delayed disclosures, and eliciting quicker disclosures.

Under the first section, communication during childhood, there were five questions regarding communication in the participant's home while they were growing up. These questions centered on describing the daily lines of communication, the level of communication such as surface or deeper level, if sensitive topics such as their body, puberty or sex were discussed, if they were discussed how often were they discussed and what was the level of comfort discussing these items, and lastly, they were asked to describe communication in the home when there was a crisis.

In the second section, parental education during childhood, there were three questions in the interview that asked if their parents educated them on some important topics while they were growing up. These questions consisted of asking if their parents ever discussed safety topics with them such as fire safety, stranger danger, don't drink and drive and whether their parents gave them a plan of action. The second question in this section asked about if their parents ever talked to them about CSA. There was a follow up question depending on whether they responded in the affirmative or negative.

If they answered yes, the researcher asked what they were told. If the participant answered no, they were asked why you think they never talked about it with you. The third question, in this section, was based on what their parents had communicated and educated them about CSA; did you feel prepared to handle it?

The third section of the interview had questions regarding the characteristics of abuse that delayed disclosures. There were two open ended questions concerning the abuse experienced by the participants. The first question asked the participant to describe the abuse they experienced. The researcher needed specific information from the participant's narrative such as the relationship to the perpetrator, the age of onset, the duration, frequency, and severity of the abuse. If the participant left any of that information out of their narrative then the researcher asked a follow up question. The second question asked about their family's reaction to the abuse and if there were changes in their life as a result of the disclosure of abuse.

The fourth section of the interview addressed the delay and the disclosure of CSA. The participants were asked about the circumstances or reasons for their delayed disclosure. In addition, they were asked if any cultural or religious beliefs prevented or caused them to delay disclosing the abuse. If the participant acknowledged that cultural or religious influences did play a role in delaying their disclosure the researcher asked them to explain those influences. The final question concerned the circumstances that prompted the participant to disclose.

The last section of questions dealt with eliciting quicker disclosures. The researcher asked the participants if the lines of communication in their home impacted when and if they disclosed the CSA. The second question, asked if their parents had educated and prepared them more about CSA, if it would have made a difference in how they handled the CSA and if they thought it would have led to a quicker disclosure? The follow up question was why or why not? The third question was to reflect back and explain what would have made them disclose sooner? The last question was a follow-up question, for the participants that are parents. The researcher asked what the participants are doing, if anything, with their children, regarding the subject of CSA.

At the conclusion of the interview, the researcher provided the participant with a \$10 gift card for their participation. The researcher thanked the participants for their time and feedback. If the participant had any other questions they were answered by the researcher.

Next, the recording of the interview was given to the transcriptionists to be transcribed verbatim. The transcriptionists had no contact with the participants nor did they have any identifying information about the participants to maintain confidentiality. Each interview was identified by the assigned number.

Data Collection

Data collection came from a face-to-face, semi-structured, in-depth interview performed by the researcher with each participant. While the interviews took place at different locations, the settings were similar. Most of the interviews were conducted in

private rooms at the Children's Advocacy Center. However, two participants were interviewed in a private office at the Family Place and one participant was interviewed in her living room at her home due to health issues. The private rooms at the Children's Advocacy Center and the Family Place had an inviting environment and a lot of privacy to maintain confidentiality. All the rooms were furnished with two chairs, a small table usually in between the two chairs, and a desk.

Once the interview began, it lasted anywhere from about 30 minutes to an hour and 15 minutes. The researcher asked the same 17 interview questions (Appendix I) to each participant. At the conclusion of the interview, the researcher asked the participant if they had any questions about the study, if they wanted the results of the study and provided a \$10.00 gift card for their time. Next, the recorded interview was given to the transcriptionists to transcribe each interview verbatim so that data analysis could begin.

Data Analysis

Some data analysis was done concurrently with the data collection (Babbie, 2007; Pope, Ziebland, & Mays, 2000; Thorne, 2000). According to Pope et al. (2000), this continuous analysis was basically unavoidable because researchers are human, which makes it difficult for them to put aside what they have seen and heard. Therefore, as the data were gathered, it was simultaneously analyzed and shaped the ongoing data collection (Pope, et al., 2000).

Once the transcripts were completed data analysis began. The researcher gathered all forms of data, which included transcripts, demographic forms, and field notes to use in

data analysis. The verbatim transcripts of the interviews provided rich narratives about the participant's experience. Field notes were also used as back-ups in case the recorder malfunctioned there would still be a record of the interview. In these field notes, the researcher also documented demeanor, gestures, and body language of the participant because that data could not be obtained from the recording (Gay, 1996). Lastly, demographic forms were used by the researcher to gain demographic and background information on each participant. The demographic forms provided additional data that was not revealed in the interviews. Each of these three forms of data created a clearer representation of the participants and their experiences.

The researcher and a data analyst coded the data independently. Various types of coding were used to analyze the content of the data. Babbie (2007) defined coding as classifying or categorizing each piece of data. The first type of coding was called open coding. During open coding, the researcher and data analyst broke down the data, examined it closely, and looked for differences and similarities (Babbie, 2007). Then, the researcher used axial coding, to a re-analysis of the results from the open coding, using the grounded theory method. In axial coding, the goal was to pinpoint the important concepts in the data (Babbie, 2007). The researcher and data analyst also conducted selective coding, which meant they found a central code in the study that related to the other codes. Miles, Huberman, and Saldaña (2014) "believe that coding is deep reflection about and, thus, deep analysis and interpretation of the data's meanings" (p.72).

Coding was essential to the analysis process (Babbie, 2007) because it assigns meaning to language-based data (Miles, Huberman, & Saldaña, 2014).

A computer was not used to code the data, the researcher and data analyst implemented a more traditional approach. The data analyst used color coding on the transcripts to identify each code. Whereas, the researcher made handwritten notes to initially categorize common themes, concepts, patterns, and insights about the phenomena. As additional themes and concepts emerged, the researcher created charts on the computer to organize and visually display the data in a meaningful way (Gay, 1996). The researcher analyzed the data for significant phrases to develop meanings (Creswell, 2007). These meanings were clustered into themes and concepts to see if there was support of a relationship or connection between the themes and concepts. The data analysis was inductive, which means, it began with examining specific themes and moved to more general concepts about the phenomenon (Creswell, 2009). Organizing the data created abstract units of information (Creswell, 2009), which generated ideas and theories (Thorne, 2000). The goal of the researcher was to create theory and find the meaning that was embedded in the narrative data.

Research Questions

This study has two research questions that guided the research.

R1. Do CSA survivors think that educating parents on the factors contribute to delayed disclosures and parents educating their children about CSA would lead to quicker disclosures of CSA?

R2. Do CSA survivors believe that the time between the incident of CSA and the disclosure would decrease if there were open lines of communication about sexual issues (puberty, sex, sexual abuse) between parents and their children?

Trustworthiness

Validity and reliability are seen differently in qualitative research. Merriam (1995) explained that qualitative research attempts to understand the world from the viewpoints of those in it. Merriam stated “qualitative research is based on different assumptions regarding reality, thus demanding different conceptualizations of validity and reliability” (p. 52). It is important for qualitative studies to have validity and reliability.

Validity is the degree in which observations truthfully reflect what was observed (Gay, 1996). The researcher ensured the validity of this study by implementing several steps. First, each interview was recorded and transcribed verbatim. This meant that the researcher had an accurate record of the interview, therefore could listen to the recording multiple times to ensure the accuracy of the data. This served as a safeguard ensuring that the data from the interviews were an accurate reflection of what was observed, such as feelings, insights, and opinions, thus increasing the validity of the study (Gay, 1996). Triangulation was performed to assure the trustworthiness of the findings. Viewing the phenomenon through all the data helped increase the validity of the study (Gay, 1996). The data were collected from the transcripts, demographic forms, and field notes and compared to existing literature to see if the findings were supported in the literature.

Most of the findings were supported by existing research. The results seemed to make sense which is another way to judge the credibility or validity of the findings (Miles, Huberman, & Saldaña, 2014).

Reliability in qualitative research is concerned with whether the findings could be replicated by others (Gay, 1996). According to Merriam (1995), the concept of reliability in qualitative research is problematic. Due to the fact, that all humans are different and their behavior changes regularly, duplicating the results with different groups of people is difficult. Merriam (1995) stated that in qualitative research, reliability should be based on whether the results are consistent with the collected data. A data analyst was used in the study to cross check codes to ensure reliability. The researcher and data analyst reviewed all collected data independently to examine whether the results were consistent with the collected data. The intercoder agreement checks demonstrated similar results between the researcher and data analyst (Miles, Huberman, & Saldaña, 2014). The data analyst did not interact or know the identity of the participants. The only function of the data analyst was to code the data. Lastly, to maintain reliability, the researcher avoided observer bias by putting aside any preconceptions about the topic and truly relying on the data that emerged.

Due to the nature of qualitative research, the number of participants was limited, which made generalizability difficult; however, it still provided rich in-depth information regarding the topic that was investigated (Ryan et al., 2007). This research provided

information that identified reasons for delayed disclosures and gave insight into whether education and communication would move children to disclose sooner.

Limitations

This study had a few limitations. The first limitation was trying to recruit participants. Since the study addressed such a sensitive topic it was difficult to recruit participants. Although the researcher has fourteen years of experience interviewing CSA victims, the researcher had to rely on the participant's trust in the researcher to disclose such painful and personal experiences. Despite the recruitment limitation, this study still had more participants than expected.

Another possible limitation in the study was the research questions; they could be confusing to individuals that do not work in this field due to the terminology. Since this was a qualitative study the researcher spoke directly to the participants and used her skillset to break down the research questions into smaller ones that made more sense to the participants.

In addition, another limitation of the study was utilizing interviews as the method of data collection which had a few weaknesses. For instance, utilizing interviews meant there was personal interaction that occurred between the researcher and the participant; this interaction could influence the participant. As a result, the researcher refrained from making facial expressions or using body language that could influence the answers of the participant. It was important that the researcher had as little an impact on the process as possible.

A second issue with the interviews was that the data came from self-report. This could be problematic because the data were dependent on retrospective information. There is some controversy regarding whether data obtained retrospectively from memories are valid (Berliner & Williams, 1994; Briere & Conte, 1993; Lindsay & Read, 1994; Loftus, 1993). Another problem with self-report was that the researcher had to rely on the truthfulness of the participant. In some cases, participants may not want to be viewed unfavorably; therefore, adjust their answers to make themselves appear more favorably.

However, the benefits of using interviews with self-report as a method for data collection far out-weighed the limitations. These interviews provided rich “insider” data that could not be obtained through quantitative methods, such as surveys, questionnaires, or observations.

Summary

This study used a framework that connected the social constructivist view, phenomenological method, and qualitative research to create the research design (Creswell, 2009). Qualitative research was referred to as naturalistic research (Creswell, 2009). It investigated topics from the perspective of individuals who experienced the phenomenon. Due to the fact that CSA was a sensitive topic, qualitative research was the best method to use to get the insider’s perspective. The same data would not have been obtained using a quantitative design. The goal of the research was to understand the circumstances of delayed disclosures and nondisclosures of CSA and to see if parental

education and open lines of communication decreased the amount of time between CSA and disclosures.

The qualitative concept of trustworthiness was discussed. These concepts are different in qualitative research than they are in quantitative research. In qualitative research validity can be defined as the degree in which observations truthfully replicate what was observed (Gay, 1996). Reliability was concerned with whether the findings can be replicated by others (Gay, 1996). It is hard to replicate findings in qualitative research because humans assign different meanings to their experiences. Therefore, triangulation was used to ensure trustworthiness. The data were coded by both the researcher and a data analyst. All the data, which included transcripts, demographic forms, and field notes, were compared with existing research to verify that the data were supported by evidence. The data were also analyzed to see if the results accurately reflected the phenomenon.

The results in most qualitative research cannot be generalized to the larger population and that was true for this study as well. This study used a purposeful sample which means that it was a very specific population and a small sample size that was not representative of the larger population.

There were limitations in this study. First, the number of participants was slightly smaller than planned. Due to the sensitive nature of the topic, recruiting participants was very difficult. Second, using interviews as a method can create weaknesses in the study for several reasons. The researcher had to rely on self-report. This means the researcher had to rely on the truthfulness of the participants and retrospective data. A further

weakness of using interviews was the potential influence of the researcher on the participant during the interview, researcher bias, and no generalizability of the findings.

All these limitations were minor. This research gained more than it lost. The researcher gained rich insight into the life experiences of the participants. This was significant because it shed much needed light on delayed disclosures. Delayed disclosures are very detrimental to the victims, community, and society as a whole.

CHAPTER IV

RESULTS

The purpose of this phenomenological study was to explore the delayed disclosures of adult survivors of child sexual abuse to see if parental education and communication would decrease the delays in disclosing. The goal of the research was to explore possible ways to encourage children who were sexually abused to disclose sooner so that they could end the abuse and receive any necessary support. There were most likely an infinite number of reasons for delayed disclosures, but the focus of this particular study had to do with education and communication within the parent-child relationship and its potential influence on whether the child disclosed or not.

The findings are divided into two parts. The first part includes detailed demographic information on each participant (Appendix I). The second part of this chapter included 11 in-depth interviews from adult survivors of CSA that were transcribed verbatim. These transcribed interviews and demographic forms were used for the data analysis presented in this chapter. The common themes were combined and identified within the context of the research questions (Appendix L).

Description of the Participants

There were 11 participants from the North Texas area that voluntarily participated in the study by completing demographic data forms and in-depth interviews. To fulfill the research criteria, potential participants had to be English speaking adults that

experienced CSA, and delayed disclosing the abuse. In addition, they had to be raised by at least one biological parent. The participants were recruited from private counseling agencies in Denton and Flower Mound, the Family Place in Dallas, and from the Denton County Children's Advocacy Center located in Denton and Lewisville, Texas.

The participants included nine females and two males. Participants 3 and 10 were males. The age range of the participants was 25-71 with the average age being 49.6 (50 years old). The participants represented several racial groups which included six Caucasians, three Hispanics, one African American and one bi-racial (Caucasian and African American). Of these participants, eight were married, two were single (one divorced and the other never married), and one of the participants has been in a committed relationship for 29 years with her partner. Regarding their religion, participants currently identified themselves as six Christians, two Baptists, two Methodists, and one Lutheran. Their level of education consisted of one having a high school diploma, three had a four year degree, four had a master's degree, and there was no data available for three participants.

Table 1

Current Demographic Information

Participant	Gender	Age	Race	Marital Status	Education level
1	Female	41	Hispanic	Married	4 year degree
2	Female	61	Caucasian	Married	Master's degree
3	Male	41	Hispanic	Married	4 year degree
4	Female	41	African American	Married	No data
5	Female	71	Caucasian	Married	High School diploma
6	Female	25	Bi-racial	Married	No data
7	Female	60	Caucasian	Single	Master's degree
8	Female	59	Hispanic	Married	4 year degree
9	Female	66	Caucasian	Single-Partner	Master's degree
10	Male	53	Caucasian	Single	Master's degree
11	Female	28	Caucasian	Married	No data

Childhood Demographic Information

The participants described their home during childhood. All of the participants reported living in intact families meaning with their mother, father and siblings. Eight of the eleven participants mentioned family stressors in the home such as domestic violence, marital discord, divorce or separation, financial hardships, or having a parent that was disabled (Participants 5 and 8), chronic illness (participant 6), or dying (Participant 4). For some participants, living in an intact family changed, due to family stressors. Three of the participants and their parents stopped residing together due to parental separation (Participant 6) or divorce (Participants 3 and 10). Participant 3 began living with his grandmother as a result of the marital conflict between his parents which eventually led

to divorce. Participant 6 lived with an aunt for some time after her parents separated. Some participants had others in the home that changed the dynamics of the family unit. For instance, Participant 10 gained a step-father once his parents divorced. Participant 6 stated that in addition to her intact nuclear family they also had foster children present in their home.

Family Finances

The participants were also asked to describe the family finances during childhood. Ten of the 11 participants reported their socioeconomic status to be middle class, whereas Participant 5 reported being in the lower socioeconomic status.

Regarding parental employment there were many responses. Nine of the participants (82%) confirmed that their fathers worked full time. Two participants had fathers that worked full-time but there was a break in their full-time status. Participant 6 explained that her father worked full time until he became disabled and Participant 5 said that their father worked full time only sometimes because he was handicap. The mother's employment was split. Participants 1, 3, 6, 9, and 10 reported that their mothers did work full time whereas; the mothers of participants 2, 4, 7, 8 and 11 did not work full time. Participant 5 stated that while she was younger her mother did not work, but her mother began working full time once the participant reached her teens.

It varied among the families regarding who held the role of breadwinner. Seven of the participants (64%) stated that their father was the breadwinner. In contrast, Participant 10 explained that his mother was the breadwinner because his father left. She

had to support herself and her two children. The last two participants viewed both parents as sharing the role of breadwinner. Participant 5 labeled the breadwinner as whoever brought in the money. Lastly, Participant 3 said both parents were the breadwinner because they brought home about the same income.

Family Religion and Culture

The demographic form inquired if there were any religious or cultural beliefs that impacted their family unit. Eight of the eleven participants (73%) labeled their families as religious while they were growing up. However, participants 3, 5 and 10 stated their families were not religious yet with the exception of Participant 10, identified his family with a religion. The other participants identified their families as Christian (participant 6), Baptist (participants 1, 2, 4, 5, 7, and 9), Non-Denominational (Participant 11) and Catholic (participants 8 and 3). However, while Participant 3 did identify his family as Catholic, he stated they were non-practicing. Yet, during the interview participant 3 stated that personally the shame and guilt that he felt from religion played an enormous part in his life. He stated that he did not understand grace and he did not expect anyone to give him grace if he told. Participant 5 stated that her family was not religious, but also stated that she attended church as a child and teen.

Many participants conveyed that they were religious and gave examples of what that meant. For example, participant 1 stated that she was taught that “God should be their foundation.” Participant 4 explained that she “attended church regularly and was taught right from wrong with a Christianity perspective.” Participant 11 stated that her

family believed “once you forgave someone, you don’t need to discuss it anymore.” Although Participant 6 did identify her family as religious, she did not indicate that the family’s religious beliefs had an impact on the family unit. Participant 7 was not very specific; she only stated that attending church impacted her family’s beliefs. Lastly, Participant 8 identified her family as Catholic growing up and described it as very legalistic, shameful, and unforgiving.

Many participants also did identify cultural beliefs that impacted their family. Participant 2 explained “my father was very judgmental and racist. I was influenced, but have chosen not to be as racist as he was and not judgmental.” Participant 5 identified racism, as well as, societal gender roles as impacting her family unit. In addition, she revealed that while she was growing up the males in her household were treated like gods and the girls were servants. She stated “I had one purpose in that household: babysit, wash dishes, clean the house, cook, iron, and take care of those kids, the youngest ones.” She also mentioned “that whatever daddy said went.” She seemed to feel like gender socialization greatly impacted her family’s beliefs. Participant 8 described that the Hispanic culture “did not share personal issues outside of the immediate family.”

Participants 3 and 10 stated their families did not have any cultural beliefs that impacted their family. Participant 9 did not respond to this question so there was no available data regarding religious or cultural beliefs that impacted her family.

Familial Relationships in Childhood

The participants were questioned about the relationships in their immediate family and their extended family. These questions assessed the level of trust and support the participant had when they were growing up. This section was broken down into four sections which included family trust, nuclear family support, extended family support and parental support.

Family Trust

The participants were asked about whether their nuclear family trusted each other. Participants 2, 3, 5, and 9 (36%) stated that their family members did not trust each other. Participant 2 explained there were no boundaries and her feelings were never validated. She stated that she lived in fear because she never knew when her father's anger would erupt. She described that she walked on egg shells. Participant 3 could not provide any examples of trust in his home because it did not exist. The response of participant 5 did not seem to focus on her immediate family but only on the relationship between her and her parents. She was very clear that there was no trust between her and her parents. She stated "I was nothing." Lastly, participant 9 indicated there was no trust but did not provide anything further.

In contrast, participants 1, 4, 6 and 10 did indicate that the family members in their immediate families did trust each other. These participants gave examples of trust that centered on family members being left to take care of the children. Often times in these examples it was the other siblings fulfilling that role. Participant 10 gave examples

of trust in his family that included receiving positive feedback on accomplishments or tasks completed without supervision. He talked about how his mother listened and offered suggestions. He knew there was trust because when he was on a date, he had a proven system for returning home on time.

Three participants were split on the issue of trust. For instance, Participant 7 stated “no” when asked if trusted existed in her home, but then adjusted her answer to “maybe some.” She explained that they could call on each other in a crisis which she defined as issues with health, cars or money. Participant 8 specified very clearly that she trusted her siblings, but not her mother or father. She said her siblings and her would share secrets and confide in each other without judgment. Finally, Participant 11 revealed that all the siblings did not trust their mother, but they did trust each other.

