

# How Adults Tell: A Study of Adults' Experiences of Disclosure to Child Protection Social Work Services

This paper presents the findings of a study examining adult disclosures of childhood sexual abuse to child protection social work services in the Republic of Ireland. Limited literature indicates that adults can have negative experiences when disclosing childhood abuse; this is primarily owing to a lack of training, policy and guidance for practitioners, and legal complexities regarding allegations of abuse. This study used a biographic-narrative interpretive method (BNIM) to gather the experiences of adults who engaged with child protection social work services. The findings were analysed using both BNIM panel analysis and open, axial and selective coding. Six main themes were identified, and the findings are discussed under three headings: (1) *the system as a barrier* presents the various influences that acted as barriers for adults coming forward to disclose; (2) *issues of power* examines the influence of power from the time of abuse throughout the adults' life courses and their interactions with services; and (3) *the system as a facilitator* presents practice and policy recommendations based on participants' narratives and the wider research literature. Implications for child protection practice in this extremely sensitive and sometimes controversial area are considered. © 2021 John Wiley & Sons, Ltd.

## KEY PRACTITIONER MESSAGES:

- A number of complex socioecological factors need to be considered when receiving and assessing adult disclosures of childhood sexual abuse.
- Dynamics of abuse and disclosure may be similar; any understanding of an experience of childhood sexual abuse should also involve an understanding of experiences of disclosure.
- Basic practices such as providing information, clarity and frequent communication may address potentially harmful dynamics of power and control that can exist in respect of disclosure of childhood trauma.

KEY WORDS: child sexual abuse; disclosure; social work practice; child protection

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## Introduction

The social work profession in the Republic of Ireland plays a significant role in the multidisciplinary assessment of child sexual abuse referrals. This role also extends to referrals from adults who have experienced abuse in their childhood. Sexual abuse in childhood can lead to both initial and lifelong effects. Early work by Finkelhor and Browne (1985) explored the potential impacts of child sexual abuse using a traumagenic model that encompassed four categories of effect: traumatic sexualisation; betrayal; stigmatisation; and powerlessness. Various meta-analyses and systematic reviews have also shown that childhood sexual abuse can increase the risks of post-traumatic stress disorder symptoms, suicidality and engaging in victim–perpetrator cycles (Oddone *et al.*, 2001), and is associated with a higher risk of various health and mental health problems (Maniglio, 2009).

Studies exploring the experiences of those affected by abuse, albeit consisting of smaller research samples, present an opportunity for a potentially more nuanced view of the effects of childhood sexual abuse. Similar to the study presented in this paper, Dorahy and Clearwater (2012) produced a small ( $n = 7$ ), in-depth, qualitative analysis of the experiences of adult males with histories of child sexual abuse, with a focus on the concepts of shame and guilt as outcomes of an experiences of childhood sexual abuse. In their study, they discuss participants' experiences of ‘self-as-shame’, a ‘fear of exposure’, and the ‘desire to conceal’ their abusive experiences largely owing to ‘the unpredictable responses of others to disclosures’ (Dorahy and Clearwater, 2012, p. 163). Browne and Finkelhor (1986) note that ‘effects [of abuse] may be due less to the experience itself than to later social reactions to disclosure’ (p. 76).

Given the dynamics of power and control that often exist when such abuse occurs (Hanisch and Moulding, 2011), disclosure of childhood sexual abuse can be a difficult and, in some cases, insurmountable task. Most individuals who experience abuse in childhood delay disclosure, many until adulthood, with an unknown proportion who never tell (Alaggia, 2005; McElvaney, 2019). The process of disclosure can be viewed as a dialogical, fluid, interrelational and lifelong process that can take many forms. It is a process that is beset with multiple barriers and facilitators that can echo and replicate the effects of abuse throughout the life course (Alaggia, 2005, 2010; Collin-Vézina *et al.*, 2015; Hunter, 2011; McElvaney, 2015; Reitsema and Grietens, 2016; Sarsoli *et al.*, 2008). The term ‘disclosure’ is used throughout this paper to emphasise that disclosure can take many forms, including informal ‘telling’ as well as ‘official reporting’, and is a phenomenon that one has a relationship with, to a greater or lesser extent from the point of abuse, throughout the life course. Sarsoli *et al.* (2008) state that ‘disclosure-related events may be even more strongly related to the long-term consequences of childhood sexual abuse than are the characteristics of the abuse itself’ (p. 333).

