Disclosure of sexual abuse: The impact on adolescent females

John Christian Weible

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DISCLOSURE OF SEXUAL ABUSE:
THE IMPACT ON ADOLESCENT FEMALES

A Project
Presented to the
Faculty of
California State University,
San Bernardino

In Partial Fulfillment
of the Requirements for the Degree
Master of Social Work

by
John Christian Weible
June 1994
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Approved by:

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Date
ABSTRACT

This study explores and describes adolescent females’ experience of disclosure of sexual abuse. The literature indicates a significant impact on the lives of victims before and after the disclosure of sexual abuse. The literature offers limited information about the experience of the victims related to disclosure. The study sample was 23 adolescent females in treatment at an agency of Riverside County Department of Mental Health. The specific research orientation of this study followed the Post-Positivist research paradigm. Data was gathered and analyzed using Qualitative methods. The goal of this study was to provide insights and theory into the experience of sexual abuse victims involved in the disclosure of that abuse. The results of this study give a clearer picture of the process of disclosure for this sample, offering a characterization of the individual to whom the victim is most likely to disclose, the factors which helped or hindered it, the context and the effects of disclosure. The main findings about the individual to whom sexual abuse was disclosed related to relationship, position and response, with trust and communication being key factors. The role of someone asking about sexual abuse was found to be a strong determinate in disclosure. The participants’ previous experiences, awareness of, and beliefs about, sexual abuse were found to be factors which helped or hindered disclosure. The context of disclosure was found to include location, emotions, sense of isolation and decision process. The primary effects of disclosure were shown to include removal from home and questioning by authorities, both of which led to a sense of revictimization. It is hoped these insights will be of benefit to social workers who work directly with the victims of sexual abuse, and allow them to better serve this population.
ACKNOWLEDGMENTS

I would like to express my sincere appreciation to all of the young women who participated in this study. Their candor and cooperation in sharing these painful episodes in their lives was an inspiration and joy.

I would also like to thank the staff at this agency of Riverside County Department of Mental Health for their time and cooperation. I would like to specifically thank Linda Wedin-Snow and Barbara Larsen for their support, input and willingness to share their years of experience in working with sexual abuse victims. Most importantly, I would like to offer my sincere thanks to Lugena Wahlquist, without whose help, support and encouragement, none of this would have been possible.

To Michelle, John, Lory, and my other friends in the M.S.W. program, I offer my heartfelt thanks for all the laughter and support that made this process endurable and enjoyable.

I would like to thank Dr. Teresa Morris for the inspiration to attempt this study and the support to finish it.

Finally, my deepest gratitude and love goes to Deloris, my best friend and wife, who supported me, encouraged me, suffered with me and helped to make this a believable and achievable goal.
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INTRODUCTION

The Focus of the Inquiry

Social workers involved in direct practice with sexually abused children are aware of the processes involved in the disclosure of abuse. They are aware of the difficulties of convincing a victim to disclose, supporting them through the process, their frequent desire to recant, and the ensuing turmoil in their lives. However, little is known about the experience of disclosure from the point-of-view of the victims themselves. This omission seems to ignore the one person who has the most involvement and the best understanding of the experience.

The sexual abuse of children has emerged as one of the major forms of child abuse. As recently as 1974, sexual abuse was considered a problem of relatively limited scope. However, by the late 1970s, official reports of sexual abuse began to increase at a much more rapid rate than reports of other forms of abuse (Finkelhor, 1984). The number of reports continues at a high rate today. Finkelhor, Hotaling, Lewis, and Smith (1990), in a recent survey, found the rate of victimization of females as children to be twenty-seven percent. While the official statistics vary, it would appear that, at a minimum, nineteen percent to, as high as, fifty-two percent of the female population have experienced sexual victimization as children (Finkelhor, 1979; Russell, 1983; Finkelhor, et al., 1990).

Sexual abuse is not confined to specific socioeconomic classes, nor to any specific racial or ethnic group, it cuts across the entire spectrum of American society (Finkelhor, 1993). Nor is it a strictly American problem, it is of equal or greater
magnitude throughout the world. Research indicates the highest rates are in the more economically disadvantaged countries and in those undergoing conditions of rapid socioeconomic change (Finkelhor & Korbin, 1988).