Nuclear Familial Support

Next the demographic form inquired whether the participants felt support from their immediate family. These responses seemed to correspond with the responses given regarding trust within the family. Participants 1, 4, 6, and 7 all stated that they felt supported by their families. Participant 7 did not provide any examples of how she felt supported. However, participants 4 and 6 felt supported by family because they were involved in extracurricular activities and their parent(s) were there to support them. Participant 1 stated she felt supported because “my parents always strived to give us the best they could. We were always encouraged to do our best in life.”

In contrast, participants 2, 3, 5, and 9 all responded in the negative to receiving support from their family. Participant 5 responded that she “never” received support from her family. Participant 3 simply stated that his mom and dad were not supportive. Participant 2 stated that “I always felt like I did not fit.” She explained there was a double standard in the treatment of her and her brother. She stated that the rules for her and her brother were different. Participant 3 said “women had no voice in the family.” Lastly, Participant 9 conveyed that conversations that had substance did not exist in her home. She explained there were many secrets in the home. She stated that her dad was violent and abusive. He would make fun of her and had derogatory pet names for her. She did not feel support at home.

The last three participants indicated they were split on whether they felt support in the home. For instance, Participant 8 stated that she felt supported by her mom and siblings, but not her father. An example she provided was that her mom and sisters supported her in her desire for higher education and in being independent. Participant 10 stated that he and his siblings did not get full support. They were supported on grades and education, however, not on extracurricular activities. Participant 11 said she did not feel supported by her family because she wanted to attend public school and her parents would not allow it nor did they provide her with any explanations as to why she could not attend. However, she also explained feeling support from her parents because she was allowed to participate in dance for 10 years and she liked dancing.

Extended Familial Support

The participants were also questioned about whether they felt supported and close to their extended family. Six of participants (55%) did feel support and close to extended family members. Participant 1 talked about how she had close relationships with her aunts and cousins. She also had close relationships with both grandmothers before they died. Participant 3 discussed that he was close to his grandmother. He stated that she cared for him during the turmoil after the divorce. Participant 6 did not elaborate, but indicated she was close to some extended relatives. Participant 8 stated she has close relationships with her extended family. She also stated that they frequently have family and even sibling reunions. Participant 10 explained that he was close to some of his extended family. He even had a family friend (fictive kin) that served as a father figure to him. Participant 11 described that she had daily and weekly phone calls between her and her extended family. She said if she or her family needed anything it was provided. She gave an example of how their truck needed tires and there was no question that their uncle would buy them. Participant 2 seemed to answer this question regarding her parents and the question asked about extended family so the researcher was unable to use data on this question.

The last three participants indicated that they did not feel close to or supported by extended family. Participant 9 stated she does not have any extended family. Participant 7 said they did not feel close to or received support from the extended family and did not

elaborate any further. Participant 4 described she did have a large extended family, however, reported not being close to them.

Parental Support

This demographic question was specifically asking about parental support. Therefore, the focus of the question was on the participants and their parents not the siblings or extended family. This question wanted to know if the participants felt like the parents listened, believed and supported them on a regular basis. Unfortunately, five of the participants did not report feeling or receiving this type of parental support. Participant 5 simply stated that she did not feel supported, listened to or believed. Participant 7 also did not elaborate much but stated she did not feel listened to, supported or believed because they did not discuss issues. Participant 9 responded to the question by saying “they never knew who I was.” Participant 8 stated her father was uninvolved. Furthermore, her mother was more concerned about what her mother’s siblings thought of how her children (the participant and her siblings) were behaving. Finally, participant 3 said he did not feel those types of support from his mother because she was preoccupied with the marital problems and a new relationship. Participant 3 stated he did not receive this from his father because he was an alcoholic and there was adultery which was why he left the family when the participant was 10 years old.

Three participants felt that they did receive this type of support from their parents. Participant 1 said “we were always encouraged to do our best in life and always reminded us that we were loved unconditionally.” This type of support was described by

Participant 4 as both parents spending a lot of time with her. She said they would talk to her about different things especially since her mother was only given three months to live. Participant 6 said she felt completely supported by parents. She gave an example of how she got in trouble for something at school that she did not do. She said her mother went up to the school and straightened things out with the principal.

There were three participants that were split on how they answered this question on support. Participant 2 said that she did not receive this type of support from her dad. She gave an example of when she was trying out for cheerleader and her father told her he hoped she did not make it. She explained her mother would listen and seem to support her but did nothing to end the verbal, emotional, and physical abuse by her dad.

Participant 10 describes that his mother was busy and so she provided him with a mental health professional that he could talk to about the divorce. As for his father, participant 10 described him as non-existent. Participant 11 reiterated that she did not feel listened to or supported because she wanted to go to public school, but parents would not allow it. There were no explanations of why she could not attend public school. However, she did feel supported and listened to about wanting to take dance. Her parents allowed her to be in ballet classes for 10 years.

Results from the Interviews

The second half of this chapter discussed data obtained from the interviews. The study used two research questions to explore whether parental education and communication impacted delayed disclosures. R1. Do CSA survivors believe that

educating parents on CSA and the factors that contribute to the delayed disclosures would lead to quicker disclosures of CSA? R2. Do CSA survivors believe that the time between the incident of CSA and the disclosure would decrease if there were open lines of communication between parents and their children. Guided by the two research questions, the interview was divided into five sections. These sections consisted of (a) Communication during childhood, (b) Parental education during childhood, (c) Characteristics of abuse that delayed disclosures, (d) Delayed disclosures, and (e) Eliciting quicker disclosures. In the data collected from the interviews, 9 major themes emerged. Each theme and supporting theme is reviewed (Appendix L).

Theme One: Prolonged Process of Disclosure

A common theme among the participants was that the disclosures were a prolonged process. Through data four supporting themes emerged which included future victimization, same sex abuse, characteristics of abuse, and repressed memories. Each of these supporting themes added to our understanding of why the disclosures were delayed

Future Victimization

One contributor to the delaying of disclosures seemed to be whether the participants experienced abuse by one or multiple perpetrators. The results showed that five of the participants were abused by a single perpetrator and six experienced abuse by multiple perpetrators. The study seemed to reveal four types of circumstances that the participants experienced in their abuse. There was a single perpetrator and single incident. This circumstance only pertained to Participant 3 who had a single perpetrator,

his grandfather, and it was a single incident. He took 21 years to disclose the abuse. There were no other participants in this study that experienced a single incident by a single perpetrator so there was no other data to compare it with.

A second circumstance consisted of participants 4, 8, 10 and 11 who endured multiple incidents of abuse by one perpetrator. The range of their disclosure rates were between 5 and 37 years. A third circumstance was experienced by participants 2, 5, 6, and 7 who suffered abuse by multiple perpetrators and the incidents were a combination of both multiple and single incidents. The ranges for their disclosures were 17 to 65 years. The last circumstance was experienced by participants 1 and 9 who suffered multiple incidents of abuse committed by multiple perpetrators. They took 31 to over 40 years to disclose. The results in this study found that the participants that suffered abuse by multiple offenders seemed to overall take longer to disclose the abuse. The findings also appeared to indicate that once the participants experienced CSA, there seemed to be vulnerability towards future abuse.

Same Sex Abuse

The findings also found that six of the participants (55%) experienced abuse by a perpetrator that was the same sex as them. The shortest disclosure time for these participants was about 17 years. The longest was over 40 years. The participants were wrestling with various emotions because the perpetrator was the same sex. One participant had concerns that he would be viewed as homosexual because he was abused by a male:

Yes, I mean, that's – kind of they would think that I tended that way [homosexual] and I have no inclinations that way. My family knows I've always like females, I've always attracted. But people would be quick to judge you and say maybe you just had that inclination and you didn't really have a strong girlfriend while you were in high school but a lot of kids do. Don't blame me. (Participant 10)

One participant explained that she had a female friend that violated her at a party. She and her friend were with other friends drinking. The participant passed out. She woke up the next day and her friend confessed to having done sexual things to her and she was angry:

I was fully aware she was gay. She was fully aware I was not. I almost threw her off the balcony. Yes, it was- I was not- I was not happy about that. I was very angry. Yes, because she was- she was a good friend. I mean, and after that we weren't friends anymore. I mean, she knew I did not care for females. I didn't want to go that way. (Participant 6)

The abuse was damaging, but seemed to add another component to the victimization when the offender was the same sex as their victims. Furthermore, this study revealed that out of all the identified abusers in this study, there were six female perpetrators who committed sexual offenses against some of the female participants. This was significant because while females do commit sexual offenses against children it was not the norm. Female offenders were still considered fairly rare, yet there were six female perpetrators identified by the participants in this study. One participant describes being terrified when the abuse started because she never saw it coming. Her abuser was a 32 year old female who was married with three children.

I mean, it was just not even in my mind that this would happen. But she, um, she trapped me in that little room, and she started to kissing me. And I was like whoa.

Terrified me. Terrified me that she would do that. I thought she is mental.
(Participant 7)

As the CSA progressed and experienced more grooming, the participant began to see this lady as the main woman in her life during junior high. When she did disclose the abuse she was told they needed to get her to a psychiatrist. By the time she got to high school, all the kids knew about it and she described high school as awful.

Characteristics of the Abuse

After reviewing several characteristics of abuse, this study found several that appeared to contribute to a prolonged process of disclosing the abuse. Each of the characteristics is addressed separately.

The relationship to the perpetrator. The study also examined some other characteristics about the abuse such the relationship between the perpetrator and participant. The findings for this study were that nine of the 11 participants had their first sexual experience with a family member. The results also revealed that six of the participants were abused by familial members only, two were abused by non-familial only, and three were abused by both familial and non-familial perpetrators.

This study did not find support that the relationship with the abuser impacted when the participant disclosed. Although each of these participants delayed disclosing for a long time, the first participant to disclose the abuse was abused by a family member. Participant 11 was abused by her brother and had the shortest delay (five years) in disclosing the abuse. The second shortest delay came from participant 4 who was abused by her uncle and waited about 14 years to disclose.

Whereas, the participants who did not experience familial abuse still had a prolonged disclosure process. Participant 6 experienced non-familial abuse (family friend) and waited about 17 years before disclosing the abuse. Participant 10 experienced non-familial abuse (trainer) and still to this day has not disclosed. It has been over 30 years. These participants have experienced abuse by non-familial, familial and or both have delayed disclosing their CSA for a significant amount of time.

Severity, duration, and frequency of abuse. This study also investigated the severity, duration and frequency of abuse to understand if these characteristics of abuse would delay a disclosure. The participants experienced different types of abuse.

The severity took into account whether the sexual acts included exposure, touching, or penetration. The researcher only recorded what the participants stated regarding the abuse. This meant that other types of abuse (such as exposure of genitals) possibly happened during these incidents, it was not recorded by the researcher unless the participant actually said it occurred. The results showed seven of the participants experienced some form of penetration, touching and exposure (of their genitals or the perpetrator's genitals). Two participants stated they experienced exposure and penetration, one participant claimed their experience was touching only and one participant reported penetration only. Due to the fact that all the participants had considerably long delays it was difficult to say whether these characteristics had any bearing on the delayed disclosure. For example, participant 3, who had one perpetrator and a single incident of touching, still waited 21 years to disclose the CSA.

The duration and frequency of the abuse were examined. The study found that six of the participants experienced CSA for a period of four to seven years, one participant for 18 months, one participant for 10-12 months, one participant for seven to nine months, and two participants for three to six months. Some participants reported the frequency as occurring weekly, monthly, yearly while others conveyed the frequency as the number of times it occurred total within the duration of the abuse. In addition, since many of the participants experienced abuse from multiple perpetrators and had multiple incidents it was harder to group and illustrate the findings regarding frequency. The findings are documented on the chart concerning each incident of abuse (Appendix K).

Repressed Memories

Repressed memories also played a part in why four participants did not disclose. Many of the participants discussed that they did not remember the abuse for some time:

I didn't. I didn't for a long time. Most of my life I did not remember it [the abuse], and I had a lot of problems, um, with flashbacks and things that were odd that I always wondered about, you know. (Participant 7)

A lot of – this is my problem with a lot of these things is I had repressed memories, so I didn't remember any of this until I was 38 and started into counseling. (Participant 2)

And I was in the same room while I was staying with my parents that I had as a little girl and I think that some of those fears that I was experiencing at that time and then years ago kind of surfaced, and then I -- it made sense to me why I would say to my uncle no peeking. It was almost like an "ah-ha" moment that this is why I was saying it, because then I remembered what would happen. It all flooded back to me what was happening to me during that time. (Participant 8)

Clearly participants could not disclose what they could not remember which also contributed to delays in disclosing the abuse.

Theme Two: The Limited Parental Education about CSA

Seven of the participants discussed experiencing confusion about the CSA. In most cases, the parents had not discussed CSA with the participant. A question that investigated how prepared the participants felt when CSA occurred to them was *based on what your parents communicated and educated you about CSA, did you feel prepared to handle it when it happened to you? Please explain.* All of the participants stated they did not feel equipped to handle the child abuse when it happened to them. They did not know what was going on, what to do, or that it was wrong. Nine out of eleven participants stated they could not even identify CSA, nor did they know it was abuse. Participant 2 explained “it just kind of happened, and I didn’t realize what was going on until it was there, we were already at that point [abuse].” Participant 5 stated “I don’t think I really knew. You know, I felt, how do you say, violated. I did not understand what it was, I can tell you that.” Participant 10 clarified “I don’t think I was educated enough to know the signs.” Another participant explained:

The first time it happened, I didn’t understand what was going on and after receiving a threat, you know, you can never tell anybody about this. And I’m like, okay. I was just more confused. And I remember trying to just --- going that was so uncomfortable I don’t even want to think about that happening. (Participant 4)

I mean, you know, it was freezing [panic], I didn’t know what to do, just me and him alone, scared, startled, stiff, cold, and nothing. I mean, it just happened and I didn’t – I didn’t know what to do. I mean, so that’s –that is it. (Participant 3)

Another participant explained that her father would engage her in play which she described as “very very playful grooming.” He would incorporate the sexual abuse into

the play. She stated “I didn’t even know I was doing wrong because he groomed so well, I was playing, you know.” She described:

My father had been laying in his bed and he was sexually, you know, engaged me in play, you know, in regards to his penis kind of thing and he had it under the covers, and I was on top of the covers and it was a playful thing. (Participant 7)

This confusion seemed to be exasperated when the abuse was at the hands of a family member. Participant 1 indicated that she did not know the CSA was wrong because “it’s a family member, someone we trust.” As explained by one participant:

Wasn’t sure what was going on, knew that it wasn’t, probably, right what was happening, but because it was a family member, you just really didn’t know if that was wrong. It was somebody, I mean, that you just—it didn’t seem right, but at the same time, wasn’t sure if it was wrong because it was a family member. (Participant 1)

I want to say yes [that she knew about sex] because my brother educated me a lot on my body which was weird, but I thought okay, it’s my brother. So I knew what it [sex] was but didn’t know how bad it was. Like, because it’s my brother and you’re not supposed to do that because I wasn’t ever taught, you know, that it’s bad. (Participant 11)

The absence of fear contributed to a participant not understanding that the CSA was wrong:

At the time I didn’t know it was wrong, again, because it wasn’t a stranger. It wasn’t like they were threatening me. I wasn’t being told not to tell. I wasn’t –I was never threatened. It wasn’t a violent kind of thing. It was just something that, hey, let’s go play over here, and then it would happen. At the time, in the back of my mind, I kind of thought, this is odd. I don’t think this is right, but at the same time, it’s a family member, someone we trust, someone that I wasn’t afraid of. I mean, I wasn’t afraid of them then and I’m not afraid of them today. (Participant 1)

Furthermore, the early victimization of seven out of the eleven participants meant that these participants were too young to learn about CSA from a school program, likewise, it was not discussed at home. This finding could explain why many were unable to identify what CSA was and that it was wrong. One participant addressed that she did not think education about CSA would have been beneficial.

Probably not, cause of the age, cause parents are so in control. I mean, they pick you up, they put you on the table, they undress you, they do everything, you know, so um, it's a very terrorizing age, you know, they do. You just feel helpless. (Participant 7)

This section had three interview questions which explored what safety topics, if any, that the parents educated the participants about during childhood. The first three interview questions addressed the educational information received from parents in childhood. The first interview question was a foundational question for the second question. The first question asked *did your parents ever discuss safety issues with you. When they did discuss these things with you did they tell you what to do or give you a plan of action?* The participants were pretty divided on this question with five reported yes (participants 4, 6, 8, 10 and 11) and five (participants 1, 3, 5, 7, and 9) reported no. Although Participant 2 stated “yes” she seemed to change her answer:

Well, you know, I don't know that I was taught fire safety. I think we had a fire extinguisher in the kitchen. Well safety like strangers, yeah and I got one of the worst spankings from my mother because I went from one house to another house and forgot to call her and tell her where I was. You know, on the old-age phone, on the phone- phone, before cell phones and stuff that I was going. And she went looking for me, and she was angry. And I didn't know why, that was the key to most of our things, is we would get punished but we wouldn't really know why. It was not until I was an adult that she told me that there was a man going around, driving around and taking little girls and she was afraid. And – but that came

across as anger to me, and she never sat down—you know, she punished me and sent me to my room. (Participant 2)

Some participants described their safety education more as rules to follow.

Participant 2 stated her safety education was a “set of rules” and they just told her what to do and did not provide any plan of action if the threat occurred. Participant 3 stated “it was more like don’t do this” and also indicated no plan of action was given to him.

Participant 4 explained her mother had “very explicit rules that I was supposed to follow” but also indicated she was given some plans of action if the threat did occur.

Four participants (36%) reported being given plans of action whereas the remaining seven (64%) were not told about any possible plan of action should the threat occur. Participants 4, 6, 8, and 10 all indicated that they were given plans of action to take if they ever experienced certain safety issues. However, while participants 4, 8, and 10 did receive instructions to protect themselves, their parents covered limited safety topics. Whereas Participant 6 stated she did not live in the best neighborhood so she received safety education on “pretty much everything” she went on to say that “they told me things to do in case of pretty much any situation.”

The seven participants that reported their parents did not provide plans of action gave explanations. Participant 2 was told about the possibility of the threat but given no instructions or plans if it happened. Participant 1 stated she did not receive any plans of action because there was no perceived threat. Participant 3 stated “there was really not a plan of action.” He basically said he was just told not to do things and that was where it ended. Participant 5 stated emphatically that they “never” gave a plan of action.

Participant 7 stated that everything she learned about safety was because she participated in the Girl Scouts and Brownies. She did not learn anything about safety from her parents, in fact, she and her sister would teach the parents. Participant 9 seemed to indicate that many of those safety topics were not discussed because they did not have terms for stranger danger back then. She stated no plans of action were given. Lastly, Participant 11 stated safety was discussed such as look out for cars, but not a lot was discussed. She continued and stated that there were no plans of action. She also mentioned that stranger danger was not discussed either because they were at home all the time making the threat unlikely.

The previous question was designed to help determine whether the parents neglected to discuss safety issues all together or just CSA. The results indicated that participants 4, 6, 8, 10 and 11 were taught some safety issues, but not about CSA. The other six participants were not taught about safety issues.

The second question was *did your parents (mom, dad or both) ever talk to you about CSA? If they did, what did they tell you? If they did not, why do you think it was not discussed?* Participant 6 stated CSA was discussed by her mother, but described it as “if anyone ever hurts you, you know, come tell us.” Participant 6 does not remember them specifically saying if anyone touches your privates. The talk was more of a general instruction of if anyone hurt her; she needed to tell her parents. The participant did not fully understand the message, but did understand the plan of action was to tell her mother

if anyone hurt her. The other 10 participants reported that their parents did not talk to them about CSA and there was no plan of action.

There were four reoccurring reasons given by the participants as to why they thought their parents did not discuss CSA. Participants 1, 2, 6, 8 and 11 mentioned that their parents did not think it would happen. They did not perceive a threat of CSA. Participant 1 described that she lived in a small town. When asked why her parents did not discuss CSA she stated “I mean, I don’t think there was ever a reason to bring it up.” Participant 2 explained “well, all I can add to that is, it did not seem as prevalent back in the fifties, not going to say it wasn’t.” Participant 6 stated that “they [parents] did not think it would happen or I’m not really sure why.” Lastly, Participant 11 stated “part of me believes that my dad never thought about it.”

Participants 3 and 10 felt it was taboo or uncommon to talk about CSA because it involved sex. Participant 3 explained it was not discussed “probably because then it wasn’t something proper or common to discuss in the home.” Participant 10 discussed “it wasn’t something that they really discussed and looking back, I wish they had, or I wish they had said, if this happens to you, speak up or get somebody involved or whatever.”

Participants 4, 6, 7, 9, and 11 believed that their parents were victims themselves and therefore, did not want to discuss CSA. Participant 9 responded that her parents probably did not want to talk about CSA because “uh, I think that probably one or both had been sexually abused.” Participant 11 responded by saying “um, part of me believes it happened to my mom and she wanted to bury it.” Participants 4 and 6 felt their parents

were not comfortable talking about it. Participant 4 found out from her great aunt that her mother was a victim of CSA.