Reitsema and Grietens (2016) suggest that an aspect that has received too little attention is the interactional nature of disclosure. Those attempting to disclose tend to seek a level of intimacy and trust when choosing recipients, looking for environments that offer safe and trusted spaces (Del Castillo and Wright, 2009; Tener and Murphy, 2015). The literature highlights mothers and peers as the most common recipients (Easton, 2013), with disclosures to

professionals and official authorities being less common (Munzer *et al.*, 2016). Alaggia *et al.* (2019) discuss the need for supportive environments that ‘promote disclosure across the life course’ including the provision of ‘information about sexuality, sexual abuse, prevention programming, and by asking directly’ (p. 280).

National guidelines introduced in 1999 were the first to recognise the child protection social worker's role in receiving and assessing disclosures from adults, or *retrospective disclosures* as they are known in Irish policy (Department of Health and Children, 1999; Mooney, 2018). Since then, problematic issues have been identified by Irish statutory bodies whose role it is to investigate public services (Health Information and Quality Authority (HIQA), 2018; Office of the Ombudsman, 2017). Issues have included unnecessary delays in responding to adults, potential risks posed to children owing to non-assessment of disclosures and a perceived lack of expertise in the practice of working with adults impacted by childhood sexual abuse (Coulter, 2018). In a government-commissioned review of national child protection social work services' management of allegations of abuse, under the statutory authority of the Child and Family Agency, HIQA (2018) found that:

‘... failure to consistently provide training to its front-line child protection and welfare staff on its national policy and procedures on managing allegations of abuse was a serious shortcoming. This was further compounded by the finding that some line managers providing social work practice supervision did not have the appropriate training in managing child sexual abuse referrals, including retrospective allegations.’ (p. 11)

## Study Objectives

Given the presence of such issues within the wider context of the effects and dynamics created by child sexual abuse, the central research question of this study sought to examine what it is like for adults who have experienced child sexual abuse to disclose to Irish child protection social work services. It is acknowledged that disclosure can often be an informal relating of experiences to a peer or parent; however, this study focuses specifically on disclosure to the Irish state authority for child protection (formerly known as the Health Service Executive and now Tusla, the Child and Family Agency), and the experiences of telling in that context. As mentioned earlier, under Irish national child protection guidelines, child protection services are obliged to receive and assess referrals regarding adults who were sexually abused in childhood. This is in the context that such information could lead to the protection of current and future children. Statutory authority for child protection services in Ireland transferred from the Health Service Executive to the Child and Family Agency in January 2014. As data collection for the present study was conducted in 2015, some of the participants had experience of dealing with child protection services under both agency titles. The term *child protection social work services* is therefore used throughout this paper. The study specifically sought to: (1) examine experiences of facilitators and barriers when adults disclose to child protection social work services; (2) examine if child protection social work services take account of the potential needs of, or effects

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on, adults who have experienced abuse in their childhoods; and (3) offer policy and practice recommendations informed by the findings.

## Methods

### *Recruitment and Participants*

On account of the inability of the sole researcher (JM) to provide adequate support services, it was decided not to sample participants from the general public. Information packs, which outlined the study and its potential benefits and risks, were provided to a gatekeeper agency for circulation to their clients. The gatekeeper, a nationally recognised agency providing advocacy and therapy regarding sexual abuse, provided follow-up supportive services to the participants where necessary. For most participants, therapy and advocacy workers supported them through their engagement with social work, explaining the child protection system and often attending appointments with them. Five participants were recruited. Interviews were conducted at the gatekeeper's offices to provide a familiar and comfortable space for the participants, and the following inclusion criteria were applied:

- An adult with experience of childhood sexual abuse
- Age over 19 years
- Currently accessing, or has recently accessed, therapeutic services related to his/her experience of abuse
- Current access to these therapeutic services
- Formal disclosure/referral has been made to child protection social work services
- Capacity available to commit to a 60–90-minute face-to-face interview
- Competent in the use of English language

Adults aged 18 were excluded from the study as there is potential for active engagement with child protection social work services at this age in respect of child protection concerns in existence prior to them turning 18. This criterion was adopted so that participants would not feel restricted when discussing their contact with child protection social workers. The sample consisted of four males and one female; all were aged between 30 and 50 years old. It was possible to ascertain, from the narratives provided, that the average age at which abuse was experienced was nine-years old, with an approximate average delay to disclosure of 23 years, with one participant disclosing for the first time 40 years after the abuse took place.