The immediate and long-term effects of child sexual abuse are becoming increasingly recognized as highly significant social and mental health problems (Conte & Berliner, 1988; Lanktree, Briere & Zaidi, 1991). The evidence in the research indicates that a significant number of individuals suffering from moderate to major mental disorders were sexually abused as children (Strean, 1988; Briere, & Zaidi, 1989; Patten, Gatz, Jones & Thomas, 1989). The child suffers from the immediate effects of the abuse in terms of disruption of their normal development, loss of trust, feelings of guilt, a sense of being “damaged”, and a multitude other problems (Finkelhor & Browne, 1985; Browne & Finkelhor, 1986; Kendall-Tackett, Williams & Finkelhor, 1993). The long-term impact can last throughout the individual’s lifetime. A great deal of new evidence is emerging that correlates sexual abuse with a significant number of life problems and major disabilities (Glaser & Frosh, 1988). The passage through adolescence is often more troubled, with a higher incidence of behavioral problems, substance abuse, sexual acting out, and academic problems (Runtz & Briere, 1986). There is a much higher likelihood of being sexually re-victimized, both as child and later as an adult (Russell, 1986). There is a stronger likelihood of victims later becoming perpetrators or becoming involved with an individual who will abuse their children (Tower, 1989). Friendships, intimacy, marriage, parenting, and career functioning, have also been shown to be highly impacted by a history of sexual abuse (Finkelhor & Browne, 1988; Briere & Runtz, 1991).
The sexual abuse of a child, by its very nature, is a well-kept secret. Disclosure creates often traumatic difficulties for the child, the family, and sometimes for the professionals working with them. In families in which incest has occurred, secrecy is the organizing principle of all family relationships. Both the testimonies of survivors and the clinical literature emphasize the central role of the incest secret (Sgroi, 1982). Children who have been sexually abused by adults outside the family also frequently keep this secret as a result of intimidation or shame. Secrecy compounds the trauma of the sexual abuse itself by isolating the victim from others, so that their perceptions can not be validated. Often, the victim comes to doubt their own experience of reality, which is at odds with the family’s or perpetrator’s version of the truth (Courtois, 1988). Sexual activity of any type, engaged in by an adolescent, is often viewed as stemming from negative personal qualities. Sexual behavior is especially seen as aberrant for adolescent females (Miller & Simon, 1974). Adolescents, in general, often attribute negative motives and traits to the sexual activity of their female peers (Cowan & Weible, 1977). Adolescent females often maintain the role of secrecy to avoid negative attributions by their families and peers. Many, if not most, victims of child sexual abuse reach adult life still preserving the rule of secrecy (Sauzier, 1989; Schatzow & Herman, 1989).

The victim fears both the imagined and real consequences of disclosing the abuse. Their lives are often turned up side down, with the possibility of being disbelieved, blamed for family breakups, removed from their homes, questioned by numerous adults, and subjected to the possibility of court testimony. While the majority wanted the abuse to stop, many had strong positive feelings for the abuser. The disclosure often results in the
abuser being arrested and facing prison (Farrell, 1988; Spencer & Nicholson, 1988; Tower, 1989). Many children (and some adults) recant their disclosure to mitigate the serious consequences with which they are faced, as a result of coercion by the family or perpetrator, or to protect the abuser (Everson, Hunter, Runyon, Edelsohn. & Coulter, 1989; Sirles & Franke, 1989; Rieser, 1991).

Many victims, their families, and not too few professionals, see the disclosure process and results, as, if not more, traumatic than the actual abuse (Sorensen & Snow, 1991; Testa, Miller, Downs & Panek, 1992). It is even suggested in the literature, that the victim who fails to disclose the abuse, or for whom it is discovered accidentally, appears to suffer much less emotional trauma (Sauzier, 1989; Sorensen & Snow, 1991). Sauzier (1989) notes that these findings tend to support the clinical impression that disclosure puts extra stress on children and cannot be expected of every victim. In looking at how parents viewed the aftereffects of disclosure, Sauzier also found the poor ratings parents gave law enforcement, judicial, and Child Protective Service professionals may be linked to the reluctance of victims to disclose their abuse and underscores the need to review current procedures and practices. Overall, a great majority of parents did see the sexual abuse as harmful to the child and to the family, but they were evenly divided about whether the disclosure was harmful or helpful to the child and family.

The literature asserts strongly that the victims of sexual abuse not only feel victimized by the abuse itself, but often equally abused by the process and aftereffects of the disclosure of the abuse. It is evidenced in the literature that there appears to be a highly complex process involved in avoiding disclosure, disclosing, recanting disclosure, regret-
ting disclosure, and/or adjusting to disclosure (Sorensen & Snow, 1991; Testa, et al, 1992).