Participant 4 thinks mom did not talk about it with her children because “I don’t think she was comfortable.” In addition, she explained that her mother was “maybe hoping it wouldn’t happen to any of her kids.” Finally, participant 5 had no idea why it was not discussed.

The last two questions under education were reflection questions. They attempted to find out whether they felt education was significant in getting quicker disclosures. One question asked *do you think if your parents educated and prepared you more about CSA it could have made a difference in how you handled the CSA and do you think it would have led to a quicker disclosure, why or why not?* Seven of the participants indicated yes, it would have made a difference in how they handled it. Participant 11 reported yes it would have affected how she handled the abuse because “if it was discussed more in my household, I would have known it was an okay topic to talk about.” This idea was echoed by two other participants:

I think so, because it wasn’t a topic we talked about at all, and had it been, then I would have had something in my memory bank that said, oh, yeah. We talked about that and they said I should tell. (Participant 3)

Because the fact that they would talk to me about it would send me the message that this is wrong, and regardless of who’s doing it, you need to let us know. And then I would have felt that I would be validated, I would be believed, and that in fact it was such an important issue to them that they would educate me on it, that they would do something about it. (Participant 8)

One participant was torn on her answer regarding education and the effects it would have had on her disclosure. She explained:

Honestly, I don't know. I mean, maybe if I knew what was happening was wrong, like clearly this is wrong, maybe I would have said something. I don't know. Again, at that time, I knew things were being done in secret, but I wasn't afraid of them, I guess—I just—it's kind of hard to say. (Participant 1)

In contrast, three participants did not seem to agree that education would not have made a difference in how they handled the abuse:

I mean, I wouldn't- um, I knew what was happening. I was- I was old enough. I knew what was happening to me. Um, now, would them talking to me have convinced me to come forward quicker? Probably not. Um, I at the time, I mean, I wasn't even living with my parents at the time. So I mean, I probably wouldn't have just run to them and told them anyways even if we would have sat down and had a full-blown conversation about that specific person. (Participant 6)

Participant 6 said parental education would not have led to a quicker CSA disclosure; it was her personality that delayed her disclosure. This participant stated “I think because I've always been a strong-willed person and I like to handle my own problems, I don't like to put my problems on someone else. I dealt with in my own way.” Therefore, even with education she would have just dealt with her problem and not disclosed it.

Participant 9 experienced abuse when she was either two or three years of age. She did not seem convinced that education would not have been beneficial to her at such a young age. However, the abuse she experienced when she was older would have benefited from education:

That's an interesting question. I don't know. Um, I think I would have understood what was happening. Would I have been able to say no or yell or scream or run out, I couldn't have done that. But I might have had a better understanding of what was going on. (Participant 9)

Participant 2 was torn about whether education would have made her better prepared to handle the abuse. She explained that education would be useful relating to the abuse by the non-family member, but not when the abuse was by a family member.

I do not know any amount of preparation that could prepare you for a parent or grandparent to sexually abuse their granddaughter or daughter. I just don't know because these are people you're supposed to look up to and supposed to trust and it's real blurred. (Participant 2)

Theme Three: Limited Familial Communication

The daily lines of communication in the home were assessed in the first question which asked *growing up, how would you describe the daily line of communication in your home?* Seven participants (64%) reported that communication in their home was closed. According to one participant communication was inconsistent and closed:

Non-consistent, more closed, never knew—the rules changed a lot and things changed a lot. What might have been okay on the first part of the week wasn't on, or what was okay at home wasn't okay in public, vice versa. (Participant 2)

Participant 1 claimed to have had open lines of communication and stated, “If we needed to talk to a parent about something, we could do so.” Three participants said they had open lines of communication with one parent, but not both:

And then I communicated with my dad very well. Um, he- he listened and he would talk back and he gave great advice. Me and brother communicated like average teenagers, and me and my mom didn't communicate very well. (Participant 6)

With my father there was not much communication. It was the typical father worked most of the time, and even aside from that there was very little communication between my father and I. With my mother we had great

communication. We could talk about most things, although there were things that were off topic. We were not allowed to talk about sexual issues. (Participant 8)

With my mom, I feel like I communicated more on a personal level. You know, when I had problems with school, I would come and talk to mom. We went through mom to dad. We never went straight to dad. So that was closed. Half the time we were afraid to go to dad because of his anger issues. (Participant 2)

The second question was *would you say your family communicated on a deep level or more surface type communication?* The results for this question were mirrored by the first question which demonstrates validity of the question. One participant claimed they had a deeper level of communication and three reported they had a deeper level of communication with one parent in their homes growing up. However, the remaining seven participants stated the lines of communication were surface level:

We didn't really communicate very well at all in our home. But it was basically around basic needs communication, you know, like, where are you going, why are you going to have to go there, what are you going to be doing. Um, it was more like, um, active participation of whatever's going on kind of communication, but there was never any discussion of emotions or feelings or anything like that. (Participant 7)

I think communication could have been better, but communication was mostly in light of, okay, how are you doing in school? And, you know, what can we [children] do better and oh, by the way, music sounds cool, have you thought about that? Like that—more surface. Not really as in-depth as it probably could have been. (Participant 10)

The third question asked *did you feel like the lines of communication were open to discuss anything with your parents, including sensitive topics.* The findings indicated that five participants could not discuss sensitive topics with their parents. One participant

described the lines of communication were closed. She found out information from other sources:

School. We had in like the sixth, seventh, sixth grade; we had like a health education class that they told us all about that. And then in Girl Scouts we watched a video about that, and it told you, please tell your parents to go buy you these items [for puberty]. And so I did. (Participant 5)

We were not allowed to talk about sexual issues. So I was the third child of four sisters. Usually at home we had an older brother, but he was gone in the Navy so most of my communication dealing with sexual issues or even things like menstruation happened with my older sisters. (Participant 8)

Four participants could discuss sensitive topics. One participant describes:

With my mother yes, with my father no. He kind of left that up to my mom. Being from the Hispanic culture, the mom took care of that area. The mom is responsible for that area. (Participant 1)

Many participants did report that if sex was discussed they were told they would get pregnant, sexually transmitted disease, or that it was painful.

My parents did talk to me, but it was always the bad stuff. If you do- if you have sex, you're gonna get an STD or you can get AIDS or you can get this. I actually remember my parents taking me to my dad's friend's funeral because he was gay and he had AIDS, and they wanted me to understand this is what happens, this is what can happen if you get this disease or it was always disease this, pregnancy, baby. (Participant 6)

The only things that she [mother] would say and I think that this is what in her family they did was they would tell their daughters that sexual intercourse was very, very, very painful. That was the only thing we were told and I think it was just a way of kind of discouraging us from having sex outside of marriage or having sex period. (Participant 8)

Overall, parents seemed to communicate warnings or the more of the negative aspects about sex as a deterrent to their children.

To gain a better understanding about the level of communication within the family, there was a question to assess whether the discussions were commonplace in the home or very uncomfortable experiences for those involved. The question asked the participant to *describe the types of sensitive communication in your home including frequency and comfort level of these talks*. The results indicated that four participants explained there was no frequency regarding discussions about sensitive topics whereas, seven participants stated these discussions only took place as needed. Participant 11 talked about having only one talk with her mother, on each subject such as puberty and sex. There were no other talks. The participants were asked about the comfort level of the participant talking to their parents about sensitive topics. Four participants reported they were comfortable talking to their parents about sensitive topics. One participant explained:

Yeah. Again, if it was something very sensitive, I would talk to my mom about it, and I wasn't embarrassed about talking to her about it. And she wasn't embarrassed talking to me about it. (Participant 1)

Six participants explained they were not comfortable talking to their parents about sensitive topics:

No, I was not comfortable with that, and I don't think my mother was comfortable with that either. (Participant 4)

One participant was raised by his parents part of the time then his grandmother because the fighting escalated in the home. He described the conversations with his grandmother and his parents regarding his comfort level.

One thing my grandma was about, you know, I'm upset about my parents, I'm upset about their relationship. They're always fighting. But never about—so it's really more focus on other people more than it's,- I feel this way. Then with my mom and dad, not really [comfortable]. 'Cause I mean they were fed up with me talking about just normal, daily stuff, so certainly I wouldn't venture into anything high-level. (Participant 3)

One participant could not answer this question because the talks never happened. Next the participants were asked about their parents' level of comfort discussing sensitive topics. The six participants stated their parents were not comfortable and described:

It was just the facts. Well, I don't know that we ever had a conversation (Participant 9)

I mean, it really didn't --- it seems like she had a --- her dad was very intense, very in her face, very dominating type, so I think she only wanted to talk about certain issues, certain things, and that was on her list and moving on. It's unfortunate. (Participant 10)

Only two participants identified their parents as comfortable. Three participants could not comment on their parent's level of comfort during these discussions because those talks did not happen.

Participant 2 was comfortable talking to her parents but they were not comfortable talking about sensitive topics so those talks did not happen often. Participant 10 stated he was comfortable but those discussions did not occur. Participant 6 mentioned she was not comfortable but her mother was comfortable. Participant 7 and 8 could not give input on their or their parent's comfort level because discussions on sensitive topics never happened.

Table 2

Parental Communication about Safety and CSA

Participant	Open/ Closed Communication	Parents Comfort Level	Participants Comfort Level	Education on Safety	Education on CSA	Plans of Action
1	Open	Yes	Yes	No	No	No
2	Open with mom	No	Yes	Some	No	No
3	Closed	No	No	No	No	No
4	Closed	No	No	Some	Some	Yes
5	Closed	No	No	No	No	No
6	Open with dad	Yes	No	Yes	Vague	Yes
7	Closed	Never happened	Never happened	No	No	No
8	Open with mom	Never happened	Never happened	Some	No	No
9	Closed	No	No	No	No	No
10	Closed	Never happened	Yes	Some	No	No
11	Closed	No	Yes	Some	No	No

The last question in this section asked the participant to *describe the lines of communication when there was a problem or crisis to deal with in the family*. The participants described three types of communications they experienced in the home during a crisis. The first group described the children and the parents communicating about the crisis. Participant 10 said “we --sometimes she would have a meeting with all of us, but sometimes she would talk over our heads and, like okay.” Participant 1 stated during a time of crisis “we talked about it.”

The second group discussed how they were present for conversations, but not included:

When my grandmother died, we knew nothing about it until mom and dad both together came in and told and I was seven, my brother was nine. It was his mother and he got a phone call and he went up there and nobody said anything to anybody. You know, mom did not say anything and we just—she just sent us into our rooms and acted like everything was fine. (Participant 2)

So we [children] were never really sat down and talked to about it, we just knew about it because it was discussed with other adults, other extended family members that we just happened to hear what was going on, but it was not something that the children were sat down and discussed with and talked about. (Participant 8)

Participant 4 clarified she was present for discussions but did not really give input because of how her mother reacted. Participant 4 explained how a crisis was addressed in her home:

Oh, no. It would be discussed. My mother –my dad was very much the laid-back one and nothing ever seemed to bother him, and my mother was more high strung, you know, we've got to resolve it. She's just really—she was very high strung. To the point that if it was something that was really, really bothering me, I'm like, I'm not going to even—I wouldn't tell her because she was high strung because I was, like I don't even want to upset that. (Participant 4)

The last two participants described that although they were present they really did not get to give input into issues. Participant 6 stated during a crisis her father was calm and her mother “was yelling and screaming and cussing and throwing stuff.” She indicated her mom seemed to run the house. Another participant seemed to echo this same sentiment except it was the father that ran the house:

I was raised in a domestic violence home, so anytime they had a conversation, it was violent. Yeah. So they didn't want to talk about much because if they did, it turned into a fight. So my mother would always take care of things and make sure everything was taken care of. (Participant 7)

The last group of participants described parents talking in private and not communicating with the children:

So when there was a problem or crisis in my very young years regarding my mom and dad [fighting], the solution was, oh, either go to my grandma's house or actually from the ages of eight to ten we lived next door to my paternal grandparents, so I would go over there. (Participant 3)

I would never really see them talk about anything of a deep issue or important issue. I know they did because they would come out and say we have decided on x, y, and z, but they never discussed it in front of us. (Participant 11)

Two participants described being excluded regarding any family issues. Participant 9 explained if there was a problem or crisis in the family “I would never have known. Lastly, Participant 5 described “I was not involved in a lot of things. It’s like I didn’t exist.” She described herself as insignificant within the family.

Theme Four: The Level of Familial Support

Many participants felt like they had limited or no support in the home. This lack of support seemed to affect whether they disclosed the CSA. Four supporting themes emerged from the data which included parental reactions to the disclosure, the concern that they would not be believed, the fact that the participants had no one to confide in about CSA, and the changes that resulted from the disclosure.

The level of parental support was demonstrated in the reactions of the parents once the disclosures were made. The level of support was evident in two ways. First, the parental reactions to the disclosure of CSA demonstrated the level of familial support. Second, based on the disclosure did the participant get the support he or she needed. To gain a better understanding regarding the levels of parental support participants were asked *can you explain your family’s reaction to the abuse and if there were any changes in your life as a result of the abuse being revealed?* The findings indicated the parents had many reactions to the abuse, both supportive and unsupportive. Each seemed to have

an impact on the participants. Some of the supportive reactions included surprise and shock which was acknowledged by three of the participant's parents:

Her [mother's] reaction was surprise and shock and why didn't you tell me? Um, you know, it was a strain to have told. I was at a point-I was at a point in my life where I feel like I had no other alternative but to tell, as strange as it was. (Participant 3)

Participant 2 and Participant 6 described their parents' reaction as supportive:

Um, now that I think about it, I think my mother didn't speak of it much because from what I heard, after, you know, many years later, you know, things like this happened to her when she was younger. So it was probably a sore subject for her too because she didn't tell anybody. So she honestly wasn't mad at me when I didn't tell anybody. She was upset, but she understood. I felt like she understood me. (Participant 6)

Three participants reported that their parent(s) were disappointed their child did not come to them. Participant 4 stated she remembered "the disappointment from my mother because she would ask me and I would tell her no." Participant 4 did not admit the abuse to her mother.

Guilt was another reaction common to three parents regarding the CSA. They blamed themselves for not knowing about the abuse or being able to protect their child:

She [mother] was devastated by that. But again, she doesn't know details. She doesn't know who, and she doesn't know about the others. She only knows about one. But she blames herself. She kept asking herself why she didn't know. How could she not see it happening? You know, she said that if she would have known, she would have never left me alone with them, but—I mean, so she feels guilty about it, but I've told her it's not her fault. (Participant 1)

Um, and she [mother] actually kind of blamed herself for a little while because she would –she would have him come over and stay with me because I was pregnant and my, you know, father of my son, who is now my husband worked nights and someone tried to break in. So she would have him come and stay

because he didn't have a job, he didn't have kids, you know, he had nothing else to do. (Participant 6)

Sadness was also another parental reaction reported by participants:

My mom took me to her bedroom and she told me that – she had talked to my sister first. Your sister told me you—that your brother used to sexually abuse you. Is that true? I'm like yeah. And she just burst out into tears and she was I'm so, so sorry, that's how I told my mom. I was like, yeah okay, it's no big deal, I'm kind of over it, moving on. Didn't want to talk about it. I think the fact that she burst into tears and was just sobbing and I was like, okay, are you done crying yet, I kind of want to go back to my room. (Participant 11)

Unfortunately some participants endured negative reactions from their parents to them personally. Participant 8 experienced a hurtful reaction from her mother:

When I revealed to my mom at age 30 that I was—that I realized what had happened and why I would say no peeking, my mother was very defensive of her brother and said well, that happened a long time ago and, you know, he's not well and so there's no point in bringing it up now. And my mom and dad were going to be celebrating their 50th wedding anniversary and she was inviting my uncle to come and I asked her not to do that and she said ---- I was pretty much discounted – that it had happened, again, a long time ago and, you know, it would only hurt his wife if I were to reveal it, the abuser's wife. So it surprised me, because my mom and I were very close and she had always been very supportive. (Participant 8)

Another participant experienced a similar sentiment from her mother:

By probably fifteen years ago, which was several years before my father died in two thousand, uh, I said something about the three boys. Their last name was XXXX, the XXXX boys. And my mother said, well, it happened a long time ago. Just forget that and get on with it. Classic! (Participant 9)

Yet another difficult reaction from a parent once the CSA was revealed was rejection by a parent. Unfortunately, one participant had two different incidents where her mother rejected her. She described her mother walking in on her father abusing her:

And, uh, she [mother] took me and threw me across the room, and like off the bed and across. I hit the wall and I am watching her start a fight with him and – and, uh, he was like saying – you know, he was all smirky looking. Oh, she'll never remember, you know. You're being – you're upsetting her. And look, she's getting upset 'cause look how you're behaving, and oh, you're making a big deal of this. She'll never remember things like that. So she just sat on the bed and – because she'd been fight with him, her hair was all messed up. She was just sitting there, crying. So that's the memory I had. Well, when I went and saw her crying, I went to her to comfort her. I was like knee-high to her, was this big you know. And, uh, I went up to try to comfort her, you know like kids do when their mom is crying. And when I approached her, she shook her head and slammed me back away and said I don't want anything to do with you. And so she saw me as like damaged, damaged and dirty, you know. (Participant 7)

Then after her mother found out about abuse that her daughter experienced at the hands of an adult female she described:

He [father] came in and she [mother] was on top of me, just beating the crap out of me. And he came home from his job, so he pulled her off of me. And, uh, you know, of course, she screamingly told him how I was a queer, that I was a lesbian, and I was this and I was that. We needed to get me to a psychiatrist. And it was horrible. It was really, really horrible. (Participant 7)

One participant discussed feelings of not feeling protected by her parents:

Because the other thing that didn't change when my mom found out was my brother wasn't kicked out.....So it was she [mother] listened to what I said and not what I was feeling and what I thought, I was, I guess you could say communicating, that she just didn't do anything. (Participant 11)

Data were missing for participants 10 and participant 5 because they have not revealed the abuse to their parents.

No One Would Believe Me

Many participants had deep concerns about not being believed about the abuse by their parents. Participant 5 would not disclose to her parents because “they wouldn't have believed me. Never! Mr. God [her brother] couldn't make mistakes. He wouldn't do

something like that. This guy was on a pedestal because he was the oldest boy and he was a boy.” Other participants conveyed this same sentiment:

Oh, yeah. I –I don’t think my parents –I don’t think they would have believed me and I worried about them believing me in my adult life when I told them. And one of the main reasons why I didn’t tell them about grandmother for sure was what good does it do them? (Participant 2)

I didn’t want my parents to—I didn’t want to tell them, I wanted them to find out. I wanted them to walk in and he’s [brother], you know, beside my bed begging me for sex, or some other way they’re going to find out that I didn’t tell them.... I did not think they would believe me. (Participant 11)

One participant described expressing deeper feelings such as sadness was unacceptable:

And I – if we were crying, we were told that that’s not-we don’t cry, and so we were supposed to be happy and that’s it. I learned how to be happy really well. Think happy thoughts. Oh everything is great. It was hard when there were sad things going on. We would secret cry. My sister cried in the shower. I cried in my pillow, you know, ‘cause you didn’t want anybody to hear it ‘cause you got a lecture of how it’s not appropriate. Nobody cries. Nobody cries. (Participant 7)

No One to Confide in About CSA

A reason reported for delaying disclosures was three of the participants did not feel like they had anyone they could disclose the abuse to. For instance, participant 2 explained why she delayed disclosing the CSA “I’ve never felt safe that I could tell them.” One participant began reflecting back on her relationship with her mom and what she might have said if they had a close relationship:

You know, this is what’s been happening to me because of how I look. What do I do? But honestly, by the time most of this stuff started happening, I think she wasn’t even around to talk to. So the communication wasn’t there. (Participant 6)

Another participant described how he did not feel he could talk to his parents due to all their marital issues:

And I didn't really even when I was young talk a lot because to them- because most of what they – that I knew they were stressed and strained in their marriage. I knew there were a lot of problems and everything I got from them was that I was an added strain, like you talk too much already. We have our own stuff to deal with. I didn't feel- I didn't feel comfortable at all. Even when I was little, I still know I didn't feel comfortable because they were already under enough. (Participant 3)

Participant 11 stated she did not feel like she could talk to her parents because “my parents never made it known to me or any of my siblings that we could come and talk to them about anything.” Participant 6 stated “I did not feel like I had anyone to tell that. I mean, my dad would have cared, but I think it would have broken his heart too.” Not having anyone to confide in can impact the disclosure of CSA.

