



Parents' Experiences of Their Child's Disclosure of Child Sexual Abuse

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A child's disclosure of sexual victimization is a difficult experience for parents and has been associated with traumatization, disbelief, denial, self-blame, and clinical difficulties. To date, most studies on parents' responses have been quantitative assessments of the psychological impact of disclosure on parents. A paucity of research has qualitatively explored mothers' experiences of their child's disclosure of child sexual abuse (CSA) and fathers' experiences have been even further neglected. The current study seeks to characterize parents' experiences of their child's disclosure of CSA and to uncover the process-oriented nature of parental responses. This qualitative study, using a grounded theory approach to analysis, involved interviews with 10 mothers and four fathers whose children (3–18 years) had experienced sexual abuse. Three themes emerged from the analysis. The first theme—making sense of the abuse in retrospect—captured the process through which parents sought to make sense of their child's disclosure, focusing on why their child had not disclosed the abuse to them earlier, and how they had noticed something was wrong but misattributed their child's behavior to other factors. The second theme—negotiating parental identity as protector—reflected how parents' identity as a protector was challenged, their perception of their world had been forever altered, and they now experienced themselves as hypervigilant and overprotective. The final theme—navigating the services—pertained to parents' struggle in navigating child protection and police services, and feelings of being isolated and alone. These findings highlight the need for empathy and parental support following child disclosure of sexual victimization.

Keywords: Child sexual abuse; Sexual victimization; Parents' reactions; Disclosure; Services for parents

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A child's disclosure of sexual victimization is a difficult experience for parents, with documented responses including shock, confusion, fear, traumatization, anger, disbelief, denial, self-blame, and ambivalence (Bolen & Lamb, 2004; Elliott & Carnes, 2001; Lovett, 2004; Mathews, Abrahams, & Jewkes, 2013). Much of the literature on the child sexual abuse (CSA) disclosure process has understandably focused on the experience of the child; therefore, most of what we know about parents' reactions to their child's disclosure is situated in qualitative studies of children's experiences of their parents' reactions. Such studies have highlighted the role that anticipated reactions play in the child's

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decision-making process about disclosing CSA (Herskowitz, Lanes, & Lamb, 2007) and the variability of responses experienced. However, how parents react to their child's disclosure of sexual abuse, and how they cope with both the immediate impact and the longer term fallout from disclosure, from their perspective, have received limited attention. The aim of this current study was to address this limitation and seek to understand, from their perspective, parents' experiences of their child's disclosure of sexual abuse.

LITERATURE REVIEW

A review of previous work on parental responses to their child's disclosure of sexual abuse revealed three broad bodies of literature under which the research could be categorized. The first body of research, focusing on mothers in collusion, reflects an early perspective on mothers being blamed for their child's abuse. The second captures studies that document the negative impact of the abuse on parents themselves, while the third reflects research on how parents respond to disclosure of sexual abuse by children.

Mothers in Collusion

The first body of literature predominantly focused on intrafamilial CSA and perpetuated an image of mothers disbelieving, rejecting, and blaming their children and therefore being complicit or colluding in the abuse of their children (Summit, 1983). It was suggested that mothers experienced intense role conflict over responsibilities to support her child and allegiances to her male partner (Everson, Hunter, Runyon, Edelsohn, & Coulter, 1989). Mothers were positioned simultaneously as an object of blame, for failing to protect their children and control the perpetrator, and as a symbol of hope for supporting the victim and maintaining the home (Tamraz, 1997). The early research, primarily based on clinical reports and opinion-based literature, considered mothers' responses as negative and homogeneous and concealed the diversity and complexity of responses exhibited by mothers. Indeed, it is increasingly acknowledged that parents' response to their child's disclosure of sexual abuse is a dynamic rather than a static process and parents may oscillate between seemingly irreconcilable responses (Alaggia, 2002). No research that examined fathers' responses to abuse by mothers or female partners was found.

Impact on Parents

The second body of work considers the psychological impact on parents whose children have disclosed CSA. Psychological difficulties experienced by parents, aside from having a detrimental impact on parents themselves, may impede parents' ability to support their children in recovering from the impact of sexual abuse. Across several studies, high proportions of psychological difficulties were reported for mothers. For example, Hébert, Daigneault, Collin-Vezina, and Cyr (2007) found that at least half of their sample of mothers showed symptoms of general distress. In another study, at least one-third reported post-traumatic stress disorder (Cyr et al., 2016). Kim, Noll, Putnam, and Trickett (2007) and Santa-Sosa, Steer, Deblinger, and Runyon (2013) found that between 22% and 40% of mothers displayed symptoms of depression. Relative to studies on mothers, there is a dearth of research on fathers' outcomes with evidence pointing to a lower prevalence of psychological distress following child disclosure of CSA among fathers than mothers (Cyr et al., 2016; Manion et al., 1996). Predictors of more positive postdisclosure functioning among mothers included satisfaction with their parenting role, perceived emotional support (Manion et al., 1996), and the abuse being extrafamilial rather than intrafamilial (Hébert, Daigneault, Collin-Vezina, & Cyr, 2007). Conflicting findings have emerged in

relation to the role of mothers' history of maltreatment as a predictor of postdisclosure functioning (Cyr et al., 2016).

