

“It’s Complicated Because We’re Only Sixteen”: A Framework for Understanding Childhood Sexual Abuse Disclosures to Peers

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Abstract

The process of disclosing childhood sexual abuse (CSA) is very difficult for young people. Researchers have consistently found that young people disclose CSA to other youth at much higher rates than to familiar adults or authorities and indicate that CSA remains largely unknown to adults. However, no study to date has focused exclusively on understanding the process of youth-directed disclosures from young people’s perspectives. Using grounded theory methodology, this qualitative study aimed to understand the process of CSA disclosures to peers based on interviews with 30 young people from Canada and Ireland who have experienced CSA. The findings reflect the iterative and dialogical nature of the peer disclosure process and provide a framework for youth-directed disclosures that is centered on the theme of uncertainty. An underlying sense of

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uncertainty permeated the entire disclosure experience as participants' narratives reflected six stages that were interrelated in a cyclical process: experiencing internal conflict, needing to tell and choosing to confide in peers, expecting emotional support from peers, gradual telling and making sense of the abuse, burden on peers, and assessing peer responses and further disclosures. In addition, this model was not static, as with time, participants reinterpreted their peers' responses. The presented framework is consistent with previous conceptualizations of CSA disclosures, but the focus on youth-directed disclosures from the perspective of young people also allowed for a model that explains processes that are unique to peer disclosures. Practice and policy implications as well as limitations and future research directions are discussed.

Keywords

anything related to child abuse, child abuse, sexual abuse, adolescent victims, anything related to sexual assault, sexual assault, reporting/disclosure

Studies have consistently shown that experiencing childhood sexual abuse (CSA) is associated with negative, lifelong impacts on individuals' psychological, social, and physical well-being (Chen et al., 2010; Collin-Vézina & Hébert, 2005; Hillberg et al., 2011; Maniglio, 2009; McLean et al., 2013; Papalia et al., 2016). Disclosure of CSA plays an important role in the healing process for individuals who have experienced CSA, as it is a pivotal moment signifying the initiation of seeking help, gaining strength, and feeling relief (Jeong & Cha, 2019). However, disclosure is a complex process, that is, largely shaped by individual, family, community, and sociocultural characteristics and there are many barriers to disclosing CSA (Alaggia et al., 2019; Collin-Vézina et al., 2015). In fact, CSA is more difficult to disclose when compared with other forms of childhood maltreatment such as neglect, physical abuse, and psychological abuse (Lev-Wiesel & First, 2018).

Recent research has focused on uncovering the factors influencing the willingness of victims¹ to talk about CSA, as adolescents and young adults who disclose trauma typically report better mental health and personal adjustment than those who keep it a secret or those who delay disclosure (Easton, 2019; Graham-Bermann et al., 2011). However, much of the current knowledge base on CSA disclosure is based on retrospective studies with adults and file reviews of CSA cases in forensic settings. Although retrospective studies with adult survivors of CSA provide valuable insight into the disclosure process, they are subject to recall bias and reinterpretation or misremembering of past experiences. On the contrary, studies that

are based on forensic file reviews tend to include only cases of corroborated CSA and tend to focus on information gathered by police officers, social workers, and other professionals, rather than aiming to understand the victims' experiences. Therefore, researchers have recently begun to highlight the need for a life-course perspective and a stronger emphasis on understanding the lived experiences of young people who have experienced CSA (Alaggia et al., 2019; Giroux et al., 2018; Reitsema & Grietens, 2016; Watkins-Kagebein et al., 2019).

Studies have consistently found that peers are the most common recipients of CSA disclosures by adolescents and suggest that most CSA is unknown to adults (Fehler-Cabral & Campbell, 2013 ; Kogan, 2004; Lahtinen et al., 2018; McElvaney et al., 2014; Ungar, Barter, et al., 2009). For instance, Ungar, Tutty, and colleagues (2009) found that teenagers prefer to cope independently by confiding in other youth and are highly reluctant to report CSA to authorities. Similarly, other studies have found that one quarter to one third of adolescent CSA victims disclose to peers only, never making their abuse known to their parents or other adults (Kogan, 2004; Schönbucher et al., 2012).

In their large population-based sample of adolescents, Lahtinen and colleagues (2018) found that 48% of their participants had disclosed to a friend, while only 26% had disclosed to an adult, and even fewer (12%) to authorities. Consistently, in a sample of over 1,000 adolescent CSA victims, Mohler-Kuo et al. (2014) found that 43% of disclosures were to peers, whereas only 15% were to family members. Similarly high rates of youth-directed disclosures have consistently been found in several studies (Giroux et al., 2018; Jensen et al., 2005; McElvaney et al., 2014; Schönbucher et al., 2012; Stiller & Hellmann, 2017).

McElvaney et al.'s (2014) sample of predominantly adolescents aged 13 to 18 years described a context whereby young people disclosed to their peers while sharing confidences about their respective psychological difficulties. Their findings highlighted how peers offered encouragement to tell an adult of the abuse and reminded the CSA victim of the potential risk to other children if the abuse remained a secret. This helped young people understand the importance of telling an adult. While McElvaney (2016) highlights how the positive psychological benefits of peer relationships can extend to the disclosure of CSA, she cautions that peers are not always perceived positively as a potential recipient of a CSA disclosure. Young people in a study in the United Kingdom (Cossar et al., 2013) were reluctant to confide in friends, as their experiences were that they were not always believed and that friends would gossip about them to other young people. Some described friends posting messages on social media platforms, informing others of their experience of abuse without their permission. While some

young people in their focus groups spoke of not wanting to place a burden on other young people, others described how they liked spending time with friends who did not know about their experience of abuse as this provided them with a distraction from thinking about the abuse. Several authors (Lemaigre et al., 2017; McElvaney, 2016) have noted that young people who may be recipients of CSA disclosures need education about CSA, support in knowing how to respond and how to access a supportive adult.