Insight into this experience, through understanding better how to reduce the trauma and increase the likelihood of disclosure, would assist the social worker in both direct practice, and in administrative and policy making roles. It has been shown that the disclosure of sexual abuse impacts many individuals. The social worker at either the direct practice or administrative/policy making level is often the one faced with dealing with the impact of the problem. A better understanding of the experience of the victim would appear to be of significant importance in performance of the social worker's role.

The Fit of the Paradigm to the Focus

The purpose of this study was to explore and describe in greater detail the experience of the disclosure of sexual abuse. It focused specifically on the victims, themselves, and in so doing attempts to offer greater insights into their experience. It is hoped that these insights will be of benefit to social workers who work directly with the victims of sexual abuse.

The specific research orientation of this study followed the Post-Positivist research paradigm. A large number of Positivist studies have been conducted on the subject of sexual abuse and have yielded a wealth of quantitative data. The majority of these studies have examined the subject in terms of “why” disclosure happens. This study, following the Post-Positivist paradigm, is more interested in “what” happens and “what” the impact is, of the disclosure of sexual abuse.
The majority of the literature on sexual abuse is anecdotal in nature, being based on case records, reviews of the literature, surveys of professionals, and surveys of parents. Because of the recency of interest in this area, however, as well as the costs and time investment associated with more rigorous longitudinal research, many of these studies have used correlational designs and retrospective reports of abuse (Briere, 1992). Many of the subjects interviewed regarding their experience of sexual abuse have been college students, bringing up possible methodological issues and the question of the significance of data gathered from a limited, possibly atypical, population (Finkelhor, 1979; Haugaard & Emery, 1989).

The preponderance of research on sexual abuse has followed the Positivist Paradigm, examining the problem from a theory testing, quantitative perspective. While much research has been directed at the problem of sexual abuse of children and to the issue of the disclosure of abuse, there appear to be significant gaps in the knowledge of how the victims experience the process of disclosure. Several studies (Finkelhor, 1979; Russell, 1983; Finkelhor, 1984; Finkelhor, 1993) have offered extensive insights into the "facts" of disclosure, the methodologies allow little insight into the "experience" of disclosure. The victim themselves have been converted to subjects and their unique experience has been lost to statistics and assumptions by professionals.

Previous research offers insight into who is abused, by whom, for how long, who discloses, to whom, and what may happen afterward. The research offers little information about what made a victim chose to disclose at a given point, to a specific person, what may have hindered earlier disclosure, what could have been done to ease the process
of disclosure, and what would have reduced the trauma to their life following the disclosure. These, and other questions, are the ones faced by social workers on a day-to-day basis.

The very nature of sexual abuse makes it a very personal and very private experience. The victims are often very mistrustful of any and everyone, specifically those asking questions about their abuse. This is not a subject that can be reduced to numbers and dry statistics. It is a matter of a highly charged emotional experience which is unique to each individual who has undergone it. In order to gain a better understanding of the experience of these individuals, their experience must be viewed in terms of its meaning to them.

A strictly quantitative approach to this issue would miss the richer patterns which lie within each of their experiences, reducing them to objects, a situation many of them have already encountered in their abuse. In order to arrive at a better understanding and with greater depth the meanings of their experiences, the qualities of these experiences must be examined. A qualitative approach to this issue would seem much more productive, resulting in a more meaningful understanding of how the disclosure of sexual abuse is experienced and what it means to the victim. It also allows for presentation of many more intricate details of the phenomena than is possible with quantitative methods.
METHODS

This study, following the Post-Positivist Paradigm, attempts to fill in the gaps, add substance to the facts of prior studies, and offer new insights into the disclosure of sexual abuse. This study does not address the issue of causality, but rather seeks to offer better understanding of the experiences of the victims of sexual abuse.

Where and From Whom Data Was Collected

The study was carried out at an agency of Riverside County Department of Mental Health. The agency is located in the city of Riverside and is a mental health treatment facility which offers services to children and their families. One of the primary practice functions of this agency is the treatment of children who have been sexually abused, which makes it an ideal site at which to conduct this proposed study.

The population studied were clients of Riverside County Department of Mental Health. Specifically the population was comprised of those females who were currently in treatment at an agency of the Department of Mental Health. The specific sample drawn from this population was females between the ages of ten and nineteen, who were involved in specific treatment groups at this agency. These specific groups are designed to treat individuals who have been sexually abused and have, by definition, had the abuse disclosed.