How Parents Respond to Disclosure

The final group of studies focus on parents' responses to the child following disclosure of sexual abuse, and specifically how such responses mediate between the abuse and children's postdisclosure functioning. As noted by Plummer (2006), the importance of the mother's role in protecting children from harm and in facilitating disclosure and recovery following CSA cannot be overstated. An early review of the literature supported the assertion that parental support predicted children's adjustment (Elliott & Carnes, 2001). However, a meta-analysis of 29 studies published prior to 2012 concluded that the association between caregiver support and children's postdisclosure functioning was weak and inconsistent (Bolen & Gergely, 2015). This conclusion has been further supported in subsequent research (Wamser-Nanny, 2017; Zajac, Ralston, & Smith, 2015). This inconsistency may reflect differences in how the concept of parental support is measured. Earlier studies relied on professionals' opinions and maternal support, for example, was often characterized as believing the child (Tamraz, 1997). Knott and Fabre (2014) operationally defined support as consisting of believing, being protective, or being supportive.

In one of the few studies that qualitatively explored dimensions of mothers' support, Alaggia (2002) interviewed mothers whose children had experienced intrafamilial abuse. The author concluded that support was multidimensional, incorporating affective, behavioral, and cognitive aspects. Cognitive or belief responses ranged from unconditional belief of the child to questioning some aspects of the child's report, to questioning the veracity of the child's report. Affective responses incorporated acknowledging the seriousness of the abuse and the child's psychological distress, minimizing the child's distress, assigning blame to the child, or displaying anger at or rejection of the child. Behavioral responses included permitting the alleged perpetrator to have continued access to the child, bringing charges against the alleged perpetrator, and accessing and participating in postdisclosure treatment for the child. Alaggia also noted the dynamic nature of parents' responses, a pattern that also emerged in interviews with caregivers of sexually abused children in South Africa (Mathews et al., 2013; Mathews, Hendricks, & Abrahams, 2016). Although the focus of this research was not on mothers' experiences of the disclosure process, these authors noted that parents were often initially very supportive of their children's disclosures of CSA, but over time support for their children was withdrawn, as parents projected onto the child their need to move beyond what happened.

Parents' responses to their child's disclosure of CSA can become psychological barriers to help-seeking behavior. Mathews et al. (2013) noted that difficulties in recovery were particularly pronounced among their sample, which was characterized by extremely high levels of dysfunction, including families where mothers were absent, mothers had themselves been raped, parents had conflict between them, or substance abuse was prevalent. Indeed, mothers may be particularly challenged in supporting and protecting their children when the alleged offender is a family member, when the mother is financially or emotionally dependent on the alleged offender, or when other factors such as substance use or domestic violence are present (Lovett, 2004). Lack of parental support following disclosure has also been found to be related to recantation (Malloy, Lyon, & Quas, 2007).

THE CURRENT STUDY

Consideration of the literature on parents' responses to their child's disclosure of sexual victimization has highlighted that discovering their child has been abused is a challenging

experience for parents. The majority of studies have utilized quantitative approaches to assess the psychological impact of disclosure on parents and to measure how parent support mediates children's postdisclosure adjustment. Surprisingly, this latter research effort has yielded inconsistent and weak findings, which may be partly attributable to the lack of clarity around how parents' responses are conceptualized (Alaggia, 2002; Wamser-Nanny, 2017). Responses are typically classified in terms of support (or absence thereof), and support is often synonymous with just believing the disclosure (Everson et al., 1989; Pintello & Zuravin, 2001). Additionally, the measurement of support has been limited by the lack of availability of psychometrically reliable and valid scales (Wamser-Nanny, 2017).

Discovery-oriented studies that have sought to characterize parents' experiences of their child's disclosure have not kept pace with studies that have measured parental support and attempted to relate support to various outcomes. Indeed, previous research has failed to take account of the process-oriented nature of parents' responses to their child's disclosure of sexual victimization. The aim of the present study was to explore parents' experiences of their child's disclosure of being sexually abused: their story of how the disclosure came about, how the process of disclosure unfolded, what it was like for them to discover that their child had been sexually abused, and their understanding of the disclosure process. The present study is distinct from other qualitative studies, which focused on mothers whose children had experienced intrafamilial abuse and included samples characterized by economic and social disadvantage.