Given the high rates of disclosures to other youth, Campbell et al. (2015) aimed to identify different pathways following initial disclosures of CSA in a sample of adolescents. Their findings suggest that peer reactions influenced the victims' willingness to be involved with authorities and disclose to others. Adult-directed disclosures were often the last step in a gradual, step-wise pattern of disclosure, which supports previous findings by Ungar, Tutty, et al., (2009) and Ungar, Barter, et al., (2009).

Despite the strong evidence suggesting that many adolescent victims of CSA disclose to their peers, as well as evidence that youth-directed disclosures shape the course of the supports and interventions provided to CSA victims, no study to date has exclusively investigated the process of peer- and youth-directed disclosures. There is a lack of knowledge in terms of why young CSA victims disclose to their peers at a much higher rate than adults and how young victims of CSA go about disclosing to other youth. Further research is needed to understand the process of youth-directed disclosures of CSA, including the specific facilitators and barriers to disclosing, as well as the mechanisms by which young people disclose to other youth, and how these disclosures shape the experience of young people who have experienced CSA. Therefore, the purpose of this qualitative study is to further our understanding of the lived experiences of young people as they relate to disclosing CSA to other youth. Using grounded theory procedures outlined by Strauss and Corbin (1990), this study aims to shed light on the process of disclosure by better understanding the causal and intervening conditions of youth-directed disclosures, as well as the actions taken by young people to disclose to their peers, and the outcomes of these disclosures. By using a grounded theory approach, the main objective of this study is to develop a framework that explains the process of disclosing CSA to other youth.

Method

Participants

Participants were recruited as part of a larger study on CSA disclosures from several agencies providing direct services to sexual abuse victims and

Table 1. Participants' Sociodemographic Information.

Characteristics	Participants (n = 30)
Country	
Canada	15 (50%)
Ireland	15 (50%)
Sex	
Female	25 (83%)
Male	4 (13%)
Non-binary	1 (3%)
Age at interview (years)	
15–17	9 (30%)
18–19	11 (37%)
20–25	10 (33%)
Self-identified ethnic/cultural group ^a	
French Canadian/Québécois	5 (17%)
European background	3 (10%)
Caucasian/White	3 (10%)
Latin American background	2 (10%)
Haitian	2 (7%)
Canadian	1 (3%)
Did not identify with any ethnic or cultural group	16 (53%)
Religion	
Catholic/Christian	5 (17%)
Jewish	3 (10%)
Atheist/Agnostic	2 (7%)
Did not identify any religious views	20 (67%)

^aSome participants identified with more than one ethnic/cultural group.

survivors, located in urban and semi-urban cities in two Canadian provinces and in Ireland. These agencies included: children advocacy centers, hospital-based clinics, and sexual violence community-based resources. The total sample of young people interviewed was 38. Thirty participants discussed peer disclosures in their interviews. Therefore, the final sample in the current study consisted of 30 individuals aged 15 to 25 years who self-identified as having experienced CSA and disclosed CSA to peers. Fifteen participants (50%) were recruited in Canada and 15 (50%) were recruited in Ireland. Sociodemographic information is presented in Table 1. Twenty-five participants identified as female (83%), four as male (13%), and one as non-binary (3%). Participants were asked if they self-identified with any ethnic, cultural, or religious group; participants were able to

Table 2. Participants' CSA Characteristics.

Characteristics	Participants (n = 30)
Age at first CSA experience (years)	
0–5	4 (13%)
6–12	15 (50%)
13–18	11 (37%)
Length of first CSA experience	
Ongoing	27 (90%)
Single event	3 (10%)
CSA revictimization in childhood	
One experience of CSA	25 (83%)
Revictimized by other perpetrator(s)	5 (17%)
Relationship to perpetrator ^a	
Family friend/acquaintance	6 (16%)
Father	5 (13%)
Uncle	4 (11%)
Male cousin	3 (8%)
Other extended family member	3 (8%)
Older teenage acquaintance	3 (8%)
Same-age peer	3 (8%)
Dating partner	3 (8%)
Adult met online	3 (8%)
Grandfather	1 (3%)
Brother	1 (3%)

Note. CSA = childhood sexual abuse.

^aSome participants reported multiple CSA experiences by different perpetrators; percentages are based on the total 37 experiences of CSA.

identify multiple groups. Sixteen participants (53%) did not identify with any particular ethnicity; five participants identified as being French Canadian/Québécois; three as having a European background; three as being white/Caucasian; two as Latin American; two as Haitian; and one as Canadian. Five participants identified as Catholic or Christian; three as Jewish; and two as atheist/agnostic; the majority of participants (67%) did not identify with any particular religious views.

Approximately one third of participants (30%) were 15 to 17 years old at the time of the interview, approximately another third (37%) was 18 to 19 years old, and another third (33%) was 20 to 25 years of age. The characteristics of participants' CSA experiences are presented in Table 2. Half of the participants in this study (50%) experienced CSA for the first time between

the ages of 6 and 12. Thirteen percent first experienced CSA before the age of 6, and 37% first experienced CSA during their teenage years (ages 13–18). Looking at the first experience of CSA, the majority of participants (90%) experienced ongoing sexual abuse that took place more than one time. Three participants (10%) reported a single event; two of these participants experienced CSA during their teenage years, and one at the age of 12. Out of all participants in this study, 25 (83%) reported one experience of abuse; three participants (10%) reported being revictimized during childhood by another perpetrator, and two other participants (7%) reported three CSA experiences by different perpetrators.

Out of the 37 CSA experiences reported by our participants, the perpetrators were as follows: family friend/acquaintance (16%), father (13%), uncle (11%), male cousin (8%), other extended family member (8%), teenage acquaintance older than participant (8%), friend of the same age (8%), dating partner (8%), an adult met online (8%), grandfather (3%), and brother (3%). Two out of the 37 CSA experiences (5%) involved multiple perpetrators at once.