Changes Following a CSA Disclosure

Participants were also questioned about whether there were changes in their lives as a result of revealing the abuse? Changes in their lives included:

I guess it made me hypersensitive to all children and abuse and particularly in that culture where parents don't talk to their children about things and seldom ever think that a family member could be to blame for this when we know statistically that it's very high. So how it changed things is I was actually going through a divorce at the time and I realized that I had boys—that regardless of the fact that they were boys, I was also going to be hypertensive with them in that area as I raised them. And all my nieces and nephews, I was always very hypersensitive with that. (Participant 8)

When my dad found out, it was kind of the same [as her mother], okay, everyone has forgiven each other, let's not talk about it. So that didn't really change except for I had a closer relationship with my dad. Like, he understood why I was who I was and, you know, the whole family dynamics of what was going on. He wasn't in the dark anymore. (Participant 11)

Theme Five: The Environmental Stressors

The reflection question in this section explored parental communication to investigate whether participants felt it had any bearing on whether they disclosed the abuse. This question asked *do you think the lines of communication in your family had an impact on when and if you disclosed, please explain*. The participants were pretty clear on this response. Ten out of eleven participants stated the line of communication in their family had an impact on when and if they disclosed. A couple supporting themes developed from the data. They included unstable family environments and limited time with parent(s).

Unstable Family Environments

All participants stated their family environment contributed to their delayed disclosure. Regarding communication, 8 of the 11 participants mentioned family stressors in the home such as domestic violence, marital discord, divorce or separation, financial hardships, or having a parent that was disabled (participant 5 and 8), chronic illness (participant 6), or dying (participant 4). When you examined the lines of communication within the homes with family stressors six participants reported the lines of communication were closed. Participants 2 and 8 reported having open lines of communication; however, the family stressor was domestic violence. Both stated they could talk to their mothers yet neither of them disclosed the abuse until adulthood.

Participants 1, 9, and 11 did not provide any indication about family stressors within the home, yet still there was no disclosure made in childhood. Participants 9 and

11 basically described an intact family unit that lacked communication. However, participant 9 does convey that her father was violent to her and her brother.

Communication was closed between the parents and children. Many participants discussed unstable family environments usually the result of family stressors:

My memories of that time in terms of communication, lots of strained, lots of fighting among parents, lots of, um yelling at me, it was just like a very high stress level, uh, but still you know firmness regarding schoolwork. It felt like, uh, just not a lot of comfort and sharing. (Participant 3)

I developed very early and so the family was all, you know, - I had a very harsh family. One side did not like the other side 'cause they were black.' One side didn't like the other side 'cause they were white, and I was kind of thrown in the middle. So I got the, because I was large-chested at a young age, Oh, she's going to have a baby about this age, and she is going to be doing this. So I just didn't talk to anybody very much. (Participant 6)

My my, I was raised in a domestic violence home, so anytime they [parents] had a conversation, it was violent. Yeah. So they didn't want to talk about much because if they did, it turned into a fight. (Participant 7)

In contrast, participant 1 had open lines of communication, no family stressors, and family support yet still made no disclosure of abuse. This was attributed to a lack of education about the threat. She explained how she was confused about the CSA and whether it was right or wrong. Also the fact that it was a family member who was trusted by the family and there were no threats left her very confused. She stated she did not go to her parents because "it never crossed my mind to. It just doesn't." She did not even consider this even though she was very confused.

Limited Time with Parent(s)

Several participants used the words busy, unavailable, and uninvolved to describe their relationship with one or both parents.

She [mom] got the house in the divorce and, thankfully, we had other funds, but it just--- she wasn't involved and then you have that --I didn't really have anybody I could talk to. I was the oldest and didn't have an older brother or sister to talk to. (Participant 10)

Um, my parents separated. She moved out pretty much because my dad couldn't work, um, and I guess that frustrated her. So she moved out and ended up living with one friend and then moved in with another friend, then moved in with a boyfriend, and so it was really hard to keep track of her. And I just did not care to keep track of her. We did not get along. (Participant 6)

And when I think about it, my older sister got pregnant out of marriage at 16, my youngest sister got pregnant out of marriage at 16, um, but I became promiscuous and I think that was a factor of what happened as a child and my father not being involved. And so there was no—you know, looking for men in all the wrong places. I think I was looking for my father. I was looking for—and so then I was easily swayed. (Participant 8)

Participant 10 stated he thought the lines of communication in his family were impacted when he disclosed because “the lines of communication in my family were closed to start with. Even to this day we talk infrequently.” He described:

I love my mom dearly, but I think it's more after I got to college or beyond, but I think she was a bit overwhelmed and working and didn't have time for those heart-to-heart discussions, except as it related to education and arts and things like that, but not when it came to really personal issues. (Participant 10)

In contrast, there was one participant that did not think the lines of communication impacted when she disclosed:

I do not think it was the communication because, again, I could talk to my mom about other things like, you know, my period or what that would feel like or what

I needed to do, and she would answer it, you know. I mean, she would tell me what I needed to do and I could ask her questions, hey, what does this mean or what does that mean? (Participant 1)

Theme Six: Cultural and Religious Barriers to Disclosure

Since culture and religion has an impact on many families, participants were asked if *any cultural or religious beliefs prevent or delay you from disclosing. If yes, please explain.* The participants did indicate that religion or culture hindered them from disclosing the abuse. Five of the participants stated that neither religion nor culture played a role in their delayed response. Whereas, six participants indicated the religion or culture did play a role. Participants mentioned that culture played a role in delaying their disclosure:

Well, being of Hispanic descent, we—again, at that time children were meant to be seen and not heard. I didn't think that my parents would value what I was saying, especially at that age. I think that I thought they would think, oh you're just making this up, or even if they did believe it, our culture is very private; you don't tell anyone those things. And so I think even back then I thought even if I were to say something, nothing would get done and then it would be worse on me with my uncle. (Participant 8)

I think culturally, my 20's and my teens are –after that because it was really not positively received to say that you were an abuse victim or something like that, people thought you were like a wacky person or something was wrong with you or you could have stopped them or whatever. (Participant 10)

Religion also seemed to play a significant role in the delayed disclosure of the participants. A supporting theme of forgiveness seemed to be common among the participants. One participant explained:

I think that [religion] played a part, because I grew up in a Christian home. Because we were always taught to forgive, forgive the people that hurt you, and I

did. I mean, I was in my teens. I had forgiven them. I still had contact with them, I still saw them. You know, maybe not on a daily basis, but we lived in the same town. (Participant 1)

You know, if something bad happens to you, you ask forgiveness from that person. Even if you don't ask it from that person, you do your best to forgive them because it's hurting you more than it's hurting anyone else... That is some part of forgiveness the Bible says, but that also is one of the reasons I believe we didn't report it, because everyone forgave each other, let's just not talk about it anymore and it doesn't affect my mom or dad, it doesn't affect my other brother, because they weren't involved. But it is in my memories, it's in my sister's memories, because he did it to her too, and it's in my brother's memories, so it only affects three out of six so let's just leave it alone. (Participant 11)

Another supporting theme that emerged from the interviews concerned sexual purity. Many participants were taught to remain sexually pure until marriage. Participants that experienced abuse wrestled with how to reconcile the premarital sexual relations:

The only things that she [mother] would say and I think that this is what in her family they did was they would tell their daughters that sexual intercourse was very, very, very painful. That was the only thing we were told and I think it was just a way of kind of discouraging us from having sex outside of marriage or having sex period. (Participant 8)

And then from then on it was you're not having sex until you're married, don't have sex until you are married, you can't have sex until you're married, you have to be married to have sex, however, you want to put that, that is how it was said. So it wasn't ever an open topic of, okay, what happens if it-- you know what happens if it happened before you're married. (Participant 11)

One participant described the negative effect that religion had on her:

And growing up Catholic, I was approached by two priests for sexual—who sexually advanced on me. So my perception of men became distorted. And again, here was an area that my mom didn't get. She thought the priests were coming over to see her because she was such a good Catholic. The truth was they were coming to see me. (Participant 8)

Another participant discussed how his religious upbringing played a large part in his life and the feelings it generated in him regarding the CSA:

You know, I think at first, before I told, that um, just shame and guilt. You know, and this is just a personal opinion and not, you know, something I'm trying to – but I think having grown up with a Catholic background, I think shame and guilt played a huge part in my life because of the lack of understanding of grace. And so I didn't, um, I didn't give myself grace and so certainly I wouldn't expect anybody else to give me grace if I told. But a later understanding of what grace is and means caused it to be freeing to tell. (Participant 3)

Theme Seven: The Emotional Effects of CSA

There were many emotional responses that were elicited by the CSA. This area was explored to see if any of the emotional responses that were elicited from the CSA impacted disclosures. The last question asked under the abuse section was *what feelings or thoughts did you have about the CSA when it was occurring compared to now reflecting back on it as an adult?* Several supporting themes emerged such as feeling dirty, worthless, fear, self-blame, helplessness, guilt, shame, and anger were common feelings shared among the participants. The participants articulated many feelings that they experienced during the abuse:

I was insecure, um, I felt dirty, worthless, and I didn't understand why it was happening. Uh, I – I knew at some point in my life, I got to where I kind of stayed the hell away from home when they were there. (Participant 5)

Fear. A lot of fear. I was very afraid of him. I felt shame because I knew it wasn't right. That's why I kept saying no peeking, because I didn't feel right, it didn't feel comfortable, it didn't feel like he was doing it because he loved me. So a lot of shame, guilt and fear and kind of a sense of feeling stuck that I couldn't tell anyone. And thereby not being able to tell anyone, it was going to continue. (Participant 8)

And I felt like it was kind of my fault, especially the two incidents in high school. I shouldn't have been drinking. I know that. I mean, that's my fault that I got to the point that I got to and ended up not remembering anything from that. So I felt like I kind of deserved that. That was my fault. (Participant 6)

Shame. Yeah, shame, fear, uh, sense of, uh, wrongdoing. 'Cause after a certain part, you become the willing victim, and actually seek it out because you're so involved in it. That was the point of grooming... I was actually kind of more drawn to the attention that this person gave me than anything else. (Participant 7)

Oh I had an enormous amount of shame. Well, there's terror and fear and anger and sadness. Lots of sadness.... The sadness is a lot of grief for the lost childhood that I had and the anger is rage in a lot of ways because I – there was nothing I could do about it but I did think it was my fault, several of the --- especially the farm scene. (Participant 2)

The CSA caused many of the participants to experience anger. The anger seemed to be spread out in many directions. The anger described by the participants was towards the abusers, the parents, and the participants. Several participants shared their anger:

She [mom] talked to him [perpetrator], you know, the –I said oh, okay. She said yeah, he will never come – I said mom, this, you know, ended years ago. She said you know don't worry about it. I was going, well, is he alive? She said yeah. Yeah. I said okay. And then she talked to my oldest sister about it, my oldest sister, um she didn't tell me immediately but told me awhile later, um, mother beat him with something from the yard, a rake or something, and –but she also told me do not ever let your father hear about this and I said why not? She said because, you know, he's a very laid back person, but he will kill him. (Participant 4)

My mom never asked why I never wanted to be around that person again. She knew there was –I was in athletic training, and I ran marathons and stuff like that. It never came up—he coached me and stuff like that. Never came up after that. That's another sad point. I would never let parents let their kids go with somebody if they didn't really know that person really well. Have emergency contacts where kids had the ability to call them or get ahold of them and couldn't have honest discussions. And that is the sad part. I think it's – when you're an absentee parent, you're a single parent and trying to make enough money, real

estate and other things to pay the bills, and your still trying to have the fake—the look and appearance that your living in a upscale household which , we did in Arcadia, California. (Participant 10)

She [PE teacher] all at once drug me down to the office [about the CSA], got the school counselor down to the office and called my mother to come up there, made me sit in the hall. Oh, they told my mother. My mother's in there screaming like a banshee or something, you know. She was just totally not good. And I just thought, oh hell. This is hell. It's fixing to break, you know. Well she pulled it together enough to them to make them think oh, I'll take care of this. And she knew how to play the good role. And so she got me home and almost killed me, literally. She beat the crap out of me. But my dad came home right in the middle of it, thank God, or she would have killed me. She did not deal with it well. (Participant 7)

Unfortunately, some of these emotional responses created negative feelings, thoughts, and self-images in the participants. Some of the emotional effects created years ago were still an issue for some of the participants today based on the responses of the participants.

In this study, 7 out of the 11 participants were six years old and under when they experienced the onset of CSA. The ages of onset reported by two participants were between two and three years old, five participants were between four and six years old, three participants were between 8 and 10 years old and one was 16 years old. This study examined the age of onset of abuse to determine if this characteristic of abuse could delay a disclosure of CSA. The findings indicated the participants that experienced an early onset of CSA had longer delays in disclosing. For instance, participant 5 took 65 years, participant 9 over 40 years, participant 2 about 37 years, participant 8 between 23-25 years, participant 1 took 31 years, participant 7 over about 20 years, and participant 4 about 14 years. In addition, since each participant was a child when the abuse occurred, a supporting theme of confusion also emerged from the data.

Theme Eight: Fear of Consequences

Many participants discussed not disclosing due to a fear of the consequences. Clearly there were reasons the participants carried the secret with them for many years. Participants were asked *can you explain the circumstance or reason that you delayed disclosing the abuse*. The participants explained many reasons for not disclosing. The two themes that emerged from the data included fear and protection of others. Many referred to a physical fear of harm to self or others. For other participants, protection of others was not motivated by physical fear, but rather out of love to protect them from the burden of the secret.

Fear

Fear was the number one reason expressed by these participants as to why they did not disclose. Participant seven stated she had a “fear of retribution from other people, a fear of reactions, and a fear of being exposed.” The fear reported by the participants described a physical fear of harm to self or others.

He told me from the start if I told anybody, he'd kill me. We had some cats, little – little baby kittens, and he drowned them, in front of me and said if you tell anyone this is what I will do to you, I'll kill you. (Participant 5)

My uncle had been diagnosed with a mental disorder, and back in those days they did shock treatment, and I remember hearing my mom talk about when my uncle would have these episodes that he would have this incredible strength where he could pick up a car, he could—so I would hear my family talking about the things that would happen when he would go through this emotional crisis and I was thinking okay, he's very strong when these things happen and he's also threatened that if I told my mom or my dad he would kill them, so I had no reason to believe that during one of his mental episodes he wouldn't do it. So I felt like in order to protect my parents, I couldn't tell anybody. There were times he would show up unexpectedly even with my mom there and he—it was difficult because he would

look at us knowing—almost saying you know, we have a secret and you can't tell and I'm right here with your mother and you see how close I can get to her if you ever tell. So I think there was a lot of manipulation and a constant threat of fear. (Participant 8)

Protecting Others

Protection was specifically given by five of the participants that reported not disclosing the abuse to protect someone they loved. This protection was not generated by fear. Participant 1 did not disclose the abuse in an effort to protect loved ones. Participant 1 stated "I wasn't going to let my mom or father be hurt by that." In reference to her husband, participant 1 stated "I don't think he needs to be burdened with what happened to me." Participant 3 stated "I was protecting a lot of people. I was protecting my grandma. I was protecting my dad. I was protecting the perpetrator. I was protecting the bigger family." Most of the participants carried the secret for years to protect others or themselves:

My dad would have cared, but I think it [CSA disclosure] would have broken his heart too. Out of compassion, I didn't want to hurt him. I didn't think- he was – he was very fragile. He was, um, diabetic. I mean, he was always sick. I didn't feel like he needed any more than what he already had. (Participant 6)

I didn't say anything about my foster brother because that was the first incident and I was truly scared by it. I was really young and I didn't think my mom would have believed me anyways. And then I think I didn't say anything because I knew, even when I was young, I know that if I said something about him, that would have brought in the foster representative, or whatever they're called, and, you know, maybe I'd be taken away because my mom was not paying attention or, you know, there were other children in the home, um, that were even younger than me, you know, and them I did care for. They could have been taken away. Or, you know, I guess I was just afraid of what could have happened if I would have said anything. Um, as far as the other ones, I –I just didn't. I didn't feel like I had anyone to tell that. I mean, my dad would have cared, but I think it would have broken his heart too. (Participant 6)

For my mom and dad, I—there was—I didn't want them to be –I knew my mom would be devastated if she found out. Not only about one, but three of her brothers. I think it would have just devastated her. And I know my grandmother would have taken matters into her own hands, so do you – can you say I was trying to protect them? Yeah, because I knew how angry my grandmother would have been, but I didn't want to see my mother hurt that way. (Participant 1)

The fear for self or others rendered many of the participants helpless to reveal the abuse.

As a result, they held the secret within them for years.

Theme Nine: Quicker Disclosures

The second question asked *can you explain the circumstances that prompted you to disclose the abuse*. Four participants reported they disclosed to protect a family member or because abuse of a family member occurred. Three participants said remembering the abuse they repressed was what prompted them to disclose. Participant 3 stated a new job prompted him to disclose. Lastly, participant 5 stated she has poor health and wanted to make the offender be held accountable for the abuse after all this time.

Again the goal of the research was to learn how to facilitate quicker disclosures so participants were asked reflecting back on that time, *what would have made you more likely to disclose sooner?* The participants mentioned four things that would have led to a quicker disclosure which included better or available communication, family support or intact families, education, and removing the threat. Four participants described better or available communication would have helped them disclose sooner.

Um, just having someone available that just said, let's talk, you know. 'Cause I just didn't have that. We didn't talk. (Participant 7)

A better relationship with my mom. If, um, - I mean, maybe- maybe if my family was still together. I mean, we were all spread out. Me and my brothers stayed with my aunt. My dad stayed with my great-grandma to take care her. My mom stated with whoever would let her. (Participant 6)

If there had been an environment for discussing issues, any kind of issue. If, um, you know, I made a lower grade than usual; I didn't talk about that either. Well, 'cause I would have been in such trouble. My father was pretty violent during that period. (Participant 9)

Yes, I feel like if my parents had been more open and able to talk about all kinds of subjects, that if—I don't know that all the abuse would have happened had that been – had that environment been provided to me. (Participant 2)

Four participants mentioned more family support and intact families.

Maybe if my family life would have been more stable and not having so much turmoil within the household. The feeling of safety to be able to talk to my family would have been nice, you know, and could have made it easier. (Participant 3)

You know, I think if I had more supportive –being listened to and didn't feel like you know, what I wanted to talk about or what I had an issue with was this little thing and you just need to get over it because you're a kid and your opinion doesn't matter, I think, you know, as a kid we are –our opinions and our beliefs and all that was nourished to where you can make your own decisions instead of following mom's rules all the time, than it would have been quicker to disclose. (Participant 11)

Two suggested education about CSA would have assisted them in disclosing sooner.

But I think if she [mother] would have been more calmer and just not making a big deal, but talk about it frequently, um, I think that would have – and not made it such a taboo – subject, then I would have probably said something sooner. (Participant 4)

Honestly, I don't know. I mean, maybe if I knew what was happening was wrong, like, clearly this was wrong, maybe I would have said something. I don't know. (Participant 1)

One participant stated removing the threat would have led to quicker disclosures for her.

My uncle dying. My uncle being out of the picture, nowhere to be found. Because he would not be able to threaten my family. Yeah. I think – I think the only thing that I think could have happened at that time is if he would have been out of the picture and not a threat. (Participant 8)

The follow up question was *as a survivor of CSA, who is now a parent, what would you do, if anything, regarding your children and the subject of CSA?* The participants gave four steps they were implementing to help their children in the area of CSA. Nine participants were practicing open lines of communication about CSA and other topics:

I am constantly telling him you can tell me anything, good, bad, you can always tell me anything. And I always give him examples. Like, if someone says, hey, I'll give you \$20 if I can see your private parts. I always give him examples so he knows what I am talking about. This is not appropriate, this is not right, this is wrong. So I always tell him, you know, you can tell me, you can tell daddy, or tell an adult. So I always reinforce that. (Participant 1)

I would tell him. I would talk to him about what it is. I would talk to him about, um, depending on what age, I would let him know that things happened to me and I don't want certain things to happen to him. (Participant 6)

Nine participants were educating their children about CSA and providing plans of action.

I give him examples of – we've talked about what sex is and that sex is something that stays within a married couple, and that it's not—nobody should be touching anybody in their private areas. Whether, you know, if they offer him candy, you know, money, or whatever, or even threatening him, that he needs to tell me or his dad or a parent, I mean – I'm sorry, an adult. (Participant 1)

And I believe that my husband and I had told her, you know, if somebody tried to touch you, scream, yell, kick, kick like hell. And as she got older- course, she is six feet tall. All she'd have to do was kick them in the crotch and they'd go to the ground. (Participant 5)

I would do what I've already done and teach them if anybody tries to touch them in the area where their bathing suit – that's what we say instead of calling it private parts, but I have actually said that [private parts] when they have gotten older. (Participant 2)

Five participants stated they are more aware of who was around their child.

My own sons I do the same thing, you know that never put them in a situation that they would – and if they got in a situation like that, they came and told me and we took care of the problem. (Participant 2)

Um, but I would also take preventative measures. I'd keep him, you know, out of situations that I don't feel comfortable with. If I don't feel comfortable with him being at someone's house, he won't go. I'll be more strict, more stern, more—but at the same time, the type of mother you can come to and you can talk to. (Participant 6)

Lastly, one participant felt providing a stable home environment for the child to feel safe to tell was the best way to achieve a quicker disclosure.