METHOD

Participants and Recruitment

Parents were accessed through a CSA assessment and therapy center, located in a children's hospital in a large city in Ireland as part of a study on both children and parents (McElvaney, Greene, & Hogan, 2012, 2014). Details about the study were distributed by professionals to parents of children attending the center. Parents of 18 children accepted an invitation to participate (20 parents in total): one father, four couples (father and mother), and eleven mothers. All were Irish nationals. Parents ranged in age from 32 to 54 years and their children ranged in age from 3 to 18 years, with eight of the children being over 14 years at the time of the interview. All alleged abusers were male; 55% were members of the extended family (father, uncle, mother's/sister's partner, brother), and 39% were teenage boys.

Data Collection

The study received ethical approval from the ethics committees within the School of Psychology in the university and within the hospital. Participants were recruited through professionals who were engaged with the families. Thus, support was available to parents in the event that participation in the study was distressing for them. The first author had worked as a clinical psychologist in the center prior to undertaking this research and had observed the distress experienced by parents following their child's disclosure of CSA. The absence of parents' voices in the research literature motivated the authors to conduct this study with a view to highlighting the impact on parents and parents' needs following disclosure. Sixteen interviews were conducted by the first author with individual parents or couples, either in the center where their child was attending or in the family home. The interview guide included open questions about how the parent came to know of the sexual abuse, how the story unfolded, their reactions to the disclosure, and their experiences following disclosure. Interviews were audiotaped and transcribed by the first author.

Analysis

A grounded theory approach to analysis was employed (Charmaz, 2006). Following transcription of the interviews, analysis of each transcript proceeded with line-by-line coding using NVivo 11 software (QSRinternational.com), to generate categories that best described what was being said in the text. Categories within and across interviews were then compared in a process known as axial coding (Strauss & Corbin, 1998), whereby a comparative analysis of similarities and distinctions among and between categories led to the development of higher level conceptual themes. For example, the category of “struggling with believing and not believing” was later subsumed under “making sense of the abuse in retrospect.” Categories such as “it changes the way you think” and “loss of trust” were later subsumed under the theme “identity as protector.” All categories and themes emerged from the data and were not predetermined.

Throughout the analytical process, memos were written to record the conceptual process of developing categories and to provide a paper trail of the analytical process, with a view to facilitating transparency and reflexivity. A selection of the interview transcripts were reviewed by the second author, along with defined categories into which excerpts of the transcript were coded. Feedback was sought on whether the category labels reflected the meaning conveyed in the text. Where the two authors did not agree, category labels and definitions were discussed and redefined, until a consensus was reached, and thereafter transcripts were revisited and data were recoded in accordance with these redefined categories. A member checking exercise was also undertaken whereby two parents were given a printed copy of their transcript that depicted how the excerpts were assigned categories. Definitions of themes were also given to these participants. None of the participants registered disagreement with the coding. Finally, a reflexive diary was maintained by the first author that detailed her thinking on the coding and analysis process as it unfolded. This diary documented the axial coding process in particular, detailing why codes were merged with each other, the expanding definitions of the new codes or why codes were deleted due to overlapping meanings. In addition, memos were written outlining the conceptual thinking in relation to particular themes as they emerged in the data.

RESULTS

Three key themes were identified in this study to reflect the experiences of parents following a disclosure of sexual abuse by their child: making sense of the abuse in retrospect; negotiating parental identity as protector; and navigating services.

Making Sense of the Abuse in Retrospect

The first theme captures the process that parents progressed through as they constructed meaning of their children’s experiences that enabled them to make some sense of these experiences in retrospect. There were two dominant features to this process: understanding why their child did not disclose the incident of sexual abuse sooner; and noticing in retrospect that something was wrong.

Parents described speculating about and later understanding why their child had not disclosed the abuse sooner than they did. They saw the situation from their child’s point of view and identified several possible reasons why their child did not disclose sooner, including not understanding what was happening, not knowing how to disclose CSA, being told that they would not be believed, and blocking it out because the alleged abuser was a friend of their parents or someone they liked. Parents also noted that their child might have been afraid of the family fallout; for example, one mother of a 15-year-old boy noted “he thought that we’d, there’s enough going on here you know.” The child’s fear of the

alleged perpetrator was also identified by several parents as a reason underpinning the nondisclosure of the abuse. One mother of a 15-year-old girl, whose partner was the alleged abuser, noted: "I think maybe she thought he would hurt me," while another mother of a 15-year-old girl said, "He (alleged perpetrator) must have done something to prevent her (the child) from telling." However, for many parents, understanding why their child had not disclosed the abuse sooner was a process that took time, as indicated by one father of a 12-year-old girl: "we are a close family . . . we just couldn't understand why she didn't actually come tell us . . . and she could tell a stranger." Another mother of a 15-year-old boy recalled:

I couldn't understand why he waited so long do you know what I mean to come out with it . . . he could've approached his Da or I at any time but I suppose it's like Pandora's box, put it away and thought it'd never come back to haunt you but unfortunately different little things would come up and he just probably just couldn't cope any more.