Data Collection and Procedures

The current study is part of a larger study on CSA disclosures, which obtained approval from Research Ethics Boards at McGill University, McGill University Health Centre, University of Toronto, Children's University Hospital, Dublin, Our Lady's Hospital for Sick Children, Dublin, and Dublin City University. Three of the authors led the data collection process in each city (Montreal, Toronto, and Dublin) and met frequently to plan recruitment and research methods, problem solve, and discuss emerging results. Grounded theory methodology was used to understand how participants experience the disclosure process by gathering rich, in-depth data, with the goal of providing a theoretical framework that explains how individuals experience this phenomenon. Participants were recruited from community-based counseling or mental health service providers offering services specifically for individuals with a history of sexual victimization, thus ensuring that participants were already receiving support and services related to their experiences of sexual abuse. No specific definition of CSA was used, as participants were individuals who self-identified as having experienced CSA. Given that participants were already receiving services specifically for their experience with sexual victimization, all participants had disclosed the abuse prior to participating in the study.

A semi-structured interview schedule was developed to elicit participants' narratives of their experiences of disclosing CSA. The interview broadly covered the following themes: facilitators and barriers of CSA

disclosures, perceived and actual outcomes of disclosures, interactions with the legal and social systems involved after disclosing, and experiences of discontinuous or recovered memories related to the abuse and the disclosure process. The current study focused on these themes as they relate particularly to youth-directed disclosures. Sociodemographic data (i.e., age, gender, place of birth, and cultural/ethnic identity), as well as sexual abuse characteristics (i.e., relationship to perpetrator, age at the time of the abuse, and duration of abuse), were also collected as part of the interview.

Within the context of qualitative research, and particularly within a grounded theory approach, telephone interviews are perceived by participants to have positive outcomes, such as allowing them to remain in a familiar environment, reducing travel costs, reducing limitations due to geographical location, and creating a sense of relative anonymity, which frees participants to disclose sensitive information (Novick, 2008; Ward et al., 2015). Therefore, participants in Canada had a choice between conducting the interview in person or over the phone, and were offered the option of being interviewed in either English or French. Three participants chose to do a phone interview. Due to ethical concerns about the well-being of potential participants in Ireland, all Irish interviews were conducted in-person. Across the three research sites, six interviewers conducted the interviews. All interviews were audio recorded and transcribed, and French interviews were translated to English. The majority of interviews were conducted in English (76%), while nine interviews were conducted in French. The interviews lasted from 30 min to 2.75 hr.

Data Analysis

The analytic process for the larger study followed coding procedures typically used within grounded theory methodology. All authors were involved in this process. In the current study, the first author took the lead on the analysis, following the completion of all interviews, while the codes and emerging themes were discussed with the team throughout the analytical process. Interview data were transcribed and coded to develop categories or themes. Therefore, all categories were based on the data, allowing for a comparative data analysis, such that data collected from the interviews were constantly compared with emerging categories. First, data were coded based on the meaning that emerged from participants' responses (i.e., open coding). In the next stage (axial coding), relationships between these codes were identified to create subcategories around the core phenomenon of peer disclosures. Memos were written to provide a transparent trail of the analytic

process. Based on analytic procedures outlined by Strauss and Corbin (1990), the coding at this stage focused on the causal factors and facilitators of youth-directed disclosures, such as events that may have triggered a peer disclosure, and reasons why participants chose to tell another youth rather than an adult (causal conditions); the direct and indirect actions taken by young people to disclose to a peer (strategies); the broad and specific situational factors influencing these disclosures, such as barriers and the timing of youth-directed disclosures (contextual and intervening conditions); and finally, the outcomes following youth-directed disclosures such as peer reactions and any positive or negative experiences resulting from youth-directed disclosures (consequences).

At the final stage of data analysis, these categories were used to develop a model that interrelates the categories in a meaningful way (selective coding). This model synthesizes the results and describes the interrelationships between the categories or themes that arose from the interviews. Therefore, a cohesive model was developed to explain the relationships between the causal and situational factors influencing youth-directed disclosures, the actions and strategies that young people take to disclose to peers, and the outcomes of youth-directed disclosures.

As researchers and mental health professionals with experience of different service settings and client populations, each member of the research team had their own beliefs, values, perspectives, and assumptions. Reflexivity throughout the study was demonstrated by fostering dialogue among multiple investigators; all team members met frequently throughout the data collection and analysis process and discussed how their positions as adult women, mental health professionals, and researchers may impact their understanding of the participants' narratives. In addition, the quality of this study's research methods, analyses, and results was ascertained by evaluating the study against established criteria designed to determine the quality and trustworthiness of qualitative research, which include evaluating its credibility, transferability, dependability, and confirmability (Guba, 1981; Shenton, 2004; Strauss & Corbin, 1990). Credibility was ensured by adopting a grounded theory methodology, a well-established research method in qualitative investigation that has been used in previous studies of CSA and sexual victimization; by fostering familiarity with the counseling and mental health service providers where participants were recruited; and by having meaningful, in-depth discussions and debriefings among the members of the research team. Transferability was ensured by recruiting participants from two different countries, three major cities, and various recruitment sites, to collect data that were representative of a larger group of young people. Dependability was ensured by implementing a well-planned research design that follows the principles and guidelines of

grounded theory methodology. Finally, confirmability was ensured by providing a detailed methodological description, as well as acknowledging and discussing the biases and assumptions of the members of the research team throughout the study.

Results

Two thirds of the sample ($n = 30$) first disclosed their CSA during their teenage years (67%), while almost one third (27%) first disclosed between the ages of 8 and 12, and two participants (7%) first disclosed while in their 20s. The majority of participants (77%) first disclosed their CSA experience to another child or youth, while 23% of those who told a peer at some point, first disclosed the abuse to an adult. Approximately half of first-time disclosures were to a friend (53%), followed by the participant's mother (13%), intimate partner (13%), cousin (7%), father (3%), sibling (3%), school mental health professional (3%), and an adult in the extended family (3%). Most participants disclosed to their friends or best friends (96%): some disclosed to an intimate partner (43%), a cousin of a similar age (17%), and classmates (10%). Twenty-six participants (87% of those who disclosed to other youth) told multiple peers about their experience of CSA.