### *Data Collection and Analysis*

Data were gathered using a biographic-narrative interpretive method (BNIM) and analysed using the BNIM panel analysis method (Wengraf, 2001), as well as the development of themes via open, axial and selective coding (Bryman, 2012). BNIM originates from a narrative biographical method originally used in a study conducted in the 1970s examining the experiences of Holocaust survivors (Fischer-Rosenthal and Rosenthal, 1997). It is recognised for its effectiveness in encouraging participants to express their experiences (Mooney, 2021; Peta *et al.*, 2019; Wengraf, 2001). The method is appropriate for smaller samples (Jones, 2003; Peta *et al.*, 2019) and

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compares favourably to similar narrative methodologies (Corbally and O'Neill, 2014).

Data collection is split into three sub-sessions. The first session involves the use of a SQUIN (a 'single question used to induce narrative'), which seeks to prompt a free-flowing narrative related to the central research question. Once posed, the interviewer refrains from prompting, directing or intervening until the participant is satisfied that he or she has provided all the information that he or she wishes (Wengraf, 2001). This non-directive quality assists in affording control and power to the participant (Chamberlayne and King, 2000; Mooney, 2021). The SQUIN used in the study asked participants what it was like for them to disclose experiences of childhood sexual abuse to child protection social work services.

The second sub-session takes place after the participant has shared his/her response to the SQUIN and following a short break during which the researcher makes notes and plans for a series of follow-up questions. Control and power are retained by the participant, or ceded by the researcher (Jones, 2003), during this session. Any questions posed are in the order in which they arose during the interview and in the words used by the participant (Wengraf, 2001). The final element of data collection is an optional third sub-session. This sub-session allows for a separate, unstructured interview (Wengraf, 2001, 2017). This option was not used in this study as it was felt that an unstructured, researcher-led interview would negate the efforts to respect power, control and narrative continuities in sub-sessions one and two (Mooney, 2021).

Interviews were transcribed by the researcher, and the first interview conducted was initially analysed using the BNIM panel analysis method. Wengraf (2001) suggests that singular, one-person analysis of BNIM data may be weak, limited or partial. The rationale for using the panel was to disrupt the researcher's inherent biases, preconceptions and closeness to the subject matter, exposing the researcher to others' perspectives on the data prior to commencing open, axial and selective coding of all transcripts. The panel used for this study included a child protection social worker, an advocacy worker in the area of sexual violence, a sociologist, a sexual assault treatment unit professional and a former national director of children's services in Ireland.

For this process, one transcript was separated into two data streams. The first stream, the biographical data chronology, contained 'facts' of the participant's story, in chronological order, with all subjective terminology and references removed. These data included information such as dates, times, places, actions and people. The panel was then invited to comment on each 'fact chunk' and to engage in 'future blind' hypothesising (Wengraf, 2017, p. 36) by putting forward what they thought might occur next in the sequence and what the adult may have experienced. Hypotheses were then either confirmed or refuted by the presentation of the next data chunk in the chronology (Wengraf, 2001, 2017).

Once the entire transcript had been exhausted, the panel were presented with the second track, the text structure sequentialisation. This included data chunks, corresponding to those presented in the first stage, but including the participants' perspectives, language and context. The panellists commented on these, in light of the previous stage, and themes regarding *power*,

**'Any questions posed are in the order in which they arose during the interview and in the words used by the participant'**

**'Themes regarding *power*, *infantalisation*, *experience of disclosure* and *facilitators* emerged'**



*infantalisation, experience of disclosure* and *facilitators* emerged from conversations with the panellists. Data produced from this process were then used to break down the researcher's own potential biases and assumptions (for more detail on the panel process, see Mooney, 2021; Wengraf, 2001, 2017).

Following the BNIM panel analysis, coding via open, axial and selective coding techniques was conducted within NVivo 10 software (Bryman, 2012; Ryan and Bernard, 2003). The methodology allows for data collected via BNIM interviews to be analysed using a different methodology (Wengraf, 2001). While predominantly associated with grounded theory research (e.g. Charmaz, 2006), open, axial and selective coding techniques are recognised methods through which themes can be identified and theory developed from qualitative data. Open coding on the five transcripts resulted in an initial 61 open codes. These were then analysed to establish axial codes which identified similarities and differences between cases, metaphors being used, theory-related themes and indigenous typologies or categories such as those relating to policy or law, or specific practices experienced by the adults (Ryan and Bernard, 2003).

Once the open codes were established, the researcher allowed the axial and selective stages of coding to be influenced by the findings of the BNIM panel analysis process. This process produced selective codes that arose as relevant across cases. Therefore, the full BNIM method (collection and panel analysis), while not used with all transcripts, still retained a beneficial purpose in the overall analysis.