One mother commented that it was harder for her daughter to disclose CSA as time passed when she had not disclosed immediately. Two parents noted that their child was more concerned about the impact that the disclosure would have on them than on their concern for themselves. A couple described the continuing struggle to make sense of why their two sons, aged 13 and 15, did not disclose the abuse. The mother noted: "but why they don't tell it's very strange . . . it's very strange I don't know I really don't know," while the father found it particularly difficult as their 13-year-old son usually told them things: "whenever he's in trouble in school he'd always tell me . . . but given the abuse there was no . . ." A mother of a 14-year-old boy recounted her surprise: "I'm surprised he didn't tell me . . . like I'd have loved to know, I would've like even to sit down and talk about it now."

Parents described how in retrospect, they realized they had noticed something was wrong but at the time attributed this to something else. Parents noted a range of patterns of behavior, such as children becoming distant from their parents. One mother of a 16-year-old girl noted: "She kept distant from me. . . I thought it was all because she wanted to spend all day with her friend," while another mother of a 17-year-old girl stated:

Whereas she used to just have her conversations openly . . . there was a lot more hiding . . . and that was very new in our house . . . and I was you know . . . what is she doing? What is she getting up to? that she can't be open about it anymore . . . she was having people around all of the time so that you know we weren't getting any time like to chat . . . just keeping herself you know a little bit removed and distant. When she told then it that it was like there was a weight off her you know she was certainly more open.

One mother of an eight-year-old boy described her son becoming preoccupied with his personal hygiene. She described the following: "I noticed he kept wanting baths an yeah am I smelly? Am I smelly? Am I smelly? And I'm saying what's wrong with you? like you know, [he] wanted loads of lynx [deodorant] and stuff like that." It subsequently emerged that the abuser had told the child he smelt like feces. Other parents thought that their child was being bullied at school. In another case, a mother of a 15-year-old boy described how her son began to get into trouble in school, something that had never happened prior to the abuse:

(He) was always a good kid in school . . . he was going without his homework he was going in without his tie, not doing his homework, sitting in class and miles away . . . none of us knew what was going on with him and I said (son) "what are you doing, what are you doing sitting in class?" D'ya know not even listening, this went on for a year anyway.

Parents also attributed changed patterns of behavior, such as moodiness, to the changes that come with puberty and adolescent development, as noted by one father of a 15-year-old girl:

Various things had been happening up to then but we didn't, we, we, because she was starting she was just coming into the teenage years she was the first girl and we just thought, went along with teenage the change and that but afterwards when we looked back ... there was a lot of signs ... now we know there was a reason for that.

For several parents, the action they took as a result of noticing these changed patterns of behavior appeared, from their perspectives, to contribute to the process of CSA disclosure. One mother of a 17-year-old girl spoke of attributing her child's behavior to a death in the extended family: "and I thought that you know this must be it this must be why she's acting out all the time." It was the counseling that this mother arranged for her daughter that ultimately led to the disclosure about the abuse.

In some cases, noticing that something was wrong contributed to their child's disclosure of abuse. Upon discovering that children were "doing things" to her child, one mother of a 14-year-old boy questioned these children, although at this time her son, aged nine, denied that anything had happened to him. Another mother of a 12-year-old girl described how her daughter was "upset all the time and crying all the time ... and I wanted to know what was wrong with her." One mother of an eight-year-old boy questioned her son after he presented her with sore buttocks: "Oh loads of questions yeah and he was no, no, no, why do you say that? Why do you say that? ... does anybody touch you like or want to kiss you or give you a hug that you don't like?" One father of a 15-year-old boy described how he saw his son sitting alone with his head in his hands and that he "tackled him" head on because "you just get a feeling but you couldn't put your finger on it." Parents spoke about how in retrospect, understanding these behaviors and making sense of them helped them, as noted by this mother of a 17-year-old girl: "when I found out what had actually happened to her it was a little bit easier in that it you know some understanding of why she behaved in the way she had."

Negotiating Parental Identity as Protector

The second theme reflects how parents' identity as a protector of their children was challenged following the discovery that their child had been abused. In order to perhaps compensate for this, several parents adopted a protective stance, described as being "over-protective" (father of 16-year-old girl), "extra protective" (mother of 7-year-old boy), and "very very protective" (mother of 15-year-old girl). One father of a 16-year-old girl noted that he would not leave his children out of his sight: "I know it's impossible but no matter where they are no matter who it is if I was rearing children again I don't care what anybody would think of me they will not be out of my sight."