Core Theme: Uncertainty

Uncertainty was at the core of participants' experiences of disclosing CSA to peers. Participants reported an underlying sense of not knowing whether, how, and who to tell, how their peers might react, and what the outcomes of the disclosure would be. An underlying feeling of uncertainty first arose before telling anyone about the abuse, as participants were often unsure about whether their own experiences were considered abuse or not, leading to an initial hesitation around telling. Participants continued to experience uncertainty, even after understanding their experiences as CSA, as they were often unsure of how their peers would respond. As participants confided in their peers, uncertainty built around what exactly they were expecting from their peers, as participants often did not know what kind of support they needed from them. As participants gradually disclosed, they continued to face uncertainty with regards to how to tell and how much to disclose, using their peers' reactions to make sense of their experiences. Participants developed a sense of responsibility for their peers' well-being after disclosing CSA and began doubting their decision to confide in peers; they felt uncertain about their peers' intentions and how much support they were able to provide. Finally, participants were left with unmet needs, leading to further uncertainty about what to do next, whether to disclose to someone else, and whether others'

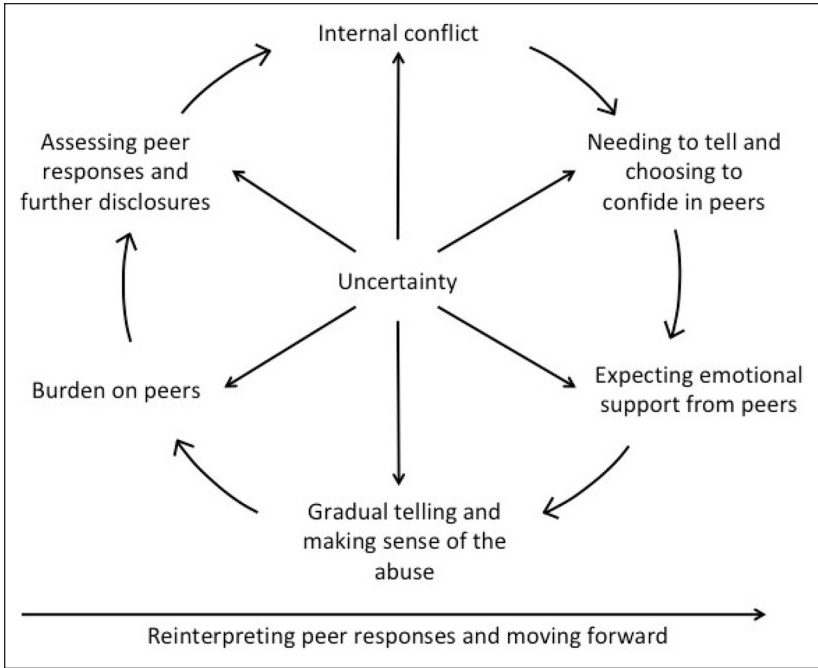


Figure 1. Framework of CSA disclosures to peers.
CSA = childhood sexual abuse.

responses would be helpful. This underlying sense of uncertainty permeated the entire disclosure process for young people, as there was much unpredictability in each decision made within every step of this process. This core theme of uncertainty is illustrated in the six key domains identified with regards to youth-directed disclosures: (a) internal conflict, (b) needing to tell and choosing to confide in peers, (c) expecting emotional support from peers, (d) gradual telling and making sense of the abuse, (e) burden on peers, and (f) assessing peer responses and further disclosures. These domains are interrelated in a cyclical process with a feeling of ongoing uncertainty at the center that permeates every stage of the peer disclosure process. As time progressed, young people reinterpreted the responses they received from their peers, changing their perceptions and understanding of their disclosure experiences. The responses from the participants in this study indicated that disclosure was not a static event; nor were young people’s perceptions of their own experiences or of their peers’ reactions. A model that integrated these six domains was developed (Figure 1) to provide a framework for understanding youth-directed disclosures. This model represents the ever-changing and

evolving perceptions of young people, who, as they disclose to their peers, reinterpret their reactions and grow to be more understanding and forgiving of their peers over time.

Internal conflict. Participants experienced a sense of internal conflict as they grappled with the decision to disclose, characterized by a feeling of uncertainty before ever telling anyone about their CSA experience. They felt a need to tell, while simultaneously being reluctant to disclose: “it seems to me like sometimes I should tell, but at the same time I shouldn’t tell, but then I-I don’t know, it’s like always a, like, complicated decision to make” (female, 19 years). Eventually, young people wanted others to know about the abuse because it was too difficult to keep it a secret; as a 15-year-old female participant said: “I wanted it to come out because I could no longer live with that, it was weighing too heavily on my conscience.” However, the adolescents in this study described wanting others to know about the abuse, without making it seem important and without wanting to say it directly. This further created a sense of internal conflict or distress:

It’s one of those things that I wish everybody just knew it, I don’t wanna tell anybody ‘cause I hate telling anybody [. . .] I just think that telling somebody just seems like this big huge problem [. . .] like you don’t really want attention drawn to it, but like, you want people to be able to, like, acknowledge it.
(Female, 25 years)

Needing to tell and choosing to confide in peers. The internal conflict stage led to a feeling of needing to tell someone, as holding on to their secret became difficult to bear. For some participants, the internal conflict led to the disclosure being blurted out, seemingly out of nowhere, to another peer. For instance, a 17-year-old male participant said “I was actually in a very bad place myself anyway, so I kind of just blurted it out.” When this happened, participants typically felt a sense of relief. However, this was still a time of confusion, as the same participant explained:

I ended up talking to a friend and then it all just came out. Even at the start of it, I didn’t even really know kind of what was going on. I was just kind of freaking out over everything. (Male, 17 years)

In other cases, after experiencing internal conflict about whether to tell, participants carefully chose whom they wanted to disclose to. Trust was very important in choosing who to tell, as one participant highlighted: “you need to, like, speak to someone; but not to, like, anyone, just someone that you trust and someone that you, like, know you’re in good hands with” (female,

15 years). Peers played a very important role in this process, as most participants chose to disclose to another youth, often for the first time. Telling other same-age peers felt safer than disclosing to adults. For instance, a 22-year-old female participant explained that “the younger people are definitely more malleable and more, like, able to hear what I’m trying to say.”