Oh, yeah, that's also the upbringing. That's also the household too. I think the household and the communication and the safety that they feel in the home would make it more conducive to them telling. But then when you also talk about the subject because you've been through it, then it makes it easier too. (Participant 3)

Data were missing for two of the participants because they do not have children.

The researcher used the transcripts, demographic form, field notes and data analyst (cross checker) to compare these points of data with the literature and found some discrepancies. The findings in this study disagree with the research that states the relationship to the abuser impacts when the victim delays disclosing. Another discrepancy was that the severity of the abuse did not contribute to delayed disclosures.

Summary

This chapter addressed the results of the findings in two parts which included the data from the demographic forms and from the interviews. The first part of the chapter reviewed the demographic data. The researcher provided an in-depth description of the

participants and their home life. The second part of the chapter included findings from the rich data obtained from the interviews conducted with each participant. The study focused on parental education and communication to explore whether they impacted when and if a CSA disclosure was made. In this chapter, the researcher offered demographic data about the participants, the essence of the interviews, and a narrative of themes that developed from the data collection and subsequent analysis.

CHAPTER V

DISCUSSION AND CONCLUSIONS

This qualitative study explored the delayed disclosures of 11 adult survivors of CSA to gain perspective as to whether parental communication and education would have led to quicker disclosures. To facilitate this exploration, in-depth interviews were conducted separately with each participant to address the following research questions.

R1. Do CSA survivors believe that educating parents on CSA and the factors that contribute to delayed disclosures would lead to quicker disclosures of CSA?

R2. Do CSA survivors believe that the time between the incident of CSA and the disclosure would decrease if there were open lines of communication about sexual issues (puberty, sex, sexual abuse) between parents and their children? These interviews were transcribed, analyzed, and coded for themes.

Discussion of the Findings

The participants provided rich narratives that explained their experiences regarding delayed disclosures. Through the data analysis of the demographic forms, field notes and transcribed verbatim transcripts, nine major themes emerged. These themes included: The Prolonged Process of Disclosure, The Limited Parental Education about CSA, The Limited Parental Communication, The Level of Familial Support, The Environmental Stressors, The Cultural and Religious Barriers, The Emotional Effects of

CSA, The Fear of Consequences, and The Movement to Quicker Disclosures. Each of the major themes was addressed.

Prolonged Process of Disclosure

In this study there seemed to be several possible contributors that added to the prolonged process of disclosure which included the characteristics of the abuse, repressed memories, future victimization, and same sex abuse.

Characteristics of Abuse

Overall, research supports the characteristics of abuse such as age of onset, the relationship to the perpetrator; the severity, frequency, and duration have an impact on delaying a disclosure. This study explored these characteristics to determine if they did impact disclosures. The findings in this research support some of the research.

Age of onset. Seven female participants in this study were sexually abused at the age of six and under. The time it took for them to disclose the CSA ranged from 14 years to 65 years old. Clearly, the participants that experienced CSA, in the early childhood group, had significantly delayed disclosing. This finding was supported by the existing research that found the victim's age influences the disclosure. More specifically, Alaggia (2010) found disclosures were more problematic when the child was sexually abused at a younger age. The fact that all of the females in this study did significantly delay their disclosures was supported by other research findings. Williams and Banyard (1997) found that females who experienced CSA at a younger age were less likely to make a disclosure of abuse. Other research held that early victimization was a reason for

delayed, accidental disclosures or nondisclosures (Nagel, Putnam, Noll, & Tricket, 1997; Sorensen & Snow, 1991).

Three participants were between the ages of eight and 10 years old (middle childhood) when they first experienced CSA. These participants included one male and two females. This group took 5 to 21 years to disclose the abuse. The male participant took 21 years to disclose. Overall, the study does support the earlier the participant experienced CSA the longer it took to disclose. This was evident by comparing the participants in the early childhood group with the middle childhood group. Five of the participants in the early childhood group took over 25 years to disclose and the other two disclosed within 14 to 20 years. The middle childhood group had three participants and delays consisted of 21 years, 17 years, and five years. This seems to be supported by Smith et al. (2000) who found that younger children who experienced CSA were more likely to have delayed disclosures when compared to older children.

In contrast, participant 10 experienced the onset of abuse at age 16 and is now in his 50's and he still has not disclosed the abuse to anyone except the researcher. This finding seems to contradict some research. For instance, Kellogg and Huston (1995) found that adolescents were more likely to make disclosures about CSA. Instead this finding was explained by other researchers who found that age did not have any relationship on whether a child disclosed or not (Arata, 1998; Kellogg & Huston, 1995). Widom and Morris (1997) concluded the age of onset of CSA did not have any effect on

the likelihood of disclosure. London et al. (2005) stated there are no consistent findings to indicate the age of CSA onset was associated with failure to disclose.

Overall, this study seems to support that CSA occurring at a younger age does lead to a delayed disclosure. Research supports that children who experience the onset of CSA at an older age typically disclose sooner (Arata, 1998; Widom & Morris, 1997). The participants in the middle childhood group did seem to disclose sooner than the early childhood group which is supported by research (Kellogg & Huston, 1995). However, participant 10, who experienced CSA at ages 16-17, demonstrated that a later onset does not always lead to a quicker disclosure. Participant 10 still has not disclosed the abuse to anyone, except the researcher.

Relationship to the perpetrator. Overall, the findings in this study support the relationship of the offender did played a role in the child delaying their disclosure. For instance, 9 of the 11 participants were initially or through re-victimization abused by family members. Each of them delayed disclosing the abuse for a significant amount of time. These findings were supported by Arata (1998) who found that the closer the relationship between the perpetrator and victim meant a disclosure was less likely. In this study, incest abuse was more common than abuse by a non-family member. Participants described someone, in most cases, that they were close to and loved. This finding was supported by Paine and Hansen (2002) when they stated “the victim-perpetrator relationship is not only most often a familiar one, but is also often an emotionally close and significant one” (p. 276). This close family relationship to the perpetrator caused

many participants to experience internal conflict. For instance, Participant 3 discussed how he did not disclose because he loved his grandfather and did not want to disrupt his family. This finding was maintained by Lawson and Chaffin (1992) who found intrafamilial CSA usually created an emotional conflict within the child about whether to disclose the abuse that would incriminate loved ones and disrupt the family. Furthermore, Malloy, Brubacher, and Lamb (2011) lend support that the relationship with the perpetrator can nurture feelings of devotion and dependence which impacted the child's disclosure.

Many participants described wanting to protect the perpetrator or others which is why they did not disclose. Participant 1 discussed not disclosing because these were her mother's brothers and she did not want to cause her mom or grandmother that pain. Participant 1 also mentioned that she was protecting her uncles because she felt certain her grandmother would have killed them if she knew. Likewise, Participant 11 did not want to report the abuse to authorities because she knew her brother would go to jail. This was reinforced by Malloy, Brubacher, and Lamb (2011) who found children do not want to disclose the abuse because they wish to protect the perpetrator from getting into trouble.

In this study all the participants significantly delayed disclosing the abuse regardless of whether the perpetrator was a family member or not. This study seems to conflict with the findings from Tang et al. (2007) who explained that victims of intra-familial abuse were more likely to have a delayed disclosure compared to extra-familial

abuse. This was not the case when both groups were compared in this study. Ironically, the two shortest delays in disclosing CSA were 5 and 14 years and they came from participants who were abused by family members. Therefore, while the study supports that abuse by a family member influences when the child discloses, the fact that all participants delayed disclosing regardless of whether it was intra-familial or extra-familial suggests that other issues are influencing when a child discloses as well.

Research also supports that the perpetrator was usually a parent or a parental figure (Sorenson & Snow, 1991); however, that was not the case in this study. Although nine of the participants were abused by a family member, only two were parents. The other seven participants were abused by other family members that included uncles, brothers, and grandparents.

Severity, frequency, and duration of CSA. Research supports that severity, frequency, and duration all impact when a child discloses their abuse (Arata, 1998; Russell, 1968; Yee-man Ma et al., 2004). In this study, some participants discussed the severity, frequency, and the duration of the abuse as contributing to their trauma. This was supported by research that indicated CSA victims who experienced oral, anal, or vaginal penetration were more traumatized than those that reported no penetration (Russell, 1986). For instance, participant 5 was raped by four brothers at one time. The severity of the abuse was very traumatic for her. Participant 5 delayed disclosing for 65 years. Furthermore, Participants 2, 7, and 8 also experienced frequent forms of penetration which were so traumatic they repressed the memories of the abuse. As a

result, it took participant 7 about 20 years to disclose, participant 8 about 25 years, and participant 2 around 37 years to disclose. Yee-man Ma et al., (2004) supported that severity, frequency, and duration influenced when a CSA disclosure was made. Arata (1998) also found that longer duration and physical severity of CSA increased the likelihood of delays in disclosing the abuse.

Overall, the findings in this study support that severity, frequency, and duration seem to impact when a CSA disclosure is made for some participants. However, it only partially supports the findings of Arata who found the longer the child experienced the abuse, the less likely they would be to make a disclosure. Participant 3 seems to refute these findings because he had one incident of abuse yet waited 21 years to disclose. This finding was supported by Sauzier (1989) who found that CSA which included penetration, abuse by a parent, or a single incident all contributed to longer delays in disclosing.

In contrast, Participant 1 seemed to be an exception to most of the research findings because she did experience penetration multiple times by multiple family members, but did not acknowledge any trauma or experiencing any fear from the situation. Participant 1 has a supportive family and reported no environmental stressors. Participant 1 stated she forgave the perpetrators for what they had done to her and that the abuse is not something that defines her. The response of forgiveness was also found in a study conducted by Imbens and Jonkers (1992) where a participant also mentioned she felt like she had to forgive everything that had happened to her. Although Participant 1

experienced frequency, severity, and CSA over years she does not feel like it was the reason she delayed disclosing. Participant 1 stated once she forgave her offenders she was fine. Participant 1 said she delayed disclosing her abuse to avoid the emotional pain it would cause others.

Abuse by multiple perpetrators. Many of the participants in this study seemed to experience repeated victimization by multiple perpetrators which seemed to play a role in delaying their disclosure. In this study, none of the participants who experienced multiple incidents of CSA disclosed the abuse immediately. Instead each significantly delayed disclosing. This finding was supported by Jensen et al (2005) who found the participants that experienced repeated victimization did not disclose immediately but waited for several years.

The findings in this study also seemed to suggest there is a vulnerability that put some participants at risk for repeated victimization. This study looked at the six participants (1, 2, 5, 6, 7 and 9) who experienced repeated victimization.

Participants 2, 5, and 7 all shared similar characteristics about their abuse which included a genuine fear of the perpetrator, a true fear of death, early onset of CSA, and multiple incidents which involved penetration. Lau and Kristensen (2010) stated the severity of CSA is the best indicator of repeated sexual victimization. Participant 9 described the severity of the CSA which included multiple offenders, an early onset, some fear of the perpetrators, and multiple incidents that included penetration. However, Participant 9 did not report a true fear of death like participants 2, 5, and 7 did.

Participant 1 also experienced multiple incidents of penetration by multiple perpetrators and an early onset of CSA, however, did not experience any fear. Each participant who experienced repeated victimization had commonalities in their abuse which included multiple incidents by multiple perpetrators, severity, and an early onset of CSA.

While Participant 6 also experienced CSA by multiple offenders that included penetration, the characteristics of her abuse were a little different. She experienced penetration at a later age (eight or nine) and she did not mention having any fear of death or a fear of the perpetrators. Participant 6 stated she created the vulnerability. She blamed herself for the last two offenders because she had been drinking excessively and passed out. Participant 6 stated she put herself in a vulnerable position. The self-blame for their victimization was echoed by a participant in Imbens and Jonkers (1992) who stated “people are responsible for their own actions, with respect to each other and to God. Why didn’t I scream, wrench myself away?” (p. 33) This current study supports CSA by multiple offenders does contribute to delayed disclosures since none of the six participants disclosed immediately. This study also revealed that more than half of the participants experienced repeated victimization by multiple offenders. This finding is important because it supports that children being abused by more than one perpetrator is not uncommon. Meaning, once a child experiences CSA then there is a risk for future victimization. Therefore, understanding the dynamics behind repeated victimization is important. Overall, it seems the severity of CSA could create a vulnerability that

increases the risk for repeated victimization which is supported by research (Lau and Kristensen, 2010).

Repressed Memories

Repressed memories were experienced by three participants. These three participants had a delay in their disclosures because they did not remember the abuse. Research supports that repressed memories often did delay disclosures of abuse simply because they did not remember being abused (Briere & Conte, 1993; Herman & Schatzow, 1987; Williams & Banyard, 1997).

Participant 2 talked about two very traumatic CSA experiences that she repressed. The first traumatic CSA experience occurred at early age with her grandmother and penetration was involved. The second traumatic experience transpired when the neighborhood boy held a gun to her. The abuse included penetration as well as demeaning and physically assaulting her. Participant 2 was fearful that she would die during this encounter. These memories were incredible painful, therefore she repressed them. Briere and Conte (1993) findings support that individuals create cognitive mechanisms to avoid the painful affects connected with remembering violent CSA. The three participants described having memories, flashbacks or unexplained physical pain. Two of the participants remember the abuse during therapy. Participant 8 recalled the abuse while staying in her childhood bedroom because it brought back feelings. She stated all these memories and circumstances surrounding the abuse came flooding back to her. She described it as an “ah-ha” moment.

Participants 2, 7, and 8 shared commonalities in the characteristics of the abuse such as early victimization at ages three, five and six. All experienced incest abuse initially, with two of the participants being abused by others family members later. The duration they experienced CSA varied from 2 to 13 years. Participant 8 experienced CSA for two years by one perpetrator, Participant 2 was abused for about four years by multiple perpetrators, and Participant 7 abuse lasted approximately thirteen years by multiple perpetrators. Participant 7 discussed a traumatic incident that occurred when she was three years old. Her mother walked in while her father was sexually abusing her and the mother responded by physically throwing her against the wall. Participant 8 described a deep fear of the perpetrator and Participant 2 described a fear of dying and physical abuse. Research seems to support that each of these issue can trigger a victim to repress these painful memories. Briere and Conte (1993) addressed there were several predictors that seemed to trigger the victim to repress the CSA, such as, early onset, duration, multiple perpetrators, physical mistreatment, and a fear of death if they disclosed the abuse (Briere & Conte, 1993).

Future Victimization

There were many issues that could lead to future victimization. Severity of CSA has already been mentioned as a contributor to future victimization but according to the data there were other possible contributors. For instance, experiencing CSA at the hands of a family member might contribute to future victimization. Research supports children are less likely to disclose the abuse if it is by a parent or someone they have a close

relationship (Arata, 1998). Therefore, they could be subject to revictimization because they have not learned strategies for preventing future abuse (Arata, 1998). This study revealed familial abuse was more prevalent than non-familial abuse. Nine participants reported a history of incest abuse by grandparents, brothers, uncles, one mother and one father. The other two participants, in the study, experienced non-familial sexual abuse. This study also found five out of the nine participants who experienced familial abuse disclosed repeated victimization by multiple offenders. For some participants they reported feeling bad about themselves. For instance, Participant 7 talked about suicide attempts she had made because of how bad she felt about herself. Ullman (2003) discussed that there are numerous psychological and social consequences that many survivors of CSA have to hurdle. This was further supported by Herman (1981) who found individuals with a history of incest abuse often reported more negative identity formation, teen pregnancy, suicide attempts, substance abuse, and repeated victimization.

The findings also seemed to reveal an emotional vulnerability in some of the participants that might have contributed CSA and to future victimization. Participant 4 had a mother that was dying, Participant 6 had a chronically ill father who she described as fragile, and Participant 10 sought out a father figure because he did not have one. Participant 7 admitted she liked the attention she was getting from the abuser. Berliner and Conte (1990) found in many cases the sexual abuse relationship began to fulfill a void in the child's life which lends support to these findings.

Another form of vulnerability felt by the participants was the result of threats made to the participants and/or their family members. For example, Participant 8 talked about how her mother was blind and the perpetrator [her mother's brother] threatened to kill her parents. The perpetrator would come over to her home unexpectedly. He would stand beside her mother and give Participant 8 a threatening look. Participant 5 also reported her brother threatened to kill her and drowned kittens in front of her to send the message he would kill her too. Participant 2 talked about the terror she felt when she was held at gun point by one of her offenders. The fear experienced by the participants made them vulnerable and was done to coerce the child into continuing in the abuse and/or keep the abuse a secret. The fear described by the participants paralyzed them from revealing the abuse. The CSA was very traumatic and harmful to the participants and repeated victimization only seemed to compound the effects. Disclosing sexual abuse is a difficult process but having to disclose multiple incidents with multiple offenders seemed to further complicate the likelihood of a disclosure. Berliner and Conte (1990) found that children were distressed and unfortunately their parents were not able to fulfill their needs.

Same Sex Abuse

Same sex abuse seemed to add to the participants concerns about disclosing CSA. Same sex abuse was experienced by 6 of the 11 participants. For instance participant 10 had a genuine concern that others would think he was homosexual because he was abused by a male. To this day, he has not disclosed his abuse to any friends or family. A similar

concern was expressed in a qualitative study by Hunter (2009) who had a male participant that was abused by an adult male. This participant admitted he had never told his friends or family because he had a fear they would believe he was a homosexual. Participant 10 admitted this concern had a great impact on why he never disclosed.

Participant 10 also conveyed he had concerns that he would be blamed for the abuse because he was a male and should be able to protect himself. Davies, Austen, and Rogers (2011) supported this finding because they found that victims of sexual assault are considered in some part responsible for their abuse. These researchers explained when a male failed to protect himself he violated the assigned gender roles which said males are strong and dominate. Additional support came from Kia-Keating et al., (2005) who stated a male who experienced victimization and helplessness through CSA, already has violated gender roles. This violation of society's assigned gender roles strongly influenced this participant's decision to delay disclosing. It is important for parents and society to understand the effects that same sex abuse has on CSA victims because these effects are contributing to delayed disclosures.

Limited Familial Communication

Many of the participants described the communication in their home as "closed," "surface" and "strained." Curran (1983) described that parents react instead of respond. This means parents react by putting their feelings and experiences on what they have heard, when they should be responding to how they feel (Curran, 1983). Curran stated often parents did not want to hear certain topics that scared their children because it

scared them too. Nor did they want to hear about their child's dreams because it was not what the parents wanted for their children. In short, parents do not want to hear certain topics so they did not acknowledge those topics or feelings which kept communication on a surface level (Curran, 1985). This surface level of communication had negative effects on eliciting disclosures.

Many participants described sensitive topics were discussed "as needed," "rarely," and as non-existent and were not routine. This was supported in Jensen et al. (2005) who found parents usually had conversational routines for some topics; but they lacked conversational routines on the topic of sexual abuse.

In addition, the findings illustrated that many of the parents and participants were not comfortable discussing sensitive topics which seemed to create a barrier between parent-child communications. Seven out of the eleven participants described being embarrassed and uncomfortable talking to their parent(s) about sensitive topics. This finding was supported by Trinh et al. (2009) who found some of the adolescent participants were too embarrassed to openly communicate with their parents on sexual topics. Additional support came from Jensen et al. (2005) who found it was challenging for children to start a conversation about a sensitive topic that was confusing, stressful, and shameful, especially when these conversations were not commonplace in their homes. Nine of the eleven participants reported their parents were uncomfortable and embarrassed discussing sensitive topics which hindered this communication. Trinh et al. (2009) found parents' hesitations to have conversations about sex were fueled by

embarrassment which limited and created barriers to these discussions. Other research found most parents were not talking to or educating their children about sex or sexual abuse (Jensen et al., 2005) because it was a difficult topic for parents and children to discuss (Trinh, Steckler, Ngo, & Ratliff, 2009). As a result, CSA was not being discussed between parents and their children.

In this study, all participants delayed disclosing until they reached adulthood. Participants provided several reasons why disclosing CSA would have been a difficult process. Many did not disclose the CSA to protect family members. Most participants reported their fears of the perpetrator physically harming their family. Other participants had a fear that their own safety would be in jeopardy if they disclosed the CSA. The perpetrator threatened them so they did not feel safe to disclose. One participant described disclosing the abuse as easier said than done. The participants who disclosed the CSA reported the disclosure process was not easy for them. This finding was supported by Herman (1981) who said as adults reflect back on the process of disclosing, they reported the process as difficult. Unfortunately because the process is so difficult, some participants still have not disclosed and continue to carry the burden of the secret.