In addition, parents noted that their perception of the world had been forever altered, and their sense of trust in people had been shattered. One mother of a seven-year-old boy described: "we're slightly less trusting of people really anyway I always was but now just ... nobody don't trust anybody." Parents now questioned whom they could trust in relation to their children, such as one mother of a seven-year-old boy, who stated: "I don't think I would ever let anyone stay in my home again." Her husband described how they highlighted to their children that people they knew could hurt them: "Both of us spent a long time em telling the children that it wouldn't just be strangers that would hurt them, it can be people that they know." Parents became hypervigilant and described an altered perspective on the world. For example, one father of a 15-year-old girl stated: "I dunno

who you just have to like we do watch a lot more than what and I think we were watching anyway,” while one mother of a 16-year-old girl noted “you look at things a lot differently.”

Coupled with this challenge to their sense of themselves as protectors, parents blamed themselves for not noticing that something was wrong and they struggled to understand why their child did not disclose the abuse to them sooner, as exemplified by one mother of a 15-year-old boy: “I felt he shoulda came when it was happening because I always told him if anybody done anything to him that wasn’t right no matter what they say to him that he should tell me.” Parents felt guilty that they had failed their child in some way, as illustrated by the following quotations: “How did I not see that something had happened to her? . . . in the beginning I felt I failed” (mother of 16-year-old girl); “this is where I carry guilt is that why didn’t she tell me since then . . . was it because she thought I wouldn’t do something . . . I now say oh God if I had more time if I had more my eyes open would I have seen it or like copped on” (mother of 15-year-old girl); and “Where am I after going wrong?” (mother of 12-year-old girl).

The question of trust—and loss of trust in the parent-child relationship—was another central feature of parents’ challenge to their parental identity. Some reflected upon how a temporary loss of trust in the parent-child relationship may have contributed to a delay in their child disclosing. For example, one mother of a 17-year-old girl noted: “we weren’t getting on at the time terribly well”; although this was not the situation in all cases, as referenced by another mother of a 14-year-old girl: “[Child] actually talks to me quite freely and everything that has always gone on in her life she has opened up and said it to me I know this is slightly different and it did take her a while to tell me this.” However, following disclosure, parents had a sense that the loss of trust could be repaired; one mother of a 14-year-old girl, having dissolved her relationship with the alleged perpetrator, found that the trust could be rebuilt with her child. She stated: “after that I started talking to them again and she [daughter] kinda seen the difference again me going back to the way I was, away from his hold on my brain, em and she started to trust me again.”

Navigating Services

A final theme, pertaining to parents’ navigation of child protection services, and to a lesser extent, engagement with the police, was a feeling of there being “no one there for me” (father of a 16-year-old girl) and having to manage a difficult situation alone. While a minority of parents spoke positively about their engagement with social workers, senses of isolation, despair, blaming, and frustration with waiting for social workers to respond were predominant. Several barriers to getting help were identified, including not knowing how to get help, as noted by one mother of a 14-year-old girl: “I had to go up to the local health nurse and ask her where do I go for a social worker to get in touch with (daughter) being helped you know, where do I go?” (mother of a 14-year-old girl). Delays in accessing services were referenced by one father of a 16-year-old girl: “even when we went to the police . . . it was four and a half months before we could get an appointment with (social worker).”

Parents, for the most part, were critical of how social work services responded to them. Examples of practices which mothers perceived as negative included a male social worker taking a female child into a room on her own or having no opportunity to speak with a social worker without her partner present, who in this case was the alleged perpetrator. This mother of a 14-year-old girl recalled:

They said if you have any questions ring us and I thought well that’s what I’ll do I’ll ring them tomorrow when (alleged abuser) is at work and I’ll ask them how sure are they but any time I rang them they never returned my call.

Other parents resisted engagement with social workers as they felt they were being blamed in some way. A father whose teenage son abused his two younger sisters, aged seven and five, described how he and his wife felt blamed by the social workers:

We were treated very unfairly we were treated that we were the bad ones in all this when we were the ones that were watching them . . . but you know they had forgotten about all the years that they were supposed to do something about him (their son).

Although there was limited reference to engagement with police, most of the experiences were positive, as illustrated by this mother of a 14-year-old girl: "I found the guards were fantastic"; "the guard was very good, she called out she kept in touch and everything else." The process of having to give a statement to the police varied: In one case, a community police officer visited the house and took statements; in contrast, another parent described how her 10-year-old son was taken to the police station and questioned:

He was actually traumatised by that part . . . because they had no proper people to deal with it. He was brought into a smelly like room interview room that a person that's be getting arrested would be interviewed you know with table and chair nailed to the ground like and nobody em in my eyes qualified but it was a lovely female guard that was em that had to ask (son) questions.