Many of the young people in this study turned to their peers when they did not want to tell their parents or felt that their parents would not be supportive, as they believed that their peers would be better able to understand them: “That feels really nice that I know I have a friend that I can go to and kind of talk to instead of my parents if I don’t feel like talking to them” (female, 16 years). Yet, choosing to tell another youth led to much uncertainty as many of the participants in this study were unsure of how their peers would respond and they were careful about which peers they told. As one participant explained: “I do think you need to pick a friend who’s going to be able to handle that kind of information” (female, 25 years). On the contrary, this uncertainty led an 18-year-old young man to decide not to tell his friends because “I didn’t know how they were gonna handle it.”

For the participants in this study, deciding to tell a peer was an invitation for their friend to join in a private and intimate part of their lives. This was sometimes done in the context of mutual disclosure, where a peer first disclosed something that was personal and important in their lives. A 21-year-old female participant explained that after her friend disclosed something personal about his family, she felt the need to tell her friend about her CSA experience: “if he’s after telling me such a big part of his life, I should really tell him the big part of my life.” Sometimes this mutual disclosure happened in the context of telling a friend who had also been sexually abused.

Expecting emotional support from peers. Participants confided in their peers in an attempt to seek emotional support and a sense of understanding. They consistently highlighted the expectation that peers would believe them and provide a sense of “being there” for them: “I was just hoping that she would be there for me, that she would listen to me” (female, 19 years). Participants hoped that their peers would provide validation and affirmation, as these were important types of emotional support that were sought out by disclosing CSA: “I was probably looking for some sort of validation, like ‘look, you’re not crazy’, like, ‘this prob- this happened” (female, 22 years). Young people were not expecting their peers to fix a problem; rather, they were seeking validation, understanding, and non-judgmental support: “I didn’t really have any specific expectations as such. For me, it was just to tell one of my girlfriends who could understand me too” (female, 15 years).

Support was seen as mutual in friendships with same-age peers and this was an important factor in the disclosure process, as many participants expected that since they had supported their friends in the past, their friends would reciprocate the support: “so when it goes both ways, since I’m there for, I was there for her, well I think that it’s, like, it makes her quote unquote happy to, like, be there too for me in difficult times” (female, 19 years). However, as they sought emotional support from their peers, participants were uncertain about what kind of support they specifically needed. Because of their young age, participants in this study had difficulty identifying and verbalizing their needs to their peers:

I think that’s why I tried to like, to talk to someone to disclose, but talk to someone with whom I have an emotional connection [. . .] because sexual abuse is a part of me so, without my even knowing it at the time, I think I was trying to like, with- without being able to have the words, without being able to say it, without being able to recognize my needs, you know, I was doing it blindly. (Female, 23 years)

Despite recognizing the need for emotional support, young people struggled to identify their own specific needs. Sometimes, this became more evident as they disclosed, by assessing their peers’ responses, determining whether this was meeting their needs, and then deciding if this was the type of support that they needed.

Gradual telling and making sense of the abuse. Adolescents in this study often did not have the words to describe their experiences, but relied on their peers to help them make sense of the events: “when I first told her, I don’t think I was calling it rape yet, but I explained what had happened and then [. . .] she was the one that used the word ‘rape’” (non-binary, 19 years). Participants gathered information from their peers’ reactions to make sense of their own experiences of abuse and inform their decisions about whether to disclose more. They were often unsure of how their peers might react and sometimes made generalized or ambiguous comments to friends, as a way to test their peers’ reactions:

Oftentimes I keep testing the waters. So y’know like, let’s say I- I see someone and before I tell him about my sexual abuse, I have, we have, we discuss different topics and it sometimes led us to talk about sexual abuse. And then I always knew exactly what he thought regarding sexual abuse. So I can really get an idea of him if I tell him about myself, well, how he will react [. . .] because if he reacts badly and you haven’t even told him and then you can really see what he truly thinks. (Female, 24 years)

As participants disclosed to their peers, they were faced with uncertainty with regards to how and how much to tell. Young people were often unsure about how the recipient would react and, therefore, they disclosed the abuse gradually, telling only part of their experience, or sharing only small pieces of information at a time. As adolescents tested the waters with their peers, they gauged the recipient's reactions to determine whether it was safe to disclose more information:

You have to sort of piece it up, like split it up and like, you know, gauge the reactions and see if like, they're gonna, I don't know, eat it up a bit more and then if they are responding well, are they responding negatively, if they're responding well, keep going, if they're not, you just- it's a bit of an experiment really. (Female, 21 years)

Young people made sense of their CSA experiences as they engaged in this "experiment" of gradually telling a little bit at a time, to determine whether their experiences of abuse had been normal. They engaged in a process of constantly assessing their peers' reactions to inform further decisions about disclosure and allowed their peers' reactions to guide their decision-making process with respect to the disclosure. For example, one participant explained why she disclosed to a neighbor at age 12: ". . . in my brain, it was like 'okay, if he reacts, it's because it's not ok; if he doesn't react, it's because it's normal'" (female, 19 years).

Burden on peers. As adolescents disclosed to their peers and assessed their initial reactions, they identified a gap between what they had hoped for and the type of support that their peers were able to provide. The initial reactions from peers were often described as awkward or uncomfortable, suggesting that peers did not know what to do when faced with a disclosure of CSA: "when I told my friends when I was 16, it was that kind of awkward, teenage awkwardness and it was kinda like, awkward silence and then they just moved on to a different conversation" (male, 19 years). When participants disclosed CSA and were subsequently supported by their peers, they gradually began to realize that disclosing CSA to someone of a similar age placed a big weight on their shoulders. Participants came to understand that although their friends could be an important source of emotional support, it was also highly demanding and difficult for them to support a friend who had experienced CSA:

Friends, they can't- although they tell you like "oh yeah, I- I'm always there for you" and everything, I don't understand, it's- it's a lot of weight on them, and they're not professionals. They, like, they're really good listeners but they're not professionals, so they- they can do- they can help you, but not in the same way. (Female, 18 years)