Limited Parental Education about CSA

The findings of this study found that parents and children are not talking about CSA or other sensitive topics. Ten of the eleven participants reported their parents did not discuss CSA with them. Some participants reported they could discuss sensitive topics such as puberty, but not sex. Overall, the study demonstrated parents were not discussing

CSA or other sensitive topics with the participants. This was supported by White, Wright, and Barnes (1995) who found that parents and children seldom discussed sexuality and if they did, parents selected the less stigmatizing topics such as puberty and physical development, but not the topic of sex. Many participants did report if sex was discussed parents told them they would get pregnant, sexually transmitted disease, or that it was painful. Research by Trinh et al (2009) found that parents said they openly spoke about sexual issues with their teenagers, but it consisted of the negative consequences of having early sexual relations which seems to support the participants.

Many participants described a lack of understanding regarding CSA. Ten participants did not know what sexual abuse was or that they were being sexually abused. Participant 10 talked about if his mother educated him, he would have been able to watch for the warning signs. Many participants explained they simply did not understand what was going on and that the abuse was wrong. This was supported by a study conducted by Berliner and Conte (1990) whose participants echoed the same phrases. These researchers concluded that some children were being abused prior to understanding what was being done to them was sexual (Berliner & Conte, 1990). Due to their young age, they did not understand the adult's motives or that the behavior was inappropriate (Berliner & Conte, 1990).

Grooming also contributed to confusion experienced by many children. For instance, several of the participants discussed that the abuse was done in a playful manner therefore, they thought of the abuse as play, not abuse. Grooming gradually desensitized

the children to being touched or penetrated. For example, participant 7 described how her father told her there was a mouse [penis] under the blanket for her to catch. Next, her father changed the game to her putting her mouth on the popsicle. Participant 7 was about three years old and honestly thought she was playing with her father. Participant 1 shared how her uncles would abuse her in a nonthreatening way by telling her to come play over here. Both participants were being sexually abused and oblivious to the abuse.

Grooming was often responsible for feelings of self-blame for some of the participants. Grooming was defined as a slow process that desensitized the child to being touched (Berliner & Conte, 1990). The grooming process begins with nonsexual touching and graduates to sexual touching (Berliner & Conte, 1990).

Some participants in this study felt responsible for their abuse because of something they did or did not do. Berliner and Conte (1990) supported that grooming makes victims feel responsible for the abuse. Participant 7 had a four year relationship with another female. When the abuse first began, the participant was uncomfortable but the perpetrator reassured her that it was okay or acceptable. This was supported in Berliner and Conte (1990) who found the perpetrator used statements with the child to justify the activity or blame the child for the abuse. Participant 7 described the grooming process was so good that she began to seek out the relationship with this woman. She explained that she moved from a victim to a willing participant in the abuse which created self-blame. Berliner and Conte (1990) supported that grooming made some children feel like they were willing participants in the abuse because they did not stop the

touching before it turned sexual. In this study many of the offenders used the manipulative grooming process to satiate their sexual needs. Berliner and Conte (1990) supported that the grooming process was being controlled by the perpetrator and victims could not identify the grooming process until after the fact.

Almost all the participants mentioned not realizing it was wrong. There was a genuine confusion among the participants that parental education would have helped limit or eliminate the CSA.

Level of Familial Support

Many of the participants did not feel they had support at home and described the negative reactions of their parents to the disclosure of abuse. These reactions included the child being rejected by the parent and/or parents dismissing or discounting the child's feelings about the CSA. Participant 8 confide in her mother about the abuse. She asked her mother not to invite the perpetrator to their home and the mother did it anyway. The participant conveyed she did not feel supported by her mother and that it was almost like a second re-victimization. Lovett (2004) found support for this finding when she conducted a literature review of the research and explained that once a child did decide to disclose the abuse, the reaction of caregivers and professionals either added to the healing process or caused further trauma to the victims. Additional support came from Hunter's (2011) findings which indicated that parental reaction was very important and caused additional trauma if nothing changed for the victim or the victim was not believed or supported. This study found that negative reactions of the parents, family members, or

the community hindered the disclosure process itself which is supported by the research (Berliner & Conte, 1995; Jensen et al., 2005) The bottom line is children need a supportive family structure or scaffolding in order to disclose the CSA (Jensen et al., 2005) and most of the participants in this study did not have family support.

Many participants also reported a fear of not being believed which is why they did not disclose the CSA. Sauzier (1989) stated “but children are understandably reluctant to say what adults are reluctant to hear, be they parents, teachers or therapists” (p. 455). A participant hoped the abuse would somehow be discovered. Participant 11 discussed hoping her parents would walk in while her brother was in her room begging her for sex. Participant 10 mentioned how he loved running cross country and all of a sudden gave it up because of the abuse. Participant 10 reported being upset because his mother never questioned why all of a sudden he would give up something he loved. Both participants wanted the abuse discovered, but neither wanted to tell their mother. Both felt let down by their parents for not noticing the abuse. Courtois (1988) explained that while victims of CSA want the abuse discovered they also have a fear of not being believed or even blamed for their abuse which seems to validate this finding. The fear of not being believed was damaging for Participant 5 who discussed that she never told her parents about the abuse by her brothers because they would not have believed her or would have blamed her. As a result, she experienced repeated victimization by her oldest brother because she was too fearful to disclose. It is important to understand how the lack of

familial support and the fear of not being believed can significantly delay a child disclosing CSA.

The Environmental Stressors

All the participants indicated their family environment contributed to a delay in disclosing the CSA. Nine of the participants described environmental stressors present in their family units. These environmental stressors included marital discord, separation, divorce, chronic/fatal illnesses, disabilities, financial hardships, and domestic violence to name a few. These environmental stressors contributed to unstable home environments and limited time with parents.

Unstable Environment

Many participants described a volatile home environment. Seven participants (2, 3, 4, 6, 7, 8, and 9) mentioned some type of violence and/or yelling and screaming between the parents. Participants used terms such as ‘walking on egg shells,’ their parent’s having a “very volatile relationship,” and their father’s anger issues as ways to describe their home life. Most of the participants stated their home environment had a role in them delaying their disclosures. Research by Cummings et al. (1985) studied the influence of parental conflict and found that children exposed to background anger and conflict between their parents were noticeably affected by this environmental stressor. Furthermore, Cummings et al. (1985) found that children became even more distressed when they were exposed to large amounts of conflict between the parents. The findings were also true for intact families where there was marital discord (Cummings, Iannotti, &

Zahn-Waxler, 1985). In short, higher distress was anticipated when children were exposed to other's anger even if it is not directed at the child (Cummings et al. 1985). Understanding the effects of a volatile home helped to explain why some participants were less likely to disclose.

Limited Time with Parent(s)

Many participants mentioned they had limited time with their parents due to the family stressors in the home. The participants used terms like “unavailable”, “uninvolved”, “busy”, “preoccupied”, and “absent” to describe their time with their parent(s). Participant 3 described limited time and access to his mother because she was preoccupied with the divorce and then her new boyfriend. The research supported that family stressors do affect the parent-child relationship and the availability of the parent. Armistead, Klein, and Forehand (1995) examined child functioning when the parent had a physical illness. They explained that when there was a chronic illness in the home, it was not unusual for there to be changes in household routines, limited parental availability, the inadvertent overlooking of the child, or disruption in the parenting due to the demands of the illness (Armistead, Klein, & Forehand, 1995). These same family adjustments could apply for other family stressors such as separation, divorce, or a parent with a disability (Armistead, Klein, & Forehand, 1995). Unfortunately most of the participants had limited quality time with their parents due to environmental stressors which made disclosing CSA even more difficult.

The findings in this study concluded that environmental stressors negatively impact eliciting a CSA disclosure. This was supported by Alaggia (2010) who found that “rigidly fixed gender roles with dominating fathers; chaos and aggression; the presence of other forms of child abuse; domestic violence; dysfunctional communication and; social isolation” all adversely impacted the disclosure (p. 34). It is necessary for parents to understand that if environmental stressors exist in the home they often play into why a disclosure is delayed.

Cultural and Religious Barriers

The findings of this study indicate that culture and religion did play a part in why some of the participants did not make a timely disclosure. Most of the participants described how religion and/or culture hindered them from disclosing the CSA.

Religion

Participants discussed two religious beliefs in connection to disclosing CSA. They cited the concept of forgiveness and remaining sexually pure until marriage as influencing their disclosures. For example, some participants discussed as Christians they are taught to forgive. The concept of forgiveness had both positive and negative effects for the participants. For Participant 1 she discussed how she truly forgave her perpetrators and found peace in her faith in God. She did not feel damaged or as though she had sinned against God. For Participant 1 her religious beliefs were a source of comfort. She cited forgiveness as one of the reasons she did not disclose the abuse. She

felt redeemed and whole in the eyes of God; therefore, disclosing the CSA would only bring pain to her family.

In contrast, Participant 11 described how she forgave her brother and unfortunately the forgiveness did not give her peace, but sadness. Participant 11 shared with her parents that she forgave her brother and her parents' attitude was that the CSA was a closed matter and there was no reason to discuss it any further. The forgiveness seemed to extinguish any ability for her to discuss the abuse, her feelings, or experience closure. In addition, there were not any consequences for her brother from her parents, law enforcement or anyone because her parents considered the matter closed. She expressed this was very hurtful to her. Her brother was not held accountable nor did he seek out any treatment for what he did to her and her sister. Participant 11 and her sister eventually did disclose the CSA to the authorities, regardless of their forgiveness; for fear he might still be a threat because he never had treatment. Her brother now has a daughter and they want to protect her.

Other participants described how in Christianity it is important to be sexually pure until marriage. This religious belief caused confusion in a few participants because experiencing CSA seemed to violate their religious teachings. This led some participants to feel as though they were damaged or they had sinned against God. Many participants had internal conflict trying to reconcile their religious beliefs with the CSA they experienced.

Most of these findings were supported by a study conducted by Imbens and Jonkers (1992). One participant in their study described how the concept of forgiveness seemed erase her right to be angry. For this participant the concept of forgiveness brought her sadness. Another participant in their study discussed how she believed she had to forgive everything, but does not believe that now. The researchers had some participants that talked about what they were taught about sex outside of marriage. One participant stated that “premarital sex was filthy” and “I knew that I ought to be stoned, even though Jesus stood up for woman like me” (p. 33). Another participant stated that “as far as sex was concerned, everything done outside of marriage was dirty and bad” (p. 50). Another participant, in their study, explained there was no source of support from religion. This participant described feeling guilty for a long time because their virginity was gone and they were no longer sexually pure.

The participants in this study echoed the feelings and thoughts of those in Imbens and Jonkers study which lends support to the finding that one’s religion can impact disclosures.

Culture

Participants confirmed there were some cultural barriers that delayed their disclosure. For instance, gender socialization seemed to be a given by participant 5 as to why she could not disclose. She described a very patriarchal household. She describe that her brothers could do no wrong. She stated they were like gods. She stated she would not disclose because she would not be believed. This finding was supported by Alaggia

(2010) who stated “women were equally as affected by a culture of sexist and patriarchal attitudes inhibiting their ability to disclose” (p. 37). Gender socialization was also an issue for participant 10 who was sexually assault by another male. He did not want to disclose the abuse because there was a stigma to being a male and labeled as a victim. Males are blamed for being a victim (Davies, Austen, & Rogers, 2011). Research supports that when a male is victimized, helpless, and fails to protect himself it is a violation of the male gender role (Davies, Austen, & Rogers, 2011; Kia-Keating et al., 2005).

In different cultures discussing sexual issues is considered taboo. Participant 8 shared that talking about sex was taboo therefore not discussed in her family. She also mentioned that sexual issues were supposed to be handled privately within the family. As a child she was aware it was taboo to talk about sex and therefore did not disclose the CSA. There was support for this finding from Mossige et al. (2005) who found that children were aware of the fact it was taboo to discuss sexual matters. Likewise, some individuals from the Hispanic culture would not be comfortable with having to disclose the abuse to someone from another culture due to feelings of discrimination, lack of trust, different cultural values, and lack of bilingual services to name a few (Shaw, Lewis, Loeb, Rosado, & Rodriguez, 2001). All of these issues contributed to a delayed disclosure.

The idea of purity before marriage was not only a religious issue, but also a cultural issue. One Hispanic participant discussed how her parents would tell her

negatives about sex to deter her from having sex outside of marriage. She mentioned the importance of maintaining sexual purity in the Hispanic culture. Research supports that some cultures place a high value on virginity and if a person loses their virginity it can result in family shame and in some cases the fear of negative family consequences (Fontes, 1993).

The Emotional Effects of CSA

The participants described common emotions that impaired their ability to disclose. Some of the emotions experienced by the participants included fear, feeling dirty, worthless, shame, guilty, self-blame, helplessness, and anger. Participant 2 described the terror she felt at the hands of her abuser. Participant 6 described how she blamed herself for her abuse because she drank too much and made herself vulnerable. Participant 7 mentioned feeling many emotions as a result of the CSA such as shame, dirty and worthless. All these emotions identified by the participants were supported in a plethora of research. Hunter (2009) identified three main barriers which emerged relating to delayed disclosure or nondisclosure. These barriers were feelings of fear, shame, and self-blame. Hunter explained the shame the victims experienced had to do with feeling dirty or embarrassed. Self-blame seemed to be a common emotion among CSA victims (Hunter, 2009). Overall, the females seemed to report feeling more afraid to disclose the abuse. The fear could have been because of threats by the perpetrator, a fear of not being believed, or a fear of the consequences. Males in this study seemed to mention feelings of shame as the reason they did not disclose. For instance, Participant 10 discussed that

he had concerns about what others would think about him. These findings were validated by Hunter (2011), who found the female participants admitted feeling more frightened as a child, whereas males reported feeling more ashamed.

As a result, CSA victims concealed their sexual abuse behind fear, shame, guilt, and secrecy, which explained why delayed disclosures of sexual abuse did not occur for extended periods of time (Tang et al., 2007).

The Fear of Consequences

All of the participants were fearful of the consequences for disclosing the CSA. Many participants wanted to protect others from the pain of learning about the abuse. Participants 1 and 3 both discussed how they did not disclose because they were protecting their family. Smith et al. (2000) explained the protective nature of the child towards others, including their family members and the offender.

There was the internal conflict inside participants that made it difficult to disclose the abuse. For instance, Participant 3 mentioned that he was very close to his grandfather and referred to him as a best friend. He did not want to lose his grandfather or divide the family; therefore he did not disclose to anyone until adulthood. Arata (1998) did find the closer the relationship to the perpetrator; the less likely it was that the victim would disclose the abuse (Arata, 1998). Participant 11 mentioned that she wanted the abuse to stop, but did not want her brother to go to jail which was supported in the research. Malloy, Brubacher, and Lamb (2011) explained victims struggle with making the disclosure because it meant reporting their loved ones to law enforcement and they did

not want to get them in trouble. In addition, victims had a fear about how the disclosure would disrupt their family. The fear of disrupting the family was mentioned by Sauzier (1989) as one way that disclosures can be complex and costly to the child. The need for the child to protect others was further held by Jensen et al. (2005), who found some of the children reported having deep concerns about the consequences for the perpetrator and their family if they disclosed the CSA. In short, Jensen et al. (2005) found children delayed disclosing, because they were sensitive to the needs of their caregivers and feared the consequences a disclosure would have for their family and the offender.

Lastly, many participants felt they had to protect someone from harm or emotional pain. For instance, Participant 8 reported that she felt like she had to protect her parents, specifically her blind mother from the perpetrator who threatened to kill them so she went along with the abuse. Participant 4 discussed how she was reminded by the perpetrator that her mother was dying and how disclosing the CSA would kill her. Paine and Hansen (2002) explained perpetrator is usually close to the victim, therefore it is not uncommon for the perpetrator to frequently warn the victim about the emotional or physical pain the family would suffer if the secret (CSA) was disclosed. Often the perpetrator instilled a burden of responsibility on the child to protect the family and the offender from the pain or consequences (Paine & Hansen, 2002). Based on all research it was easy to understand how a relationship to the perpetrator affected disclosures.

Participants also felt the need to protect their parents from the burden of knowing about the abuse because of all the environmental stressors. The participants who had

parents with a disability, long term, or fatal illness mentioned not wanting to burden their parents because they had enough to deal with already. Participant 6 talked about being close to her father, but she would not disclose to him because he was too fragile. Participant 4 reported that she did not reveal the abuse to her mom because she was dying and did not need any additional burdens. The research seemed to support these findings. Korneluk and Lee (1998) found children of physically ill parents often hide their own distress from their parents as a means of protecting them.

The participants also reported a fear of not being believed, being punished or the pain of family members. Participant 1 did not disclose because she did not want to hurt other family members by disclosing the abuse. Participant 5 was afraid to tell her parents about the abuse because she feared they would not believe her. She also feared that she would be the one that would be punished. Participant 5 explained how her brothers could do no wrong and clearly the perpetrator was the favorite child. It was for those reasons she would not disclose. These findings were supported by Hunter (2011) who stated that fear included the many consequences for CSA victims which included not being believed, being punished, or hurting other family members. The fear of consequences for disclosing CSA came at a high price for many of these participants. It left them paralyzed to protect themselves from continued abuse.

The Movement towards Quicker Disclosures

Each of these participants had very delayed disclosures. Understanding what prompted their disclosure after so many years helped aid our understanding in what moved them to disclose. Overall, they disclosed for two reasons.

First, they disclosed to protect a family member from potential abuse or current abuse. Participant 1 partially disclosed to her mother only because another one of her cousins came forward as being abused by one of the perpetrators. Participant 11 came forward because her perpetrator has a daughter now and she was worried for her niece safety. Participant 6 came forward because her cousin was also abused by her offender. Participant 6 basically made her disclosure in a district court while she was testifying.

Second, they disclosed to hold the perpetrator responsible for the CSA. Participant 5 waited 65 years to disclose the abuse. She is poor health and if she died he would get away with abusing her. She wanted him to be accountable for what he did. Participant 11 reported that her brother sexually abused her and her sister. He did not have any consequences from her parents or the authorities. Participant 11 felt like he needed to be accountable especially now that he has a daughter.

It was also important to understand what survivors of CSA, who are now parents, are doing to protect their children from becoming victims of CSA. Nine of the participants that were parents mentioned how they wanted to protect their children from being victims of CSA; therefore they were implementing protective structures. First, most mentioned opening the lines of communication. Research found most parents were

not talking to or educating their children about sex or sexual abuse (Jensen et al., 2005) because it was a difficult topic for parents and children to discuss (Trinh, Steckler, Ngo, & Ratliff, 2009). As a result, CSA was not being discussed between parents and their children. The participants did not feel they had open lines of communication in their home growing up which would have been significant in aiding their disclosure. As a result, these parents are talking to their children and grandchildren (if applicable) about sensitive topics and CSA. In addition, all participants but one discussed the fear that prevented them from disclosing the abuse. Research supports children are afraid to disclose for many reasons (Berliner & Conte, 1995). The parent participants, in this study, discussed how they are communicating to their children that they can tell them anything regardless of what is happening in the home.

Second, many participants reported that they are educating their children about CSA. They are explaining what it is, giving examples, and giving them a plan of action. They understand how paralyzing it can be when CSA is occurring and by providing a plan of action, the children will know how to respond. According to Gibson and Leitenberg (2000) education could also prove beneficial in teaching children when to be more suspicious when adults or significantly older children want to spend time alone with them. The parents in the study also mentioned they, too, are more aware of adults that want to spend time with their children. Participant 1 discussed with her son possible situations that could be dangerous in an effort to make him understand. Fontes and Plummer (2010) support children are not sufficiently educated about their bodies and

appropriate sexual topics. Every participant discussed how unprepared they felt. As a result, these parents are trying to empower their children.

Third, they are providing a home environment that invites communication and provides stability. These participants are aware of the effects of environmental stressors and how they negatively impacted their disclosures. The research by Korneluk and Lee (1998) found children of physically ill parents often hide their own distress from their parents as a means of protecting them. This is often true with any environmental stressor within the home. As a result the parent participants are trying to create a home environment with open communication so their children are always comfortable talking to them regardless of the environmental stressors.

Theoretical Frameworks

Delayed and nondisclosures were viewed through multiple frameworks to aide our understanding about why people delayed disclosing CSA. Each framework will elucidate a different part of the phenomenon.

Bronfenbrenner's Ecological Framework

Looking at this phenomenon through the ecological perspective, it illustrated how each ecological system has a reciprocal effect on the other. It demonstrated while abuse might occur within a family unit, it can impact the larger society as well. For instance, if an individual delays disclosing the abuse due to the family environment, they can develop negative long term effects. These long term effects can lead to post traumatic stress disorder, depression, or other psychological issues that can make it impossible for the

individual to work or function as an adult (Arata, 1998). If they cannot work they might be on disability or unemployment. This can lead to depending on the government for financial support or rising medical costs for the individual. Likewise, this model demonstrated how most school, community and government programs are not benefiting the younger children because abuse is occurring prior to the children being exposed to programs. Therefore, it also shows how the failing government or community programs are affecting the family.