DISCUSSION

This study sought to explore parents' experiences of their child's disclosure of sexual abuse using grounded theory methodology. Interviews with parents revealed three themes: making sense of the abuse in retrospect; negotiating parental identity as protector; and navigating services. Parents described how, with the benefit of hindsight, they were able to reflect on changes in their children's behaviors and were now able to make sense of these behaviors as related to their child's experience of abuse and, for many, understand the difficulty their child experienced in disclosing the abuse. They described their reactions to the disclosure, in particular the challenge to their identity as protective parents and their tendency since the disclosure to engage in overprotective behaviors in response to their feelings of guilt at not being able to prevent the abuse. Finally, parents described their struggle to access services, experiencing mixed responses from professionals, and feeling alone and isolated in trying to get help for their children.

Parents' struggle to make sense of their child's experience focused on two issues. The first issue pertained to why their child did not disclose the abuse sooner or did not disclose to them before they disclosed to anybody else. The second issue was concerned with how parents retrospectively drew new connections between the knowledge now gained that their child had been sexually abused and their child's behavior prior to the disclosure. For some parents, it was noticing a change in their child's behavior that led them to question their child, which played a part in the disclosure process. Recent reviews of research in the field of disclosure have highlighted the role of being asked (Alaggia, Collin-Vezina, & Lateef, 2017) or opportunity to disclose (Morrisson, Bruce, & Wilson, 2018) as important facilitators of disclosure for CSA and suggest that children rarely spontaneously disclose CSA. For the most part, parents appeared empathic in relation to their child's difficulty in disclosing and the struggle to understand their child's delay in disclosing the abuse appeared to focus more on how this may have reflected a lack of trust in them as parents. This was often in the context of parent-child relationships that were for the most part positive. This suggests that parents would benefit from education about the multiple complex factors that influence CSA disclosure. This may help them understand that while a trusting relationship is important, children do not typically disclose CSA spontaneously (McElvaney, 2015), and the findings from the current study suggest that this may be the case

even when a trusted adult is available to them. There are many reasons why children delay disclosing. It is important for parents to understand that their child's nondisclosure is not necessarily a reflection on the parent-child relationship. This might go some way toward alleviating parents' guilt and self-blame when they discover their child has been abused.

Some of the parents interviewed in this study described how their relationship with their child had improved following disclosure in that the parents now understood the context for their child's behavior. This is in contrast to some studies that have reported a strained relationship between parent and child following CSA disclosure (Plummer & Eastin, 2007; Welfare, 2008). It is also noteworthy that parents in this study responded in a supportive manner to their child's disclosure of abuse. The impact on family relationships following sexual abuse is an area much neglected in the literature on CSA, with studies instead choosing to focus primarily on the impact on the individual who experienced abuse, despite an acknowledgment that the disclosure of sexual abuse creates a crisis for the whole family (Crabtree, Wilson, & McElvaney, 2018; Van Toledo & Seymour, 2013). Cultural differences may play a role in the differential response of parents to CSA disclosure. For example, Mathews et al.'s (2013) study was situated in South Africa in a social context whereby parents' levels of anxiety in relation to the safety of their children may have influenced their accusatory response to their child's CSA disclosure. The present study highlights the positive changes in family relationships that can be experienced following CSA disclosure, how the disclosure helped parents understand their child's behavior in a new light and empathize with their child's struggle in keeping the secret. In addition to empowering parents in learning more about their children and about the dynamics of CSA, such findings also suggest the value of parent support groups where parents share their experiences with other parents. It could be empowering for parents to be able to help other parents recognize possible signs of distress in their children and understand that this can be an indicator of abuse. The findings of this study also highlight the benefit for parents in reflecting back on their child's behavior and the process of making sense of this behavior.

The second theme captured the experience of threat to parents' identity as protector when they discovered that their child had been abused. Mothers and fathers described the efforts they had undertaken to educate their children about possible abuse and the extent to which they believed they had protected their children. The revelation about the abuse challenged their beliefs about themselves as protective parents, leaving them struggling to understand how the abuse could have happened, and for many parents resulted in them blaming themselves. The perceived role of the parent as protector is well recognized (Bowly, 1980). However, much of the literature on parents' reactions to abuse disclosure has focused on negative reactions toward the child (Coohey & O'Leary, 2008; Cyr, McDuff, & Hébert, 2013; Joyce, 1997) and has neglected to take account of parents' needs following disclosure. The findings from the current study suggest that too much focus on parents' protective abilities may overshadow the potential negative impact of destructive self-blaming. Studies that have highlighted parents' reactions (particularly mothers') of distress (Cyr et al., 2016; Hébert et al., 2007; Kim et al., 2007; Santa-Sosa et al., 2013) have neglected to capture the perspectives of those parents who are aware of their sense of themselves as protectors being compromised. In the present study, there was no evidence that parents engaged in denial but rather confronted the truth of their children's experience and suffered the pain of threat to their identity as protector. While the focus in previous studies has been on how parents can better support their children (Zajac et al., 2015), the findings from the current study underscore parents' need for support and the need for professionals to acknowledge how parents feel they have changed as a result of their child's disclosure of CSA. Such changes may include becoming more suspicious of others and changing the way they think about the potential dangers in the world for their