### ***Ethical Considerations***

The author is a qualified social worker and acquired additional training in crisis intervention prior to the fieldwork stage. External professional supervision was also sought during both the data collection and analysis stages to deal with issues of self-care. The participants of the study were provided with information sheets prior to taking part. Participants were advised that their participation in the research study was voluntary, and that at any point they could refuse to answer any question or stop participating. The contents of the information sheet were again considered prior to the research interview, and informed consent was sought at this time. Ethical approval was received for this study from the Research Ethics Committee at the National University of Ireland, Galway. All transcripts were anonymised via a coding process, and pseudonyms were later attributed to each participant. All geographical and other identifying markers were removed prior to analysis.

### **Findings**

Following analysis, six overarching themes were identified: the adult; disclosure; interaction; information; engagement with social work; and reflection. Representative examples of these qualitative data are presented here and will be discussed in the next section (see the Discussion) under the headings: the system as a barrier; issues of power; and the system as a facilitator.

### **Theme 1: The Adult**

Participants revealed aspects of themselves as individuals, their family lives, their experiences of childhood sexual abuse and how these have impacted their lives, and their experiences of disclosure. Many of the participants also spoke about issues affecting their lives which they related directly to the abuse that they experienced in childhood, and about how these impacted their disclosure; others believed these issues to be unrelated or they were not quite sure:

‘People ... ya know ... some people don't even realise ... what way sexual abuse affects them like ya know, the way they are, their personality like ya know. So, I just think that there should be basic consideration to, at least try to imagine ... how ... that person is feeling coming to meet you ... Are they nervous, are they anxious?’ (Alan)

‘One of the reasons I didn't come forward with this information was because of who they are ... they weren't random strangers on the street.’ (Patrick)

‘My road down the whole reporting began in ahm ... probably about ... when I began going off the rails, if you like, my personal life, drug abuse, alcohol abuse.’ (Tony)

‘There was a time, I'm not now, I was a suicide risk ... not necessarily just to do with this [the abuse], to do with the addiction, everything, depression it was all rolled together.’ (Patrick)

### **Theme 2: Disclosure**

This theme includes examples of the participants' experiences of, what they saw as, facilitators and barriers to disclosure. Examples of barriers that were experienced included those from within, not finding the courage and family dynamics in the context of fear of disrupting the family structure:

‘I couldn't find the courage like, I threatened it long, many times like ya know that I'd go forward and just contact someone and just let them know that it's confidential like ya know just do it in some way that he's out of harm's way, but I didn't like.’ (Alan)

‘I supposed I was fearful what was going to happen ya know, for my family and primarily for myself, but mostly for my family, my mother and father, and me sister and what the fall out would be.’ (Tony)

Examples of some of the facilitators that participants shared included a desire to protect current and future children who may be at risk from the individual or individuals who had abused them in childhood, and initially seeing child protection social work services as a source of help and support. Of note is that some participants expressed their awareness of the policy and legal requirements for professionals to report to child protection social work services:

‘My primary concern was to make sure ... that there was every ... every possible mechanism in place to stop the individual from ... further ... you know abusing, you know sexually abusing other children 'cause he was still practising.’ (Alan)

‘I said, hold on, if there's an outside agency, there's an intermediary there that someone has to explain themselves to and I have a buffer and it's, it's live and real as opposed to I said this and just get shouted down and just get ate.’ (Patrick)

**‘Examples of barriers... included those from within, not finding the courage and... fear of disrupting the family structure’**

'[Psychiatrist] turned around to me and said you know [Jane]... I have a duty of care and a legal obligation to report this to the [child protection social work services].' (Jane)

### ***Theme 3: Interaction***

Once a formal report had been made, the participants experienced a range of interactions and communications with child protection social work services. Delay and a lack of information, or what was experienced as withholding of information, and, in some instances, interpersonal interactions featured among examples, with some participants sharing the impact of these interactions. Cancellation of meetings by social workers and the physical environment in which the meetings took place featured among some participants' experiences:

'So, I got this letter and I didn't, it was very short and it was very ... am, we have received information and we would like to speak to you. So, it was very officious, it was ah ... it wasn't very comfortable to receive in the sense that ... It was just very officious, it was very cold.' (Jane)

'The start of the process was really good ah, I felt very, well supported here and I thought the [child protection social work services] behaved really well, they were professional about it... they, they said all the right things.' (Patrick)

'She didn't turn up ... ahm ... she phoned ... after ... the time. So, I spent an hour in counselling, in a rage ... ah ... and then she rang after the hour that I was in, to say that she couldn't make it that she had got held up in court ... If she was going to be late she should have rang.' (Tony)