Participants felt responsible for their peers' strong emotional reactions following a CSA disclosure, often trying to support their peer in receiving the disclosure. As one participant explained her friend's reaction after disclosing CSA to her: ". . . basically she, she's crying but, y'know, like, it's me who experienced it" (female, 19 years). The onus of providing support was often placed back on the person who had made the disclosure, leading to uncertainty about who needed the support most and who was expected to provide the support. This was often frustrating for young people, as participants perceived their friends as being unable to sustain the support they had expected, leaving them feeling alone and misunderstood:

I feel the need to talk about it, and the girlfriends, it's- it's people who should be there to listen to you. I understand that they have limits too, but at the same time it's frustrating to hear that [it is affecting them too]. I can't force them to hear what they don't want to. But at the same time, I don't feel understood and not supported enough. (Female, 22 years)

Participants hoped to receive emotional support, but the burden that the disclosure placed on peers sometimes led to feelings of anger or resentment toward peers who did not know how to support someone who had experienced CSA. When peers attempted to support participants by asking questions about the abuse, participants perceived their peers as not giving them enough space, viewing their responses as self-serving, rather than supportive:

They're like putting it on themselves to make themselves available to me, and it's more, I know that they do genuinely care but part of my brain- but part of my brain is like "they want to feel better about themselves." (Female, 22 years)

Participants eventually recognized their peers' needs and did not want to place any more "burdens" on them by asking for their support: "I was kind of always worried that whoever I tell is going to have to carry this big burden and that is so unfair" (female, 24 years). Although participants hoped to receive support from their peers, they often experienced feelings of worry or guilt, as they felt responsible for placing a burden on their peers. Participants tended to minimize their own experiences and struggles, which made it more difficult for peers to sustain their support. This led to a great degree of uncertainty, as participants became aware that their needs were not being met:

You start feeling . . . uh, annoying, like as if you're annoying the person by telling them "oh well, I'm not okay, I cried, I had nightmares," and then at one point you start saying "okay, I'm fine," but you're not. But she still stops asking you if you're ok. (Female, 18 years)

Assessing peer responses and further disclosures. After disclosing to peers, participants often did not receive the kind of support that they needed and they assessed their peers' responses to make decisions about further disclosures:

Because at first [. . .] I told a few people about it who weren't necessarily close girlfriends and I saw that, like, people, like, withdrew or like, they weren't too comfortable, like, I was just like, "look, it's not a subject that I can talk about with just anyone," I really have to like, be able to like, trust the person, be able to really know the person well and everything before being able to tell them. (Female, 19 years)

Being aware of the gap between their need for sustained support and the limited support that their peers could provide left participants in a state of uncertainty, in which they had to decide again whether they should disclose to someone else, to whom, and how to do so. One participant talked about how she considered future disclosures, as she reflected on her past disclosure experiences with peers:

Am I going to be able to tell it to the person I'm going to be with? Am I going to be able to hide it? I don't know, it's- it's- it's just that it seems to me like sometimes I should tell, but at the same time I shouldn't tell, but then I- I don't know, it's like always a like, complicated decision to make [. . .] even if I- let's say I broke the silence like the first time when it happened, but with every new person it's- it's a new disclosure. It's a- it's breaking the silence again, y'know, it's another- it's still like allowing someone to enter into your- in your personal bubble. (Female, 19 years)

After realizing that disclosing CSA can be difficult for young recipients of the same age, participants began to conceptualize their disclosures differently. They began thinking about how to choose someone whom is not only safe to tell, but that can also provide the kind of support that would be most helpful:

I definitely think you do need to be choosy who you tell about it though, because like, it's a lot to put on somebody and I think you need to pick somebody who has, not a background of information in it, but like, they might have- they might actually go looking something up about it or something [. . .] But you don't wanna tell people about it because they're gonna think about that now and think "oh god she was only that age." (Female, 25 years)

Participants who perceived their disclosure experiences with peers to be positive and supportive decided on further disclosures, which eventually escalated to reporting to an adult, and eventually to authorities. For others

who perceived their disclosure experiences with their peers to be negative, participants decided to stop disclosing to peers and only focus on disclosures to adults and professionals who could support them. This progression represents the cyclical nature of the peer disclosure process, as with each new disclosure, participants engaged in a new cycle of uncertainty. However, as participants engaged in other disclosures following their disclosures to peers, their understanding of their own needs and their expectations of peers changed with time.

Reinterpreting Peer Responses and Moving Forward

The process of peer disclosure is not static as adolescents go through these six phases in a cyclical and iterative manner with each new disclosure; their perceptions of past reactions change over time as they grow with each disclosure and reflect on previous experiences with peers and how these influenced any subsequent disclosures. As participants reflected on their experiences of telling other young people, they realized that they had set a high standard in terms of their expectations of their peers and they were able to understand the disclosure from the recipient's perspective:

They were also 16, like, some of them were 15, and telling them like, they are not going to realize how serious a thing it is [. . .] I kinda didn't see as well how the impact on telling them and how they would feel about it. (Male, 19 years)

In this process, they began to reinterpret their peers' responses and with time, participants developed an understanding that receiving a CSA disclosure at a young age was a difficult process for their peers, and thus, reactions that were initially perceived as being unhelpful or unsupportive, were later reinterpreted within the context of a young child or adolescent who did not know what to do with that kind of information. For instance, one participant reflected back on telling a friend at a young age: "how was I supposed to tell the same- the girl the same age as me who loves me as well, like, you know, if she told me that, I wouldn't know what to have done either" (female, 18 years).

Participants moved away from the initial frustration with peers, and moved toward recognizing that they were simply another young person trying their best to process the disclosure and provide support. Many participants expressed anger toward peers who told someone else about the abuse, but participants eventually expressed a shift in their understanding of their friends' reactions: "I hated her at the moment. I was like 'no, you

did this to me, you, like, you ruined my life' and then, I figured later on that she had done something, the most amazing thing a friend could do" (female, 16 years).

Over time, participants developed a more compassionate understanding of their peers' limited ability and preparedness to process the disclosure in a helpful manner, recognizing that the reason why they were unable to support them adequately was largely due to their young age. For instance, one participant talked about her friend feeling uncomfortable when she first disclosed CSA: ". . . the thing is that it's tot—it's, ah, it's complicated because we're only sixteen" (female, 23 years).