children. Thus, parents who were previously protective of their children may be in danger of becoming overly anxious about their children's risk level to the point that children's autonomous development is impacted. In addition, the support needs of parents who are perceived by professionals as protective may be overlooked at a time when their sense of themselves as protectors is most under threat. Mathews et al. (2013) have highlighted how child abuse services are primarily child-centered, focusing on therapeutic intervention with children and often neglecting to support parents. The current findings highlight the need for professionals to promote parents' sense of confidence and competence in themselves as protective parents.

The final theme reflected parents' experiences of navigating services, which will of course vary from one jurisdiction to another, depending on resources allocated. The question of where to find help and the speed at which services respond to families in need will vary. How services respond—that is, whether parents experience professionals as supportive or not and whether they feel blamed by professionals—is likely to have a significant impact on whether parents seek professional help for their children and on their ability to support their children (Alaggia, 2002). Some parents in Plummer and Eastin's (2007) study stated that they would not have involved child protection authorities if they had known how they would respond. Parents in the current study described the frustrations of navigating services, knowing where to turn to for help, feeling abandoned by social workers, and feeling that they were left to manage situations themselves. Little has been written about parents' experiences of accessing services but some studies have described how nonoffending caregivers have felt marginalized by child protection services following CSA disclosure, felt blamed and judged as unsupportive, and struggled to have their voices heard (Alaggia, Michalski, & Vine, 1999; Lovett, 2004; Plummer & Eastin, 2007).

Clinical experience suggests that the taboo surrounding sexual abuse in society often means that parents who encounter this issue for the first time are not familiar with statutory services and may be reticent about asking for help from their informal networks as they may be reluctant to share the information that their child has been sexually abused. In addition to a lack of awareness about where to access help, parents may be unaware of what to expect from services when they do engage. The frustrations described by parents in this study could in some way be alleviated if they were provided with information, both in terms of where to go for help and what to expect from services when they do engage. In Ireland, as in many countries, child protection services are overwhelmed with the demands placed on them in intervening when children are at risk. Child protection services prioritize risk assessment. Where the parent is not deemed to be an immediate risk to the child, families may be left to negotiate their own way through services. The findings from this study suggest that parents' distress following CSA disclosure can be exacerbated by the frustration of seeking support for their child and themselves and their interactions with professionals.

The parents in this study made little reference to their engagement with the legal system. This may have been either because they did not engage with the criminal justice system or because the lengthy delays in prosecuting crimes in Ireland meant that these parents were still at an early stage in that process. Other studies have highlighted how parents have felt abandoned and unsupported by the criminal justice system (Alaggia, Lambert, & Regehr, 2009; Eastwood & Patton, 2002). The practice of police questioning children who report abuse was described by parents in this study as traumatizing, and in some cases, children and their parents interpreted this approach by the police as implying that the child had done something wrong. At the time of this study, the field of police interviewing of children in Ireland was underdeveloped and children were primarily interviewed by social workers or in specialist CSA units. This has changed in recent years whereby police have undertaken training in interviewing victims and use purpose built

settings for such interviews, although these are still situated in police stations. Nevertheless, concerns remain in the professional community about the impact of criminal justice proceedings on children and families.

Strengths and Limitations

As noted previously, studies involving child samples have focused on how parents responded to disclosure in terms of being supportive/believing, ambivalent, or unsupportive/disbelieving (Knott & Fabre, 2014). Most of the information we have about parents' responses to CSA disclosure is gathered from adults as they reflect back on their childhood experiences (Alaggia, 2010; Dorais, 2002; Easton, 2013; Hunter, 2015; Reitsema & Grietens, 2015). One of the difficulties in relying on data from adult survivor studies is that participants often did not disclose the abuse as children, thus providing limited information on parents' responses to children's disclosures. In addition, participants are typically accessed through support services. Therefore, the data tend to reflect negative experiences of parents. Focusing on perceptions of those who have been abused can be limiting as nonoffending mothers and their children often have different perceptions of the mother's behavior (Bick, Zajac, Ralston, & Smith, 2014). The advantage of focusing on samples accessed through children's services is that less time has passed since the event, minimizing the potential for recall bias. It may also be easier to access contexts where parents were supportive of the child.