In the context of the physical environment, the following are examples of some of the experiences. The first describes a meeting which took place in a hotel bar, while the second took place in a children's playroom:

'I sat down with [social worker] and the other girl who was with her and there was people behind us having dinner and it was just a close bar, pub bar ... hotel bar, there was kids running around and ... [social worker] didn't really go into any detail about ... thankfully she didn't really ask me any, you know, intimate details about what happened or whatever but she did use ... really like ... the language she used, anyone that was sitting close to us like and I'm like pretty sure people who probably heard the language she was using would have been in no doubt that I was like sexually abused as a child.' (Alan)

'... and then back into the crazy little room for little people, and am ... toys that were really old, I was like Jesus could you not go down to the [charity service] and get new ones, like it was just really sad, the place.' (Alan)

One of the key frustrations expressed by the participants was the element of delay in the processing of their disclosure and the frequency of communication between the social worker and adult:

'... am ... wrote the letter and went to the [child protection social work services]. Then it went into ... the longest most protracted ... undermining thing in the world ... ah ... it was 20 months 'til I heard something again from them.' (Patrick)

**'She didn't turn up ...  
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rage'**



'Anyway, we wrote a letter and ah ... it took about six weeks ... to get a reply ... initially ... I gave her great detail in it and she said to me that she would have to talk to her ... manager or somebody at the time to see where they would go ... 11 months later ... 11 months ... they came back to me.' (Tony)

#### **Theme 4: Information**

Following disclosure and experience of the interaction with services, this theme brings together data in respect of the information received or sought from child protection social work services. The predominant finding was that information was insufficient to afford a clear picture of what was happening with the assessment. Examples included a lack of clarity about what would happen next, when the perpetrators would be informed and practical details, such as how many people would be interviewing them [the participants]:

'I think we only had two responses from them out of maybe ... 'bout 20 ... attempts to contact them to see what was going on ... they said they would tell me ... when the letters [to the perpetrators] had actually went out and they didn't, it was only after chasing and chasing.' (Patrick)

'I didn't get anything about how many people would be there, when I was travelling up in the car I was thinking, I don't know. How many people am I walking in to here.' (Alan)

Similar metaphors were used by the participants following the sharing of their disclosures and subsequent delays in social work responses. Examples of such metaphors included expressions such as entering 'limbo' and 'pulling the pin on a grenade'. The final quote by Patrick in respect of this theme explains how such uncertainty and delay might impact an individual affected by childhood trauma:

'... 'Cause you took the pin out of the grenade and you count to ten and ... (tapping table) months later, still going on ... and you know I still don't know where I stand.' (Patrick)

'So that left me in limbo as to, should I report to the [police], are they going to proceed, are they not going to proceed, are the [child protection social work services] doing something about it, are they not doing something about it, what's social work going to do?' (Tony)

'That void is going to be filled with something ... and usually the imagination of somebody who has been sexually abused isn't necessarily the ... straightforward imagination. It's probably going to be more paranoid, more ahm, shame and guilt ... and all those sorts of things and ahm ... [child protection social work services] must know this, some of them have to have read a book on this somewhere, they must get it even vaguely intellectually if not from a lived experience or not from having worked closely with people to go "this is important".' (Patrick)

#### **Theme 5: Engagement with Social Work**

Participants also shared their thoughts on engaging with social work. Examples included expressions that there was a lack of professionalism, or competency, on the part of social workers. There was also acknowledgment of the complex and uncertain legal and policy environment in which social workers operate, while also having responsibility for current children at risk of harm:

**'The predominant finding was that information was insufficient to afford a clear picture of what was happening with the assessment'**

**'Examples included expressions that there was a lack of professionalism, or competency, on the part of social workers'**

'I felt sorry for them... that they were put in that situation that it was like, here's the new guidelines don't fuckin ... mess it up, if someone calls you be sure you photocopy that and read that out to them. Meanwhile back at the ranch they are looking after all these little people who are so distressed ... I felt they were completely ill equipped to deal with what I was talking about, so.' (Jane)

'Well the first thing about it was ... the level of professionalism wasn't there, ya know, arranged the meeting and then didn't turn up for the meeting, but then no phone call until after the fact ... then a second meeting they took a statement I gave great detail and it took them six weeks to come back, with anything. And then they actually in fact come back with nothing ... didn't help me out ... like something as serious as that.' (Tony)