The presented cyclical model, dynamically moving forward in time permeated participants' reinterpretations of their abuse and disclosure experiences. Throughout this cyclical process that was initially centered on uncertainty, participants were able to slowly process their experiences of abuse through multiple disclosures as they moved forward from the abuse:

It feels good to talk about it. It feels good to have talked about it because the weight is lighter and lighter; the more I move ahead, the less I have this weight on my shoulders and the better I feel. (Female, 15 years)

Discussion

This grounded theory study provides a framework for understanding the process of peer disclosures based on the voices of 38 young people. A dynamic model of youth-directed disclosures progressing through time represents the cyclical and ever-changing nature of the disclosure process, with uncertainty being at the core of this model and permeating every stage of the disclosure process.

The findings from this study reflect the iterative and dialogical nature of the disclosure process and provide a framework for understanding youth-directed disclosures that is centered on the theme of uncertainty. Although disclosing CSA is an important first step toward healing from trauma, it is a difficult process that is encountered with self-doubt and insecurity. An underlying sense of uncertainty permeates every stage of the disclosure process and in this study it was evident in young people's responses across every stage of this framework. Participants were faced with uncertainty before, during, and after disclosing to their peers. Morrisson et al. (2018), in their review of qualitative studies of youth disclosures, highlighted the permeating influence of fear throughout the process of disclosure, specifically related to the unknown or imagined consequences of disclosure. Although this experience was evident in the

current findings, the sense of uncertainty better captures the ongoing internal conflict experienced by young people, not always related to fear but rather a constant questioning of themselves and others.

The results from this study reflect various themes and processes reported in other models of CSA disclosure. Akin to the “pressure-cooker effect” described by McElvaney, et al. (2012), young people in this study first experienced a sense of internal conflict and a build up of tension as they decided whether to disclose and how to do so, eventually building up to a need to tell. Similar to McElvaney et al.’s description of the “confiding” stage, and Staller and Nelson-Gardell’s (2005) “confidant selection” stage, the present model highlights that when participants confide in their peers, they aim to seek out emotional support and trust their peers to understand and provide a non-judgmental environment to talk about their experiences. Participants made sense of the abuse as they disclosed to peers and used their responses to inform their own decisions about disclosure, leading to gradually disclosing the abuse in an iterative and dialogical process. Similar findings have been found with children and adult survivors of CSA, where participants assessed previous disclosure attempts and continuously evaluated possibilities to tell (Brattfjell & Flåm, 2019; Jensen et al., 2005).

The presented model is consistent with previous conceptualizations of CSA disclosures. However, the focus on youth-directed disclosures allowed for a model that explains processes that are unique to peer disclosures. Different from studies that have focused on adult-directed disclosures, was the finding that young people develop a sense of responsibility when disclosing to other youth, whereby they feel responsible for how the recipient makes sense of the disclosure. Participants had to support their peers in receiving the CSA disclosure, often leading to a greater sense of burden and responsibility for participants. This sense of burden left participants’ needs unmet and unrecognized, which later impacted their decisions to disclose further. This finding is consistent with McElvaney et al.’s findings on peer influence in relation to both disclosures to peers and how these influenced later disclosures to adults. Based on retrospective accounts of adult survivors of CSA, Jeong and Cha (2019) highlighted the importance of disclosure in the healing process. However, there has been little emphasis on the healing process from the perspective of young people and no other studies have sought to understand how youth reinterpret their experiences of disclosure. The current model of youth-directed CSA disclosures reflects the beginning stages of a healing process as young people reflect on their peers’ reactions and engage in self-reflection to process their own trauma.

There has been a recent trend in research pointing toward the importance of understanding the dialogical nature of CSA disclosure (Alaggia et al., 2019; Cossar et al., 2019; Reitsema & Grietens, 2016), a concept that was

evident in the current findings throughout the process of disclosing to peers. Studies with adult participants have noted the importance of experiencing a helpful response to a disclosure of sexual abuse, as negative social reactions are associated with poorer mental health outcomes such as PTSD, depression, and substance use (Easton, 2019; Hakimi et al., 2018). It has also been noted that negative disclosure experiences can be just as traumatizing as the abuse itself (Watkins-Kagebein et al., 2019). Easton (2019) found that in his sample of adult men, a helpful disclosure was one that helped re-establish trust, promoted self-efficacy, ensured child safety, and connected the child to resources. McElvaney (2019) also highlighted such positive outcomes of disclosures to peers. However, many young recipients of CSA disclosures are unlikely to be equipped to provide this level of helpfulness in their responses to CSA. As voiced by the participants in this study, when CSA victims expect their peers to manage these expectations and provide all of these supports, they often experience a sense of responsibility for the recipient's well-being. In an attempt to reduce the burden on others with their disclosure, young people often minimize the impact of CSA on themselves.

Seeking emotional support is one of the main wishes of young victims of CSA who choose to disclose (Stiller & Hellmann, 2017). Jeong and Cha (2019) found that adult survivors of CSA found comfort and empathic support from other CSA survivors. However, young people who have not disclosed their CSA experiences yet, may not be aware of others who have had similar experiences and thus likely do not know how to connect with other CSA victims. They, therefore, seek support from their peers with whom they already have a close and trusting relationship. Yet their peers may lack the necessary knowledge and skills to be able to provide the emotional support that is needed.

The participants' experience of uncertainty played an important role in their future decisions about disclosing to other peers or to adults. As Campbell et al. (2015) found in their sample of adolescent CSA victims, peers play an influential role in whether young people disclose to familiar adults, and eventually to authorities. When young people's disclosures are met with support and validation, CSA victims are more likely to pursue further disclosure, whereas when young people do not receive support and validation, they are more likely to become disengaged from the disclosure process. The emotional support that CSA victims initially receive from their peers could reduce the amount of uncertainty experienced, which could further encourage them to disclose to others. However, when young people are met with disbelief or lack of emotional support upon disclosing, their feelings of uncertainty grow and they are less likely to pursue further disclosures.