There is very limited research on fathers' experiences, despite early recognition that both parents are impacted by a child's disclosure (Elliott & Carnes, 2001). Although only a few fathers were included in this study sample, the findings do highlight differential responses according to gender. For example, some fathers in this study spoke about wanting to physically assault the alleged perpetrator and their children's concern that they may get into trouble as a result of their anger toward the perpetrator. Qualitative studies of parents such as this one provide a rich in-depth account of individual experiences. The limitation of nongeneralizability can be compensated for by the in-depth narratives of parents who took an opportunity to reflect on their own experiences of their child's disclosure of CSA. Nevertheless, more research is needed to explore fathers' experiences and understand their support needs following their child's experience of sexual abuse.

While there were no discernible differences between parents' responses to their children's experiences of CSA based on age or gender, it may be that a larger sample would enable any age- or gender-related patterns to be detected. In this study, regardless of children's age, parents engaged in overprotectiveness following their child's disclosure and shared the experience of reflecting on and now understanding their children's behavior in the context of their knowledge about the CSA. However, the behavior of their children may have varied depending upon the child's age (e.g., where a mother described her daughter as becoming more distant and interpreted this as being related to adolescence).

It is important to acknowledge the selective sampling bias in this study; most of the parents who volunteered to participate had also consented to their child participating in a larger study exploring experiences of disclosure. Parents who were unsupportive of their child's disclosure, disbelieved their child, or reacted negatively in some way to their child were therefore likely to decline to participate. The inclusion of these families is a departure from much previous research, which has tended to include families with multiple difficulties, parents who experienced considerable mental health difficulties following disclosure, or who were perceived by services to be unsupportive or rejecting (Alaggia, 2002; Mathews et al., 2016).

While this sampling bias yielded an interesting sample when compared to other studies of parents, which have largely neglected to include samples of parents who responded

positively to their children following disclosure, recruitment strategies that maximize participation of parents need to take account of such biases and aim to be as inclusive as possible to capture the broad range of experiences parents have following CSA. Targeting parents, for example, who are not currently engaged with services, who are more distrustful of services, who may be less supportive of their children, or who may be able to manage the aftermath of disclosure within their own resources may yield different findings than those produced by the present study.

Implications for Practice

The findings of this study highlight the need for psychoeducation for parents about CSA, the impact of the disclosure process on children, how to recognize possible signs of abuse, and have conversations about their children's well-being that may provide them with the opportunity to disclose when they have experienced sexual abuse. They also highlight the need for parental support following disclosure of CSA. Many of the difficulties experienced by parents in this study could have been avoided if they had had access to support services to help them understand the prevalence of delayed disclosure in children, the many reasons why children find it difficult to disclose (even to those close to them), how to respond to children following CSA disclosure, and what to expect from child protection and criminal justice investigations following a report of CSA. Psychoeducation for family members following CSA disclosure has been identified as an important intervention—normalizing emotional reactions, overcoming feelings of guilt, understanding how abuse can impact relationships, and the long-term nature of recovery for many (Cohen, Mannarino, & Deblinger, 2006; Cohen, Mannarino, & Deblinger, 2017; Van Toledo & Seymour, 2013). It is suggested here that such psychoeducation and support from professionals at an early stage for parents could help them feel reassured, possibly prevent the extent of self-blaming in which parents may engage, and empower them to reestablish their identity as protectors of their children. For many parents, their usual support structures are diminished as a result of the disclosure, as CSA is not an issue that many parents feel comfortable discussing with others; thus, their need for support from professionals is greater. In addition, the discovery of the abuse may trigger issues for the parent who has experienced sexual abuse themselves in childhood and therefore may need additional emotional support at this time. Services that focus on strengthening parents' psychological resources, helping parents understand the psychological impact of abuse and how this may manifest in their children and impact their children's ability to disclose CSA, are needed in addition to direct support for children.

The current study suggests that knowing about the abuse helped parents to make sense of their children's behavior and in some cases led to improved relationships. It was clear from the interviews with parents that they continued to engage in the process of making sense of their child's behavior and in particular how these efforts can lead to misattribution of reasons for this behavior. Such findings underscore the need for parents to initiate conversations with their children about their well-being and the reasons for changes in behavior and to be cautious about misinterpreting this behavior (McElvaney, 2017, 2019). Providing parents with information about CSA and how it impacts children would help parents identify when they need to be concerned about their child's behavior. However, it is also important that parents are educated about typical developmental behaviors associated with specific developmental stages and the various ways that these behaviors may be interpreted. Support groups for parents where parents can share their concerns as well as how relationships may have improved following disclosure could benefit parents in many ways. Parents can learn from the experience, thus improving their parenting skills and in particular helping them support their children to talk about their distress. Parents'

confidence and competence as protective parents can be promoted through enabling them to help other parents. Learning from other parents may empower parents by helping them to identify concerns at an earlier stage of the abuse process, possibly helping them to prevent the occurrence of abuse.

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