This was a convenience sample, including only those individuals who wished to take part in the study, who were willing to discuss issues surrounding the disclosure of sexual abuse, and for whom consent of a legal guardian could be obtained. The scope of
this study was limited to female participants in order to focus the data which needed to be
gathered. The lower end age limit of ten was chosen to insure adequate ability to verbal-
ize experiences. The specific sample size was 23 females. The study was conducted over
approximately a seven-month period.

The protection of each participant in the study was insured in a number of ways. Each
individual participant who was under the age of eighteen was required to have a
signed authorization to participate from their legal guardian. It was made clear to each
participant that participation in the study was totally voluntary. Each group received a
brief explanation of the purpose and goals of the study, and had time to discuss questions
and concerns with the researcher and as the focus of normal group process. The results of
the study will be made available to group leaders, for their own information, as well as, to
provide feedback to the participants.

All data gathered was be held in strict confidence, with no identifying information
leaving the treatment agency. Individual responses were coded by a number rather than by
name. The results of the study are being presented in terms of global responses and theo-
ries resulting from the analysis of the data.

Instrumentation

In the study, the researcher, in a sense, was the data collection instrument. The re-
searcher developed the initial questions to be asked, developed a rapport to allow the
participants to share their experiences, recognized what was important in the data, and
gave it accurate meaning. In order to gain accurate information from the participants in
this proposed study, it was necessary for the researcher to prepare themselves to become sensitive to the data to be gathered and to the participants themselves.

This sensitivity was to be developed in three of ways. First, the researcher was well grounded in professional experience in order to understand the nature of the data being studied and in order to have some sense of the significance of the issues to the participants. The researcher has worked with sexually abused children and adults, their families, and the perpetrators of abuse for eighteen years. In this time his experience has led him to a large number of assumptions about the cause and effect of sexual abuse and disclosure. This experience allowed the development of an adequate rapport with the participants, making it easier for them to discuss an uncomfortable topic. The experience also aided in being more aware of the significant data and how to better interpret it.

The second sensitivity strategy was becoming adequately grounded in the literature. A strong familiarity with relevant literature allowed for a rich background which sensitized the researcher to the phenomenon being studied. It also allowed for a better understanding of the data and how to interpret it. A thorough review of the literature, developed not only a more sensitive approach to the experiences of the participants, but better understanding of the data as it was analyzed.

The creative aspect which allowed the researcher to use experience and awareness of the literature to view the research situation and its associated data in new ways, was a third strategy. In looking at the data in a different way a theory was developed which is beyond or at least adjunctive to the theories which have previously been developed.
Planning, Data Collection and Recording Modes

The data was collected by the researcher, individually or in collaboration with each of the leaders of the specific groups to be sampled. The group leaders were each Licensed Clinical Social Workers or Licensed Marriage, Family and Child Counselors, with at least ten years of experience in working with victims of sexual abuse. Prior to collection of the data, each group leader received information on the purpose of the study and its goals. They were presented with the initial questions, given instructions on the format of the questions, and how broader responses would be elicited, if needed.

Each group of participants in the study received a brief explanation of the purpose and goals of the study, and the method of data collection. They had the opportunity to ask questions regarding the study and discuss it briefly within their group. Each participant was given an Informed Consent Form (See Appendix A) to complete. In addition, those subjects under the age of eighteen were given a form to be filled out by their legal guardians, authorizing their participation in the study. Following each data collection interview, the participant was offered a brief opportunity to discuss her feelings and questions about the interview and the questions. A Debriefing Statement (See Appendix B) was given to each participant as she completed the interview.

Each participant's responses were coded by a group number and an individual number. For instance the first group of participants interviewed were group “1”, and the first individual was “1”. This resulted in a code for the responses from each individual, as in “1-1, 1-2...5-6”. A separate list was kept identifying which specific code was assigned to each individual. The reason for this coding was two-fold: 1) it protected the identity
and confidentiality of the participants, and 2) it provided a data trail in order to check or expanded upon any participant’s responses.

Data collection was conducted using a set of six questions designed to establish demographic data and an initial set of twenty-four open-ended interview questions designed to elicit as much information as possible regarding the individual’s experience regarding disclosure of sexual abuse (See Appendix C). The questions were based on concepts derived from the literature, personal experience, and discussions with other professionals in the field. These questions were considered provisional, providing a beginning focus for the research question.