Curran's Healthy Family's Framework

Addressing delayed disclosures through Curran's healthy family's perspective, it became clear just how significant the open lines of communication between parent and child were within a family. Seven out of eleven participants described the lines of communication as closed. Curran's framework addressed the need for healthy communication to exist in the family unit. This framework demonstrated the importance of family members to actively listen and talk to each other. It was also important for parents to stop reacting and start responding. Curran discussed how many parents react to the CSA disclosure by putting their experiences and issues onto what the child has said instead of hearing their child's feelings about the CSA. This creates barriers for the child to disclose CSA because he/she does not feel heard, validated or important.

CSA was a difficult issue to deal with; however, it became even more difficult when you do not have family support in the home. Curran discussed how healthy families affirm and support each other and unfortunately many of the participants did not

report feeling affirmed or supported by their parents. Furthermore, developing a sense of trust was an issue for many participants. Many reported not being able to trust their parent(s) or other family members which impacted why they did not disclose. Many participants reported that some of their family members knew about the abuse but did not seek help or admit there was even a problem. This not only violated the participant's trust but was also very painful to the child.

Lastly, Curran described that healthy families have a strong sense of family which means they never feel alone. Unfortunately many of the participants in this study did feel they were alone or had no one they could tell about the abuse. Curran's healthy family traits seem to describe a lot of what some participants were lacking in their home growing up. Clearly, families that possess these traits would be more likely to elicit a disclosure compare to families that do not.

Bowen's Family Systems Perspective

Through the family systems perspective it was apparent when one member of the family was in crisis, it impacted the other family members. Participants mentioned several family stressors such as marital discord, alcoholism, anger issues, domestic violence, separation, divorce, parents with disabilities, parents with terminal illnesses, and financial hardships on the family unit. Each of these stressors impacted when and if the children disclosed. Two participants talked about their father having anger issues. One described "having to walk on egg shells" when their father was around. Another described her mother being more relaxed and it being a different environment when the

father was not around. A participant did not want to tell her dad because he was so ill all the time. His illness impacted her behavior. The environmental stressors within the family altered the functioning of that family which hindered a disclosure.

The family systems view also explained how family members were interdependent on each other and each member has a role or part in the family system. As a result, the victim understood that by disclosing CSA, one family member might have to leave, thus causing disruptions to the family unit and its level of functioning. These are clear examples of how family members have reciprocal influences on each member of the family. It also clearly validates why many children do not disclose the CSA.

Researcher's Personal Lens

As a professional working in this field, this research supported the importance of understanding delayed disclosures. It is important that more individuals truly understand the dynamics and reasons behind delayed disclosures. For example, in criminal cases many jurors and attorneys do not understand why children delay disclosing the abuse nor do they understand disclosure is a process. Children usually do not reveal all the abuse in the initial disclosure. Defense attorneys often try to accuse CSA victims of changing their story because they did not mention every detail of the abuse in their initial interview. In addition, several participants discussed having repressed memories. This concept can be difficult for attorneys to prove in court. There is no concrete proof that the CSA victim truly had repressed memories. Unfortunately this lack of understanding about delayed disclosure is often used by the defense attorneys to against the children in court.

Conclusions

These themes provided insight into the role that parental education and communication played in delayed disclosures of CSA. For instance, the findings regarding the age of onset of CSA were significant. Seven of the eleven participants experienced CSA at six or under. When children experience CSA at a young age, it could explain why many of the participants could not identify CSA. The abuse patterns were established at a very young age which explained why many did not know CSA was wrong. The programs established by the government to combat this phenomenon have failed many victims because it did not reach the victims before the abuse began. It was taught in the school, but if the abuse occurred prior to school age, these children were not getting the necessary education and tools they needed to end the abuse.

Parents have a significant role in protecting their children from becoming victims of CSA. Because CSA is a valid and possible threat to their children, all parents need to communicate and education their children about CSA. Parents need to begin educating their children at an early age. Parents can begin with teaching their children words for privates and explaining who can see or touch them. As the child gets older more developmentally appropriate information can be added to their child's understanding about CSA. Parents need to give their children the tools and understanding to protect themselves from becoming a victim of CSA.

Likewise, parents need to talk to their children about puberty, sex and CSA. If those lines of communication are not opened the children will not know they can come

and talk to their parents about it. In addition, parents need to be sensitive to the needs of their children especially when there are family stressors in the home. Children will attempt to shoulder this burden alone so as to not stress their parent(s) any further. Therefore, parents need to instill in their children the importance of coming to them no matter what the family circumstances. In conclusion, it is imperative that parents use communication and education to defend against CSA.

Limitations

This study had several limitations. The first limitation was trying to recruit participants. Since the study addressed such a sensitive topic it was difficult to recruit participants. Although the researcher has fourteen years of experience interviewing CSA victims, the researcher had to rely on the participant's trust in the researcher to disclose such painful and personal experiences. Despite the recruitment limitation, this study still had more participants than expected.

Another possible limitation in the study was the research questions; they could be confusing to individuals that do not work in this field due to the terminology. Since this was a qualitative study the researcher spoke directly to the participants and used her skillset to break down the research questions into smaller ones that made more sense to the participants.

In addition, another limitation of the study was utilizing interviews as the method of data collection which had a few weaknesses. For instance, utilizing interviews meant there was personal interaction that occurred between the researcher and the participant;

this interaction could influence the participant. As a result, the researcher was careful not to make facial expressions and be aware of any body language that influenced the answers of the participant. The researcher was also aware that types of interaction could lead to communication problems or misunderstandings so the researcher was very conscious of this. It was important the researcher had as little an impact on the process as possible.

A second issue with the interviews was the data came from self-report. This could be problematic for two reasons. First, the research was dependent on retrospective information. Research has stated there is some controversy regarding whether data obtained retrospectively from memories was valid (Berliner & Williams, 1994; Briere & Conte, 1993; Lindsay & Read, 1994; Loftus, 1993). Second, another possible weakness with self-report that the researcher was relying on the truthfulness of the participant. In some cases, participants may not want to be viewed unfavorably; therefore, adjust their answers to make themselves appear more favorably.

However, the benefits of using interviews with self-report as a method for data collection far out-weighed the limitations. These interviews provided rich “insider” data that could not be obtained through quantitative methods, such as surveys, questionnaires, or observations.

Recommendations

This topic is very large and could not be completely covered by this dissertation. Unfortunately more issues emerged throughout the research process. Future research

should be conducted with children who disclose CSA in childhood to see what prompted them to tell. This would provide rich data about disclosures to aide our understanding regarding why they disclosed. The data collected from children who delayed telling could be compared to adults that delayed disclosing to see if there are any commonalities or differences between the two groups.

Also future research could include talking to parents and their children that disclosed to get a clearer picture on delayed disclosures from different perspectives. Likewise, conducting research with children at various ages would give additional insight. It would be closer to the time of the abuse therefore memories would be fresher and they would not have to recall details of the abuse from many years ago.

The participants in this study represented a small geographic area. Future research may want to consider how the data could vary if this research is conducted in different areas of Texas, various states, and in different cultures. Additional research in others geographic areas would provide additional perspectives on delayed disclosures. There is rich data to be collected from all individuals.

Another area where future research could add further understanding is whether family stressors open children up to CSA. In other words, do distracted or preoccupied parents put their children at risk for CSA because they do not see any red flags therefore are not careful about who their child is around?

Future research regarding repressed memories could prove beneficial. Many victims of CSA have stated they have had repressed memories which delayed their

disclosures. These delays due to repressed memories have negative impacts on the criminal case because evidence is lost and memories fade. Repressed memories also have negative consequences on the victim because they prevent the victim from getting necessary resources to begin healing. Additionally, many jurors and attorneys do not understand how you can forget something so traumatic. Additional research would be beneficial to educate individuals that are involved with the criminal justice system.

Lastly, future research needs to address policy changes. There is a place for family studies professionals and social workers to work with preschools, PTA's, Mother's day out programs, and other platforms to address this very important topic.

Implications

This issue has been addressed across disciplines such as social work, psychological trauma, counseling, family studies, clinical psychology, criminal justice, family therapy, and the medical fields. It has also been an issue studied internationally which was demonstrated by the fact that much of the research contained in this study deals with disclosure of CSA in others countries, as well as, the United States.

Almost all the participants discussed how their parents did not educate them regarding CSA and that it would have helped them handle the abuse better. Parents need to understand that CSA is a possible threat to all children; therefore, children need to be empowered with knowledge. Just as children are taught about safety issues, such as fire safety, CSA must be addressed by parents. In addition, parents need to give their children a plan of action so the children will know what to do if it happens.

Also, in this study, participants discussed how their parents were preoccupied or unavailable. In those situations, parents are not supervising their children. Often they leave other adults, such as coaches, teachers, relatives, friends, and church staff to supervise their children. Unfortunately, parents cannot trust that other adults will not harm their child. Parents need to resume as much of the supervision role to their children as they can which limits the number of risky situations that children are put into.

The findings of this study also support that parent-child communication is essential in obtaining quicker disclosures yet this communication is not taking place. Many of the participants did not feel like they could disclose the abuse to their parents. They did not know if was okay to discuss this topic or how it would be received by their parents. Parents need to talk to their children about CSA and other sensitive topics so that children know it is okay to approach them on this difficult topic. Open lines of communication are the first line of defense in protecting our children.

Likewise, this study also revealed discomfort either from the participant or the parent regarding sensitive topics. This discomfort only exasperates the problem because then no one is talking to each other. Parents need to overcome their discomfort or fears about discussing sensitive topics because their children sense this discomfort. The parent has to take the lead in this area to teach the child and reassure the child it is okay to talk about sensitive topics especially if they are causing the child pain.

This study also supported that the participants were learning about these sensitive topics through means such as girl scouts, brownies, and checking out books at the public

library. Therefore, there needs to be more in the way of prevention and education programs so that if parents do not open the lines of communication about sex and CSA with their children, these children will still be reached. Society gives children a plan in case of a fire, you stop, drop, and roll but we give them no instruction on what to do if CSA occurs. Family study professionals, social workers, counselors, pediatricians, teachers and law enforcement need to partner with schools or preschools to reach these children and parents to educate them on how to address this sensitive topic.

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Appendix A
IRB Approval



Institutional Review Board
Office of Research and Sponsored Programs
P.O. Box 425619, Denton, TX 76204-5619
940-898-3378 FAX 940-898-4416
e-mail: IRB@twu.edu

January 14, 2014

Ms. Beverly Bailey

TX

Dear Ms. Bailey:

Re: Parental Communication and Education: Exploring Delayed and Nondisclosures of Childhood Sexual Abuse (Protocol #: 17540)

The above referenced study has been reviewed by the TWU Institutional Review Board (IRB) and appears to meet our requirements for the protection of individuals' rights.

If applicable, agency approval letters must be submitted to the IRB upon receipt PRIOR to any data collection at that agency. A copy of the approved consent form with the IRB approval stamp is enclosed. Please use the consent form with the most recent approval date stamp when obtaining consent from your participants. A copy of the signed consent forms must be submitted with the request to close the study file at the completion of the study.

This approval is valid one year from December 18, 2013. Any modifications to this study must be submitted for review to the IRB using the Modification Request Form. Additionally, the IRB must be notified immediately of any unanticipated incidents. If you have any questions, please contact the TWU IRB.

Sincerely,


Dr. Rhonda Buckley, Chair
Institutional Review Board - Denton

cc. Dr. Karen Petty, Department of Family Sciences
Dr. Joyce Armstrong, Department of Family Sciences
Graduate School

Appendix B
Graduate School Approval Letter



The Graduate School
P.O. Box 425649, Denton, TX 76204-5649
940-898-3415 FAX 940-898-3412 gradschool@twu.edu

0162196

January 23, 2014

Beverly Bailey

Dear Ms. Bailey:

I have received and approved the prospectus entitled *Parental Communication and Education: Exploring Delayed and Nondisclosures of Childhood Sexual Abuse* for your Dissertation research project.

Best wishes to you in the research and writing of your project.

Sincerely yours,

Ruth A. Johnson, Ph.D.
Associate Dean of the Graduate School

kjb

cc: Dr. Joyce Armstrong, Family Sciences
Dr. Karen Petty, Interim Chair, Family Sciences

Appendix C

Letters to Agencies Requesting Permission

Agency
Address

Date

Dear XXXXX,

My name is Beverly Bailey. I am conducting research for Texas Woman's University. The purpose of this study is to explore the experiences of adult survivors of child sexual abuse. Because research indicates that disclosing abuse is often delayed, this study will explore possible ways to encourage children who are sexually abused to disclose sooner. This study specifically will investigate the role of parental education and communication to determine if it could play a role in decreasing the time it takes a child to disclose.

I am seeking participants, specifically adults that have experienced child sexual abuse, to participate in the study. I respectfully request permission to hang a recruitment flyer at your agency. I have attached a flyer for your review. It will provide additional information about the study. Please let me know if you have any questions.

Sincerely,
Beverly Bailey
xxx-xxx-xxxx
bbailey@twu.edu

Agency
Address

Date

Dear XXXXX,

My name is Beverly Bailey. I am conducting research for Texas Woman's University. The purpose of this study is to explore the experiences of adult survivors of child sexual abuse. Because research indicates that disclosing abuse is often delayed, this study will explore possible ways to encourage children who are sexually abused to disclose sooner. This study specifically will investigate the role of parental education and communication to determine if it could play a role in decreasing the time it takes a child to disclose.

I am seeking participants, specifically adults that have experienced child sexual abuse, to participate in the study. I have two requests which brings me to the purpose of this letter. First, I respectfully request permission to hang a recruitment flyer at your agency. Second, I am requesting permission to use a private office at your agency to conduct the interview. Due to the sensitive nature of the topic a private office will provide them with a comfortable environment, but also maintain confidentiality. I will conduct interviews after hours, on weekends or at times that are not disruptive to the agency. I have attached a flyer for your review. It will also provide additional information about the study. Please let me know if you have any questions.

Sincerely,
Beverly Bailey
xxx-xxx-xxxx
bbailey@twu.edu

Appendix D

Letters of from Agencies Granting Permission



November 11, 2013

To: Beverly Bailey, PhD candidate

From: Molly M. Arnold, PhD, LMFT-S, LPC-S, RPT

Dear Beverly:

I am aware that you are currently recruiting participants for your dissertation research. You are welcome to display recruitment fliers in my office as needed. Good luck in your work!

Very sincerely,

A handwritten signature in black ink, appearing to read "Molly M. Arnold", written over a faint printed name.

Molly M. Arnold, PhD, LMFT-S, LPC-S, RPT

6021 Morriss Road, Suite 110A
Flower Mound, TX 75028
www.kfamilycounseling.com
Email: molly@kfamilycounseling.com
972.754.7302

**ROSE BOEHM, M.S.
LICENSED PROFESSIONAL COUNSELOR
215 W. MULBERRY, STE. A
DENTON, TEXAS 76201**

NOVEMBER 10, 2013

BEVERLY BAILEY

TEXAS

DEAR MRS. BAILEY:

I UNDERSTAND THAT YOU ARE CONDUCTING RESEARCH FOR TEXAS WOMAN'S UNIVERSITY IN FULFILLMENT OF REQUIREMENTS FOR YOUR DISSERTATION. I GIVE MY PERMISSION FOR YOU TO PROVIDE FLYERS IN MY COUNSELING AGENCY TO ATTEMPT TO RECRUIT PARTICIPANTS FOR THAT RESEARCH.

PLEASE CONTACT ME SHOULD YOU HAVE ANY FURTHER QUESTIONS.

SINCERELY,



**ROSE BOEHM, M.S.
LICENSED PROFESSIONAL COUNSELOR
BOARD APPROVED SUPERVISOR
PH: 940-380-1570**

March 2, 2014

Ms. Beverly Bailey
Texas Woman's University
Doctoral Candidate

Dear Ms. Bailey,

I am pleased to provide this letter as permission for Ms. Bailey, Doctoral Candidate, Texas Woman's University, to conduct research for her dissertation at The Incest Recovery Program at The Family Place. Our commitment to Ms. Bailey is to provide two volunteers who were sexually abused as children be interviewed and recorded by Ms. Bailey.

It is my understanding that Ms. Bailey is conducting research on delayed and non-disclosures of child sexual abuse victims. Ms. Bailey may use our facilities to conduct the two interviews.

The results of her study will be most interesting and helpful in our work. I would appreciate information regarding her findings.

Sincerely,

Liz Hodges, Ph. D., LCSW
Program Director
Incest Recovery Program
The Family Place



October 24, 2013

Mrs. Beverly Bailey
Texas Woman's University Doctoral Candidate

Dear Mrs. Bailey,

I am pleased to provide this letter of permission Mrs. Beverly Bailey, Texas Woman's University PhD Candidate, to conduct research for her Doctoral project at the Children's Advocacy Center for Denton County beginning November 1, 2013.

It is my understanding that Mrs. Bailey is conducting research on delayed and non-disclosures of child sexual abuse victims. Beverly has our permission to use the facility to conduct interviews with participants, including current and past victims of child sexual abuse, for purposes of research. We also grant Beverly permission to hang up flyers to promote the research and to solicit participation.

If you have any questions, please do not hesitate to call me at (972) 317-2818 ext. 227 or e-mail dan@cacdc.org.

Sincerely,

Dan Leal
Executive Director



ph 972.317.2818 • fax 972.317.6989 • 866.875.1015
1854 Cain Drive • Lewisville, TX 75077 • www.cacdc.org



Appendix E
Recruitment Flyer

Research Study

PARENTAL COMMUNICATION AND EDUCATION: EXPLORING DELAYED DISCLOSURES OF CHILD SEXUAL ABUSE

The purpose of this study is to explore the experiences of adult survivors of child sexual abuse. Because research indicates that reporting or disclosing is often delayed, this researcher wishes to understand the factors that are associated with delaying disclosures. The researcher is conducting a qualitative study, for Texas Woman's University. **Participation is completely voluntary.**

To participate in the study

- Participants must be adults (18 and over)
- Raised by at least one or both biological parent(s) growing up
- Experienced childhood sexual abuse and did not disclose it immediately
- Speak English (because researcher is not bilingual).

Participation should not be more than 2.5 hours and includes the following:

- Complete two short forms. The estimated time to complete both forms is 15 to 30 minutes.
- There will be five to ten minutes for questions before the interview.
- Participating in an audio taped interview which could last up to an hour and 20 minutes.
- There will be five to ten minutes for questions after the interview.

***If you can help, please contact the researcher,
Beverly Bailey, at bbailey@twu.edu***

There is a potential risk of loss of confidentiality in all email, downloading, and internet transactions.

Appendix F

Phone Script

Phone Script for Potential Participants

Hi, my name is Beverly Bailey.

The research is being conducted for Texas Woman's University.

This study will explore the experiences of adult survivors of child sexual abuse. Because research indicates that reporting or disclosing is often delayed, this research seeks to gain insight into the factors that are associated with delaying disclosures. The research will explore parental communication and parental understanding about CSA to find possible ways to encourage children who are sexually abused to disclose sooner so that they may receive help earlier.

May I ask if you are 18 years or older?

Were you raised by at least one biological parent?

Were you a victim of child sexual abuse?

Did you tell immediately after the sexual abuse occurred or did you wait to disclose?

The PI will tell them about their rights, time requirements, and about the study

You are welcome to ask questions at any time during the study. You can stop participating in the study at any time without penalty. If you need to take breaks, during the interview, let the researcher know. In addition, you can refuse to answer any or all questions. Your participation is voluntary.

Do you have any questions so far?

The time requirement could be up to 2.5 hours. The time varies for each participant and how much time they need. The time requirements include:

- Going over the consent form with the researcher. The consent form will tell you about your rights as a participant. The researcher will answer any questions you have. This should take about 15 minutes.
- Next, you will fill out a fairly short questionnaire regarding demographic information which would take about 10 to 15 minutes.
- The researcher will answer any questions you have prior to the interview
- Once all the questions are answered an interview will be conducted. This interview could be up to one hour and 20 minutes (times vary with each participant).

This interview will be audio recorded, so that the researcher has an accurate account of what your responses are. Are you okay with the interview being audio recorded? The researcher, the advisor, and transcriptionist will have access to the

audio interviews, however, only the researcher and the advisor will have any identifiable information about you. The transcriptionist will transcribe the interviews. Each interview will be assigned a participant number meaning the transcriptionists will have no identifiable information about you.

- At the conclusion of the interview, the researcher will ask if you have any questions, thank you for your participation and give you a \$10 gift card.
- Lastly, once the transcripts are ready, the researcher will begin analyzing the data. There will be a peer reviewer who also analyzes the data. The peer reviewer will not have access to any identifiable information about you. They will only view the transcripts that will have a participant number assigned to it.

Do you have any questions about your rights, the time requirements or the study?

Potential Risks will be addressed

In any study there are some potential risks. The potential risks for participating in this study are:

There is a potential of the loss of confidentiality. The researcher will separate the data collected from the identity of the participant. Each audio recording will be assigned a participant number. Confidentiality will be protected to the extent that is allowed by law. Also there is a potential risk for the loss of confidentiality for anything that is emailed, downloading or internet interactions.