Practice and Policy Implications

The findings from this study have important implications for policy and practice. Current CSA prevention and intervention programs focus on promoting awareness and safe behaviors in children and adolescents, providing information on CSA, and encouraging young CSA victims to disclose (Fieldman & Crespi, 2002; Walsh et al., 2015). Findings from systematic reviews of school-based CSA prevention programs indicate that such programs are effective at increasing knowledge and awareness of CSA, but do not effectively address issues around CSA disclosure (Topping & Barron, 2009; Walsh et al., 2015). However, the current findings suggest that efforts should be made to support young recipients of CSA disclosure such that they can provide helpful responses to the victim and help them access the supports that they need. These implications are in line with findings from McElvaney et al. (2014) and Lemaigre and colleagues (2017), who recommend that prevention and intervention programs should be developed both for the victims of CSA and for potential recipients of victims' disclosures. By educating young people on how to respond to CSA disclosures, young people's confidence in receiving a disclosure will help victims feel more understood and better supported. Furthermore, this will reduce uncertainty for CSA victims, as their peers will be better equipped to help them understand the impact of CSA and access support and information from adults.

The findings from this study also highlight the sense of burden and responsibility that young CSA victims feel when disclosing to peers. A greater focus on supporting potential peer recipients of CSA disclosures may help reduce the sense of responsibility and fear of burdening others that CSA victims often experience when they disclose to other young people. Given that the majority of first disclosures are to peers, rather than adults, these recommendations are particularly important for bridging the gap between peer disclosures and telling a trusted adult. When peers respond with validation and emotionally supportive responses, victims of CSA are more likely to disclose to a trusted adult with the help of their peers. Interventions that are specifically targeted toward victims of CSA should not only encourage young people to disclose, but should also include an educational component on the types of support that are typically needed, as well as resources and individuals in their schools and communities to whom they can turn for this support.

Limitations and Future Directions

Despite the significant contributions to the literature, this study was not without its limitations. One main limitation of this study was that all participants

had already disclosed their abuse to at least one adult and were already in counseling for their CSA experiences. This subjects the study to a sampling bias, as the findings do not reflect the perspectives of young people who may have only disclosed to peers and never to adults, or who have never disclosed to anyone.

This study differs from studies with adult CSA survivors in that it aimed to minimize bias from retrospective accounts of disclosure by interviewing young people whose experiences of CSA and disclosure have been more recent. However, it is important to note that, while minimized, recall bias could not completely be eliminated, as some of the participants who were in their late teenage years or early twenties may have first disclosed many years ago during childhood. Therefore, it is possible that some recall bias may have influenced participants' accounts of their disclosure experiences.

Although consistent with most research on CSA, the current sample included only 4 participants who identified as male. It is important for future research to better understand youth-directed disclosures for boys and young men to address any specific barriers that they might encounter in disclosing to peers, as research suggests that there are significant differences in how boys and girls cope with trauma (Foster, 2017; Gallo et al., 2018; Manay & Collin-Vézina, 2019; Ullman & Filipas, 2005).

While a sample of 30 participants is notable for a qualitative study, the relatively small sample size limits the generalizability of these findings. As more research is conducted on youth-directed disclosures, meta-syntheses of such qualitative studies may play a crucial role in providing a better understanding of young people's disclosure experiences. In addition, future research should aim to understand whether there are any differences in CSA disclosures to peers based on abuse history, family background, and responses or attitudes from adults such as family members or professionals. Given that the current study focused on the role of peers in the CSA disclosure process, further research on peer disclosures from a broader systemic perspective should also be conducted to better understand how these are impacted by family and community factors as well as by larger sociocultural factors.

Another important area for further research would be to better understand the lived experiences of young recipients of CSA disclosures by their peers, as this is largely lacking in the existing literature. The current study provides valuable insight into the experiences of CSA victims and survivors, but given that disclosure happens in a social and dialogical context, it is important to understand the experiences of all players in this process, including those of young recipients of CSA disclosures. Taking together, the results from this

study, along with a better understanding of how CSA disclosure is experienced by young recipients, provides a foundation for developing prevention and intervention programs focusing on teaching young people how to respond to CSA disclosures.

Conclusion

In conclusion, this study provides a framework for understanding youth-directed disclosures that is centered on the theme of uncertainty. The findings from this grounded theory study warrant further research on the process of youth-directed disclosures, while providing a significant contribution to the existing literature on CSA disclosure. The experiences of young people are particularly unique and understanding the lived experiences of adolescents as they pertain to their disclosures is especially important in developing appropriate supports and implementing successful prevention and intervention programs. With such high rates of CSA across the globe, and most of it remaining largely unknown to adults and authorities, it is important to review the systems that are currently in place to support young people who have experienced CSA.

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Note

1. The terms *victim* and *survivor* are often used to describe individuals who have undergone an experience of violence, abuse, or trauma. The term *victim* is used throughout this article to refer to minors and young people who have experienced sexual abuse, while the term *survivor* is used in this article to refer to adults who experienced sexual abuse during childhood. However, we acknowledge that some individuals who have experienced sexual abuse during childhood, regardless of their age, might identify as *victim*, while others might prefer the term *survivor*. Therefore, both terms are used throughout this article to represent the

various identities of individuals who have experienced CSA. We acknowledge that individuals who have experienced CSA are not defined by their abuse experiences and person-first language is also used throughout this article.

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Ramona Alaggia, PhD, is a Professor at the University of Toronto, cross appointed between the Factor-Inwentash Faculty of Social Work, and Women and Gender Studies Institute. She is the former Factor-Inwentash Chair in Children's Mental Health (2008–2018). Her research focuses on gender and violence; child sexual abuse disclosures and mental health effects; intimate partner violence and structural

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Rosaleen McElvaney, PhD, is an Assistant Professor in Psychotherapy and Associate Dean of International Affairs for the Faculty of Science and Health at Dublin City University. She is a chartered clinical psychologist (PSI) and accredited psychotherapist (IAHIP) with more than 15 years of experience in the public health services in Ireland, mostly in services for children or adults who have experienced sexual abuse. Her research interests are in child sexual abuse, particularly disclosure of these experiences, and integrative psychotherapy.