'I get the legal aspects and all that and I get the frustration that if you are trying to do something like that and somebody has [money] and a solicitor they can make it go away by doing "a technicality", you know, that's, I get why they need to be very careful and cagey and all that, I understand all that.' (Patrick)

'It was tough ... but you know I suppose ... if there's somebody coming along and giving a false [statement], you've got to, you got to you know, you can't take everybody at their word, you know and if there's somebody coming along giving false stuff, I don't know if that's the reason for it, I presume it is I don't know, I haven't a clue.' (David)

### ***Theme 6: Reflection***

This theme gathers the participants' reflections on their overall experiences of disclosing to child protection social work services. They shared their sense of frustration and, in some cases, disengagement from the social work process, and the impact of this in the context of their trauma:

'It only intensified the trauma for me, it only got me to a worse place, it didn't make things better for me it made things worse for me ... to the point where I actually just threw the towel in and walked away, for ten years.' (Tony)

'Something that's very personal like ya know, that you're going to disclose and speak to someone. As I said like if you haven't told those closest to you about it, like ya know, and you're going to tell a, you're going to talk to a stranger about it you know.' (Alan)

Participants, while reflecting, also shared thoughts on what they wished would happen or what they expected would happen when disclosing to child protection social work services:

'... bit of clear communication could have sorted a lot out and I could have been kept informed ... these are the important things.' (Patrick)

'Consider that those, the people you're going to meet are probably all that week leading up to it thinking about it, going through it, re-living what's happened to them, ya know, going back to a place where they don't necessarily want to be, want to visit, like ya know. All these things like that have to be taken into account.' (Alan)

'It needs to be a statutory thing, I'm not, ya know there should be a standard protocol if someone makes a report, doesn't matter what age they are, that there is a support plan for the person and a support plan for the person who's receiving the information.' (Tony)

**'It didn't make things better for me it made things worse for me'**

Unfortunately, for the adults who participated in this study, the predominant experience of engaging with social work services was negative; the following extracts from across the sample are examples of this:

'So yeah, I think the [process] was kind of disappointing and just unnecessary stress ... ahm ... that there was no need for.' (Patrick)

'It was very few encounters I had with them, two or whatever, but it wasn't good, it wasn't good at all like. It was shocking, when you ... like ... when you take the actual subject matter, what the complaint is and stuff like ya know ... ahm ... yeah that's more or less my experience.' (Patrick)

'At the end the little girl at the end who was taking the notes said, "that was a lot of talk" she said. And that was kind of hurtful. She said, "that was a lot of talk" and when I went out [therapist] said to me "that was tough".' (David)

'To this day I have no idea what happened ... never ... I walked out of the room, I sent her more e-mails ... ah ... I have never been told ... I never got a follow up ... I did get a follow up, sorry, I got told "you'll never be told" ... that's what I got told.' (Jane)

'... and then you finally get the courage up ... to tell somebody about it, somebody who you think is going to do something for you ... and you become a victim again ... you become a victim ... of ... the system. And that's not changing, that's never going to change in this country.' (Tony)

**'To this day I have no idea what happened ... never ... I got told "you'll never be told" ...'**

## Discussion

The effects of childhood sexual abuse are individual and lifelong. The impact and dynamics of such abuse can play out in the individual's relationship with disclosure, leading to potential for re-traumatisation and further harm when negative responses or silencing occur (Spaccarelli, 1994). This study sought to examine the experiences of adults when disclosing childhood sexual abuse to social work services in the Republic of Ireland. Six themes were identified, and the key findings are discussed under the following headings: the system as a barrier; issues of power; and the system as a facilitator.

### *The System as a Barrier*

In Ireland, issues such as poor administration and communication, undue delays and a lack of training and support for staff have been identified in respect of assessment and management of adult disclosures of childhood sexual abuse (Coulter, 2018; Health Information and Quality Authority, 2018; Mooney, 2014, 2018; Office of the Ombudsman, 2017). The adults who participated in this study experienced many of these shortfalls. They noted experiences on an interpersonal level, highlighting what they perceived as a lack of expertise, competency and professionalism on the part of the social worker with whom they met. These were compounded by wider systemic issues, including a complex Irish legal context where there is an absence of a specific legislative framework underpinning assessment in this area.