There is a potential risk of emotional discomfort if you choose to participate in this study. Participation is completely voluntary and you may take breaks at any time. You may refuse to answer one or all the questions and you may end the interview at any time. If you feel you need to talk to a professional about your emotional discomfort, the researcher will provide you with a list of resources.

There is also a potential risk of embarrassment if you choose to participate in this study. As stated previously, you may refuse to answer one or all of the questions asked and you may take breaks at any time. In addition, you may end the interview at any time. Please be aware that the researcher has worked with sexually abused children and adults for a number of years and will treat your disclosures with respect and understanding at all times.

The last possible risk for participating in the study is coercion. Your participation is voluntary. In addition, it is important for you to understand that although you were recruited from a flyer posted in the Children's Advocacy Center or from private counselors' offices that your participation in the study is in no way connected to any services you receive from that agency or anyone else. You will not be penalized in any way for participating or refusing to participate in this study. If you decided to participate you can stop participating at any time.

Do you think you are interested in participating in the research?

If no, thank you for your time.

If yes, great! We will need to set up a date, time and location to meet.

Would you rather meet in Lewisville or Denton? Which city is more convenient for you?

Would you rather meet in a private office in the Children's Advocacy center or in a private room in the public library?

What day and time works best for you?

Do you have any other questions you need me to answer?

Thank you for your time, I will see you on

Appendix G
Informed Consent

TEXAS WOMAN'S UNIVERSITY
CONSENT TO PARTICIPATE IN RESEARCH

Title: Parental Communication and Education: Exploring Delayed Disclosures
of Child Sexual Abuse

Investigator: Beverly Bailey bbailey@twu.edu
Advisor: Joyce Armstrong, PhD jarmstrong@twu.edu

Explanation and Purpose of the Research

You are being asked to participate in a research study for Ms. Bailey's dissertation at Texas Woman's University. The purpose of this study is to explore the experiences of adult survivors of child sexual abuse. Because research indicates that reporting or disclosing is often delayed, this researcher wishes to understand the factors that are associated with delaying disclosures. You have been asked to participate in this study because you are an adult that has indicated that you experienced child sexual abuse. Furthermore, you have indicated that you have been raised by one or more biological parent.

Description of Procedures

As a participant in this study you will be asked to complete a demographic form and spend up to an hour and twenty minutes in a face-to-face semi-structured interview with the researcher. The researcher will ask you questions about the communication and level of safety education in your home growing up, the abuse, your disclosure of your abuse, and a few reflection questions pertaining to disclosing child sexual abuse in general. You and the researcher will decide together on a private location where and when the interview will happen. Possible interview locations could be a private room in the Advocacy Center or a public library meeting room. The interview will be audio recorded and then transcribed so that the researcher can be accurate when studying what you have said. In addition, the researcher will take field notes periodically during the interview. The maximum time commitment for participating in the study could be up to 2.5 hours. In order to be a participant in this study, you must be at least 18 years of age or older, a survivor of child sexual abuse who delayed disclosing the abuse, English speaking, and raised by one or both biological parent(s).

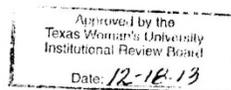
Potential Risks

The researcher will ask you questions about your experience with child sexual abuse. The researcher will also ask you questions about why you delayed disclosing the abuse and what might have helped you to disclose. There is a potential risk of emotional discomfort if you choose to participate in this study. Participation is completely voluntary and you may take breaks at any time. You may refuse to answer one or all the questions and you may end the interview at any time. If you feel you need to talk to a professional about your emotional discomfort, the researcher has provided you with a list of resources.

There is also a potential risk of embarrassment if you choose to participate in this study. As stated previously, you may refuse to answer one or all of the questions asked and you may take breaks at any time. In addition, you may end the interview at any time. Please be aware that the researcher has worked

_____ Initials

Page 1 of 3



with sexually abused children and adults for a number of years and will treat your disclosures with respect and understanding at all times.

Another risk in this study is the potential loss of confidentiality. Confidentiality will be protected to the extent that is allowed by law. The interview will be held at a private location that you and the researcher have agreed upon. The audio recordings, field notes and transcribed interviews will be stored in a locked cabinet in the researcher's office. In addition, the researcher's private office is located within a secured building.

The researcher is the only one that will have any interaction with you. The researcher, her advisor, transcriptionists and the peer reviewer will have access to the data. The data will be separated from the identity of the participants; therefore, the transcriptionists and peer reviewer will not have identifiable information on the participants. In addition, the transcriptionists and peer reviewer have signed confidentiality forms indicating that they will not reveal any of the information to anyone.

The audio recordings, transcripts, field notes, and demographic forms will be shredded within 2 years of the study's completion. The results of the study may be reported in scientific magazines or journals but your name or any other identifying information will not be included. Lastly there is also a risk of loss of confidentiality in all email, downloading and internet interactions.

The last possible risk for participating in the study is coercion. It is important for you to understand that although you were recruited from a flyer posted in the Children's Advocacy Center or posted in private counselors' offices that your participation in the study is in no way connected to any services you receive from that agency or anyone else. You will not be penalized in any way for participating or refusing to participate in this study. Again, your participation is completely voluntary and you can stop participating at any time

The researchers will try to prevent any problem that could happen because of this research. You should let the researchers know at once if there is a problem and they will help you. However, TWU does not provide medical services or financial assistance for injuries that might happen because you are taking part in this research.

Participation and Benefits

Your involvement in this study is completely voluntary and you may withdraw from the study at any time. Also you are welcome to ask questions about the study at any point in the process. Following the completion of the study you will receive a \$10 gift card for your participation. If you would like to know the results of this study the researcher will mail them to you.*

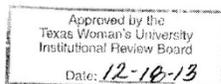
Questions Regarding the Study

You will be given a copy of this signed and dated consent form to keep. If you have any questions about the research study you should ask the researchers; their phone numbers are at the top of this form. If you have questions about your rights as a participant in this research or the way this study has been conducted, you may contact the Texas Woman's University Office of Research and Sponsored Programs at 940-898-3378 or via e-mail at IRB@twu.edu.

Signature of Participant

Date

Page 2 of 3



***If you would like to know the results of this study please indicate where you want them to be sent:**

Email: _____

or

Address:

Approved by the
Texas Women's University
Institutional Review Board
Date: *12-16-13*

Appendix H
Counseling Referrals

Counseling Referrals

If you feel at any time that you may be in need of emotional support, please seek assistance. Here are a few resources that are available:

www.therapistlocator.net/

www.locator.apa.org

<http://www.rainn.org/>

**National Sexual Assault Hotline - 800.656.HOPE
(800.656.4673)**

Darkness to Light – 866.FOR.LIGHT (866.367.5444)

Appendix I
Demographic Form

Demographic/Background questions

Demographics Information (your current status)

Participant Number _____

Age _____ Gender _____

Marital status _____

What race/ethnic group(s) would you identify yourself with?

What religion would you identify yourself as?

Background information (Home life /Growing up)

Who resided in your home while you were growing up?

At any point did the members that resided in your home change? If yes, why?

What SES (socioeconomic status) would you describe your family as?

Did your father work a full time job? _____

Did your mother work full time? _____

Who was considered the breadwinner?

Growing up was your family is religious? _____ What religion/spirituality do they practice?

Did you have any type of beliefs (racial, ethnicity, religious) that impacted your family or your beliefs? If yes, please explain

Relationships with in the family /Growing up

Did your family members trust each other?

Provide some examples about how you know they trusted each other

Did you feel like your family was supportive of you? Please give examples

Are you close (receive emotional support) with your extended family? Please describe examples of emotional support.

Do you feel like your parents listened, believed and supported you regularly? If yes or no, provide examples to explain your answer

Appendix J
Interview Questions

Interview Questions

Communicaton During Childhood

- C-1 Growing up, how would you describe the daily lines of communication (verbal vs. non verbal, strained) in your home?
- C-2 Would you say your family communicated on a deep level (feelings and concerns) or more surface type communication (daily life, school, work).
- C-3 Did you feel like the lines of communication were open to discuss anything with your parents, including sensitive topics such as your body, puberty and sex?
- C-4 Describe the types of sensitive communication in your home including the frequency and comfort level of these talks.
- C-5 Describe the lines of communication when there was a problem or crisis (financial hardships, death in the family, divorce, job loss) to deal with in the family?

Parental Education during Childhood

- E-1 Did your parents ever discuss safety issues with you such as fire safety, saying no to drugs, do not drink and drive, stranger danger, look both ways before crossing the street, and what to do if someone is breaking in the house (to name a few)? When they discussed these things did they tell you what to do or give you a plan of action?
- E-2 Did your parents (mom, dad or both) ever talk to you about child sexual abuse? If they did what did they tell you? If they did not, why do you think it was not discussed?
- E-3 Based on what your parents communicated and educated you about CSA, did you feel prepared to handle it when it happened to you? Please explain.....

Characteristics of Abuse that Delay Disclosures

- A-1 Please tell me about the abuse that you experienced as a child.
Follow up questions:
 - A-1.1 What was the relationship between you and the perpetrator?
 - A-1.2 How old were you when the abuse first began?
 - A-1.3 How long did the abuse go on?
 - A-1.4 How frequent did the abuse occur?
 - A-1.5 Describe the types of abuse that were done to you (penetration vs contact).
- A-2 Can you explain your family's reaction to the abuse and if there were any changes in your life as a result of the abuse being revealed?

- A-3 What feelings or thoughts did you have about the CSA when it was occurring compared to now reflecting back on it as an adult?

Delayed Disclosures

- D-1 Can you explain the circumstances or reasons that you delayed disclosing the abuse?
- D-2 Can you explain the circumstances that prompted you to disclose the abuse?
- D-3 Did any cultural or religious beliefs prevent or delay you from disclosing? If yes, please explain.

Eliciting Quicker Disclosures

- R-1 Do you think the lines of communication in your family had an impact on when and if you disclosed, please explain.
- R-2 Do you think that if your parents educated and prepared you more about CSA (like we do other safety topics) that it could have made a difference in how you handled the CSA and do you think it would have led to a quicker disclosure? Why or why not?
- R-3 Reflecting back on that time, what would have made you more likely to disclose sooner?

Follow up question: As a parent, what would you do, if anything, regarding your child/children and the subject of CSA.

Appendix K
Characteristics of Abuse

Table # 3

Descriptions of Abuse Experienced by the Participants

Participant	Familial/ non- familial abuser	Relationship to abuser	Age of abuser	Age at onset	The age the abuse ended	Single or multiple incidents	Penetration, touching, or exposure	Duration of abuse	Frequency of abuse
1	Family	3 Uncles	1Early, 1 middle, & 1 late Teens	5 or 6	11	Multiple	All forms	5-6 years	Almost weekly
2	Family	*Grandmother	70's	6	Almost 7	Multiple	All forms	~ 9 months	Once a week
	Non family	Family friend (male)	14	7 or 8	3-4 Months	Multiple	All forms	3-4 months	Few times over summer
	Non family Non family	Neighbor (male) *Friend	14 to 15 10	10 10	10 10	Single Single	Penetration & exposure Penetration	Once Once	Once Once
3	Family	*Grandfather	Unknown	9	9	Single	Touching	Once	Once

(continued)

4	Family	Uncle	15 or 16	4 or 5	10	Multiple	All forms	5 or 6 years	Every or every other month
5	Family	Tommy Brother	14-15	6	10	Multiple	All forms	~4 years	3-4 times with him & 1 group rape with Brothers
	Family	Buddy	Under 14	10	10	Single	Exposure & penetration for each boys	Once	Group rape with all four brothers
	Family	Leon	Under 14	10	10	Single		Once	
	Family	Steve- All brothers	7 years old	10	10	Single		Once	
6	Non family	Foster Child (Male)	16	8 or 9	8 or 9	Single	Touching & penetration	Once	Once
	Non family	Family friend (male)	21	11	11	Multiple	Touching	2+ years	2-4times
	Non family	A family member's boyfriend	25	12	12	Single	Touching	Once	Once
	Non family	* Female friend	16	16	16	Single	Touching & penetration	Once	Once

6 Cont.	Non family	Unknown Male(s)	Same age in HS	16-17	16-17	Single	Penetration & touching	Once	Once
7	Family	Father	Unknown	3	3	Single	Touching & penetration	Once	Once
	Non family	Neighbor (male)	18 or 19	4	4	Single	Touching	Once	Once
	Non family	Unknown adults	Unknown	5 or 6	5 or 6	Single	Exposure of participant	Once	Once
	Non family	*School mate female	4 th grader	4 th grader	4 th grader	Single	Penetration	Once	Once
	Non family	*Female Leader of a church group	32	12	16	Multiple	All forms	4 years	Almost daily
8	Family	Uncle	Adult	5	7	Multiple	Exposure & penetration	2 years	~once a month
9	Family	*Mother	Unknown	2 or 3	Maybe until 6-7	Multiple	Touching (maybe penetration)	Several years	Daily

9 cont.	Family	*Grandmother	Unknown	2 or 3	Maybe 10	Multiple	Touching & penetration	Several years	No data
	Family by marriage	Cousin (male)	Between 9- 11	6 or 8	No data	Multiple	All types	No data	No data
	Family by marriage	Cousin (male)	Between 10- 12	6 or 8	No data	Multiple	All types	No data	No data
	Family by marriage	Cousin (male)	Was 11, 12 or 13	6 or 8	No data	Multiple	All types	No data	No data
	Non family	Bus driver (male)	An adult	Third grader	Third grader	Multiple	Penetration	~9 months	5 days a week
10	Non family	*Athletic trainer (male)	An adult	16	16-17	Multiple	Penetration	School year & summer	~6 times
11	Family	Brother	16	10 almost 11	12	Multiple	All forms	18 months	~once every 2 weeks at times once a week

*stands for abuse by same sex

Appendix L

Emerging Themes among the Participants

Table# 4

Emerging Themes among the Participants

Research Questions	Methodology Questions (Interview Questions)	Themes
<p>RI Do CSA survivors think that educating parents on the factors that contribute to delayed disclosures would lead to quicker disclosures of CSA?</p>	<p>Data from Demographic Forms</p> <p>Current Demographic Participant's number, age, gender, marital status, race and religion</p>	<ul style="list-style-type: none"> • The mean age for the participants was 49.6 • 2 males & 9 females • 6 Caucasians, 3 Hispanics, 1 African American & 1 Bi-racial • Most reported being religious • There were 9 married & 2 single
	<p>Childhood Demographic Who resided in your home while you were growing up?</p>	<p>Most families described as Intact</p>
	<p>At any point, did the members that resided in your home change? If yes, why?</p>	<p>A few due to divorce/separation or taking in foster child</p>
	<p>What SES (socioeconomic status) would you describe your family as?</p>	<p>Middle class families</p>
	<p>Did your father work a full time job?</p>	<p>Most fathers worked full time</p>

	<p>Did your mother work full time?</p> <p>Who was considered the breadwinner?</p> <p>Growing up was your family is religious? What religion/spirituality do they practice?</p> <p>Did you have any type of beliefs (racial, ethnicity, religious) that impacted your family or your beliefs? If yes, please explain</p> <p>Did your family members trust each other? Please provide some examples about how you know they trusted each other</p> <p>Did you feel like your family was supportive of you? Please give Examples</p> <p>Are you close (receive emotional support) with your extended family? Please describe examples of emotional support.</p>	<p>A few mothers worked full time</p> <p>Fathers were breadwinners for many</p> <p>Many reported growing up religious and participating on Christian Faith</p> <p>Many reported that race, ethnicity or their religion did impact their family</p> <p>Trust between members was present in four families. Five reported no trust and two reported some members trusted each other and distrusted others.</p> <p>The majority did not feel supported by parents</p> <p>Split the participants, 4 reported receiving support, 4 stated they had no support, and 2 reported some support. No data on one</p>
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<p>Do you feel like your parents listened, believed and supported you regularly? If yes or no, provide examples to explain your answer</p> <p style="text-align: center;">Data from Interviews</p> <p><u>Parental Education in Childhood</u></p> <p>E-1 Did your parents ever discuss safety issues with you? When they discussed these things did they tell you what to do or give you a plan of action?</p> <p>E-2 Did your parents ever talk to you about child sexual abuse? If they did what did they tell you? If they did not, why do you think it was not discussed?</p> <p>E-3 Based on what your parents communicated and educated you about CSA, did you feel prepared to handle it when it happened to you? Please explain</p> <p><u>Characteristics of Abuse that delay disclosures</u></p> <p>A-1 Please tell me about the abuse that you experienced as a child.</p> <p>A-1.1 What was the relationship between you and the perpetrator?</p> <p>A-1.2 How old were you when the abuse first began?</p> <p>A-1.3 How long did the abuse go on?</p>	<p>The majority did not feel listened to by parents</p> <p>Parents taught only what they thought was relevant. School seemed to be primary source of information for some</p> <p>No discussion about CSA because:</p> <ul style="list-style-type: none"> • No perceived threat • taboo to discuss • parent(s) were victims & uncomfortable talking about CSA. <p>Did not feel prepared. Most were confused</p> <p>Familial and quality of the relationship impact disclosure</p>
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<p>A-1.4 How frequent did the abuse occur? A-1.5 Describe the types of abuse that were done to you</p>	<p>The initial abuse was mostly committed by a family member.</p> <p>More than half of victims that were abused experience more abuse at the hands of another abuser</p> <p>Vulnerability of victims for future abuse</p> <p>Homosexuality concerns when offender is same sex as victim</p> <p>Positive reactions: Sadness and concern parents felt guilt, blamed themselves, surprised by abuse, bothered that their child did not come to them, Negative reactions: anger, & rejection of the child</p> <p>Fear, anger, shame, self-blame trust/betrayal, embarrassment, uncomfortable, helplessness, dirty, not being believed and confusion.</p>
<p>A-2 Can you explain your family's reaction to the abuse and if there were any changes in your life as a result of the abuse being revealed?</p>	
<p>A-3 What feelings or thoughts did you have about the CSA when it was occurring compared to now reflecting back on it as an adult?</p>	

<p>R2 Do CSA survivors believe that the time between the incident of CSA and the disclosure would decrease if there are open lines of communication between parents and their children?</p>	<p>Reflection: Education Eliciting Quicker Disclosures</p> <p>RF-2 Do you think that if your parents educated and prepared you more about CSA that it could have made a difference in how you handled the CSA and do you think it would have led to a quicker disclosure? Why or why not?</p> <p>RF-3 Reflecting back on that time, what would have made you more likely to disclose sooner? As a parent, what would you do, if anything, regarding your child/children and the subject of CSA.</p> <p>Parent-Child Communication</p> <p>C-1 Growing up, how would you describe the daily lines of communication in your home?</p> <p>C-2 Would you say your family communicated on a deep level or more surface type communication?</p> <p>C-3 Did you feel like the lines of communication were open to discuss anything with your parents, including sensitive topics such as your body, puberty, and sex?</p>	<p>Education would have helped them identify and handle the situation better.</p> <ul style="list-style-type: none"> • Better & available communication • Family support/stability • Education • Removing the threat-safety <p>Most described closed and strained communication. A few had open lines A few had open with one parent and closed with the other</p> <p>Most of had surface, every once in a while a deeper level but mostly surface</p> <p>Was told to look things up, could talk about puberty but not sex, those talks never happened, yes I could talk about those things with my mom</p>
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	<p><u>Delayed Disclosures: What delayed and prompted them?</u></p> <p>D-1 Can you explain the circumstances or reasons that you delayed disclosing the abuse?</p> <p>D-2 Can you explain the circumstances that prompted you to disclose the abuse?</p> <p>D-3 Did any cultural or religious beliefs prevent or delay you from disclosing? If yes, please explain.</p>	<p>Fear included concern of physical harm to self or others and emotional protection of others</p> <p>To Protecting another family member from being abuse</p> <p>Because another family experienced abuse by the perpetrator.</p> <p>Remember the abuse they repressed many years ago</p> <p>Accountability</p> <p>Religion:</p> <ul style="list-style-type: none"> • Forgiveness • Sexual purity • Guilt from sin <p>Culture:</p> <ul style="list-style-type: none"> • Sex is taboo to discuss • Societal expectations of gender
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<p>C-4 Describe the types of sensitive communication in your home including the frequency and comfort level of these talks.</p>	<p>Most talks were as needed or not existent. There was discomfort for parent and child</p>
<p>C-5 Describe the lines of communication when there was a problem or crisis to deal with in the family?</p>	<p>Three types of parental communication:</p> <ul style="list-style-type: none"> • Parents talk in private and do not include the children • Children are involved in the process. • Children are present but not included
<p>Reflection: <u>Communication Eliciting Quicker Disclosures</u></p> <p>RF-1 Do you think the lines of communication in your family had an impact on when and if you disclosed, please explain.</p>	<p>Limited Communication in the home impacted when they disclosed. They did not feel like:</p> <ul style="list-style-type: none"> • they could talk to their parents about CSA • they had anyone to talk to • unavailable parents due to environmental stressors