**‘A stream of litigation ... by persons against whom allegations have been made ... has made state services wary’**

The current relevant legislation (Child Care Act, 1991) was enacted prior to recognition of the role of child protection social work in respect of retrospective disclosures (Department of Children and Youth Affairs, 2020; Mooney, 2018). Since the recognition of retrospective disclosures in Irish child protection policy in 1999, there has been a stream of litigation in the form of a judicial review of child protection decisions taken by persons against whom allegations have been made (Mooney, 2018). It has been argued that such litigation has made state services wary of proceeding with such assessments (Department of Children and Youth Affairs, 2020; Mooney, 2018). These systemic issues, on a macro level regarding law and policy, and on an interpersonal level regarding social work practice, led to negative experiences for the participants of this study. While, by the design of the study, all participants had engaged with social work services, when reflecting on their overall experience, many wished they had not engaged and some had ceased their engagement. Future research using a broader sample should examine if such interpersonal and wider systemic issues are acting as barriers, deterring others from coming forward.

### *Issues of Power*

Power is widely recognised in the literature as a significant feature of an experience of childhood sexual abuse (see Hanisch and Moulding, 2011). In the present study, power took different forms, for example: policy and legal obligations upon professionals to report abuse; official correspondence by letter or phone from child protection social work services to the adult; the nature of the physical and relational environment during disclosure; and delay in follow-up or provision of information. It is important for social workers and services to understand power in the context of experiences of abuse and how individuals come to disclose or not disclose.

McGregor (2016) argues that power is multidirectional, non-linear and neither good nor bad, and draws on Cohen's (1985) position that power exists in all places in different levels and to different degrees. Foucault (1976) speaks of power as something that is resultant from relationships, being neither bad nor good but something that can be used to either end, and he identifies the complex interplay between power and subjectivity that has specific pertinence in respect of child sexual abuse. Disclosure to social work services encapsulates aspects of power on multiple levels: social, cultural, law, policy and practice. It is the locus where knowledge is created; the moment of transfer of a narrative of abuse into information used to assess child protection concerns. Disclosing sexual abuse can be re-traumatising, reinforcing perceptions of powerlessness, loss of control, and loss of trust in others and those in authority (Browne and Finkelhor, 1986). Alaggia (2005), Hunter (2011) and Spaccarelli (1994) suggest that dynamics of abuse can be replicated during disclosure if these relationships of power are not recognised; iatrogenic harm may follow in terms of intense anxiety, drug and alcohol use, anger, distress and fear.

This power, consciously or unconsciously actioned by social workers, appeared to create a sense of unease and stress among participants. What seem to be routine processes, for example, receiving an initial letter from social work services and preparing for an interview, may have a higher significance for an adult owing to the trauma that he or she has experienced. The issue of ‘delay’

**‘Disclosing sexual abuse can be re-traumatising, reinforcing perceptions of powerlessness’**

characterised some relationships of power, either in terms of social workers' delays in responding to disclosures and carrying out assessments, or in contacting third parties such as family members or alleged perpetrators. The findings show that participants were impacted by how they had lost control once their story had been handed over. Similar metaphors were used by participants emphasising the powerlessness that they experienced following the sharing of their stories and subsequent delays in social work responses. These included the expressions: 'falling off a cliff', 'limbo' or 'pulling the pin on a grenade'.

It can be argued that such problems can more readily arise when there is a lack of policy and guidance, and perhaps even a code of professional behaviour in this very context, to assist social workers and those adults coming forward. Higher social work workloads, lower staff retention and the emotional labour connected with practice in the area of sexual violence and trauma also contribute. Further research regarding social work training and support in this area is necessary, as these findings highlight that specific needs related to power, control and potential for re-traumatisation were either not considered or neglected.

### *The System as a Facilitator*

The narratives provided by the participants in this study present examples of how the current Irish child protection system of receiving and assessing adult disclosures has a potential to re-traumatise. One participant, Tony, shared an experience of going 'in[to] a rage' when his social worker did not turn up to his appointment. Social workers need to be resourced to understand the impact of childhood abuse on the adult, and the power dynamics that are created in these circumstances. There is also a need for social workers to develop an ability to hold two different points of view in tandem. For the adult, the disclosure is a telling of his/her experience of abuse in childhood, whereas, for the child protection system, the disclosure constitutes a set of information to allow for assessment of potential risks to current children. While experiences tended to be negative, the participants did use their initial free narratives to express what they wished would happen or what they expected might happen when they made their disclosure; clear communication, being kept up to date, and having a support plan and a more robust legal or statutory framework were cited.

These findings highlight significant differences in relationships of power between the client and the social worker, as discussed earlier. Tew (2006) suggests that 'invitations to co-operate and work alongside may potentially allow shifts from entrenched identities (such as 'expert' or 'victim') and start to undermine social constructions of 'us' and 'them' (p. 43). These ideas echo notions of an ethics of care (Gilligan, 1982) and the importance of positive, thoughtful human interactions (Meagher and Parton, 2004). Howe (2008) warns about the practice of social work becoming increasingly 'procedural, legal and administrative' with an undervaluing of the relationship between the worker and service user, which he argues is a 'major component in the success ... of the service offered' (p. 45). Emphasising procedural practice might lead to clients not being heard and, equally important, being left without the experience of being really heard. Tew (2006) also suggests that 'before

**'The current Irish child protection system of receiving and assessing adult disclosures has a potential to re-traumatise'**

**'Emphasising procedural practice might lead to clients not being heard'**



**‘The time between abuse and disclosure may be decades long’**

embarking on strategies in support of emancipation, it may be important to acknowledge the degree to which groups and individuals may have come to experience powerlessness, often in quite extreme forms’ (p. 42). Clients want social workers to ‘accept me, talk to me, understand me’ (Howe, 1993, p. 139).

Buckley *et al.* (2011) note similar deficits in respect of Irish child protection social workers' responses to domestic violence and parental separation. With comparable findings to the research presented here, their study of individuals' experiences of engaging with child protection services found that (1) some social workers were unaware of the dynamics of domestic violence, (2) some service users felt that they were not taken seriously and (3) service users experienced powerlessness in the face of an intimidating child protection system (Buckley *et al.*, 2011).

A comprehensive understanding of the lives and motivations of adults who disclose childhood abuse could be improved through a better understanding of the nature and effects of such abuse. It is important for social workers to recognise the dynamics of disclosure and how they play out over the life course, and the multiple power relations within the adult's socioecological system that impact on such a disclosure (Alaggia, 2005; Collin-Vézina *et al.*, 2015). After delaying a disclosure even for decades, for several complicated and valid reasons as discussed here, the person needs informative guidance of the process and the schedule of the procedures after disclosure, as a demonstration of being heard and taken seriously. The orienting time frame of the person disclosing might be that of a person in acute crisis, even though the time between abuse and disclosure may be decades long. While social workers must be careful not to be deterministic, and the effects and consequences of childhood abuse are not generalisable, such knowledge would allow the social worker to be better aware of any potential needs.

### **Strengths and Limitations**

Flyvbjerg (2006), in a defence of the ‘case study’, argues that the study of human affairs is at an eternal beginning and, therefore, ‘in essence, we have only specific cases and context-dependent knowledge’ (p. 224). That said, some caution should be exercised in how far these findings can be generalised to wider populations who have experienced sexual abuse. However, the issues that are highlighted by this sample, via rich narratives of experience, speak to the wider international literature. These data also present facilitators which are infrequently highlighted in the existing disclosure scholarship (Alaggia *et al.*, 2019). BNIM allowed participants to reflect on what they expected would happen or what they wished would happen once they disclosed. The limitation of this methodology is the possibility for the participant to stray from the topic, or not address it at all. While the SQUIN posed did not ask participants to speak about their experiences of abuse, one participant in this study chose to use the majority of the interview to discuss this aspect. This is a risk involved in using BNIM and, while the participant shared a rich narrative, he spoke little of his experience of disclosure to social work (see Mooney, 2021). Finally, in order to gather experiences of those engaging with social work, all participants had therefore engaged with child protection social work services. Future research should examine if knowledge of Irish social work practice in the area

of retrospective disclosure is deterring further adults from coming forward to disclose. It is also important that future research examines the experiences of child protection social workers who receive and assess retrospective disclosures of childhood abuse, and their levels of confidence and competency in this often complex area.

## Conclusion

This research used BNIM to gather adults' experiences of making disclosures of childhood sexual abuse to social work services in the Republic of Ireland. Further research is required with frontline child protection social workers to assess the level of knowledge, awareness and competency regarding the dynamics of sexual abuse and disclosure, with an emphasis on the development of a trauma-informed method of practice and on support for practitioners to do this complex work. Further training at qualifying and post-qualifying levels may also be required in some social work settings regarding issues of sexual abuse, disclosure, trauma-informed care and life-course perspectives in order to guarantee professional attitudes, responses and practices. That said, the findings show that there were also wider system issues that impacted on the participants' experiences of disclosure which need to be addressed. Clear policy and guidance for social workers, a legal mandate and framework, and trauma-informed systems, such as those articulated in the EU Victim's Directive (2012), for example, may enhance this area of practice. This research is merely a starting point, a call to action for future researchers, policymakers, practitioners and service users to advance this area to a point where disclosure of sexual abuse is encouraged, facilitated and supported.

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