Each participant was interviewed separately and her responses recorded in writing and on audio tape. The interview was conducted by the researcher, at times joined by the leader of a particular participant’s treatment group. A few individual participants felt more comfortable responding to the questions in the presence of their group therapist.

The questions were presented to each participant and her complete response was recorded. If her responses to certain questions lacked detail, she was asked to explain more fully, if possible. The prior experience of the researcher, and at times the group therapist, were drawn upon in order to elicit as full a response as is possible.

Following each day’s data collection, the written notes were checked against the audio tape for fidelity, and any necessary corrections made. The responses were discussed by the researcher and the group leader to clarify meanings and correct interpretation. Notes on these discussions were added to the data. The data for each participant was then
transcribed into a word processing program, which allowed for easier retrieval and manipulation of the data.

Quality Control

The fidelity of the data gathered was insured through the use of both written and audio tape recordings. The responses were checked by both the researcher and the group leader who was present at the time of the interview. This insured clarity of that set responses as well as clearer understanding of the respondents' meanings. The original data recorded was maintained throughout the study to insure the ability to return to the exact responses should there be any questions.

During both the open coding and the axial coding phases of data analysis, categories, properties, and dimensions were verified against the original data to validate hypotheses as they were developed. In addition, the researcher's assumptions about the data were validated against those of the group leaders and those of the research advisor.
RESULTS AND ANALYSIS

The initial six questions asked of each participant yielded data which serve to better characterize this sample. Table 1 shows that the participants in this study ranged from pre- to late adolescence (mean = 15.30 years). It may also be seen that the age at which each participant was first molested covers a wide range, from age 1 to 16 years, but the mean age of first molest was 6.67 years. The length of time individual participants were molested varied from one time to eleven years, with the majority being molested for several years (mean = 4.30).

The responses of the participants in the limited sample of this study showed no relationship between the age at first molest, the length of time they were molested and how long before they first told someone about the molest or how long before the molest was disclosed to authorities (see Table 1). The data in Table 1 does indicate long periods of

Table 1

Age of Participants and Time Periods of Molest and Disclosure

<table>
<thead>
<tr>
<th></th>
<th>Age</th>
<th>Age First Molested</th>
<th>How Long Molested</th>
<th>Age First Told Someone</th>
<th>Age Disclosed To Authorities</th>
<th>Time First To Tell</th>
<th>Time To Disclose</th>
</tr>
</thead>
<tbody>
<tr>
<td>Min</td>
<td>10.00</td>
<td>1.00</td>
<td>1.00(^b)</td>
<td>6.00</td>
<td>7.00</td>
<td>0.00(^b)</td>
<td>0.00(^c)</td>
</tr>
<tr>
<td>Max</td>
<td>19.00</td>
<td>16.00</td>
<td>11.00</td>
<td>16.00</td>
<td>17.00</td>
<td>10.00</td>
<td>10.00</td>
</tr>
<tr>
<td>Mean</td>
<td>15.30</td>
<td>6.57</td>
<td>4.30</td>
<td>10.61</td>
<td>12.13</td>
<td>4.04</td>
<td>5.57</td>
</tr>
<tr>
<td>STD</td>
<td>2.27</td>
<td>3.49</td>
<td>2.68</td>
<td>2.58</td>
<td>2.77</td>
<td>3.28</td>
<td>2.99</td>
</tr>
</tbody>
</table>

\(^a\) In years.
\(^b\) Molested only one time or less than one year.
\(^c\) Told or disclosed immediately.
time elapsed before they first told someone (mean = 4.04 years) or when the molest was disclosed to authorities (mean = 5.57 years). This latency period is can be assumed to be the result of the high need for secrecy inherent in sexual abuse (Finkelhor, 1979; Schatzow & Herman, 1989).

The literature indicates that within the general population, less than fifty percent of the perpetrators of molest are a family member (Finkelhor, 1979; Russell, 1983). However, seventy-eight percent of participants in this study were molested by a family member (see Table 2). Finkelhor (1984) and Russell (1983) also found a much higher number of

Table 2:

<table>
<thead>
<tr>
<th>Relationship of Perpetrator</th>
<th>N=23</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Father</td>
<td>9</td>
<td>39.13%</td>
</tr>
<tr>
<td>Step-Father</td>
<td>7</td>
<td>30.43%</td>
</tr>
<tr>
<td>Relative</td>
<td>2</td>
<td>08.69%</td>
</tr>
<tr>
<td>Acquaintance</td>
<td>5</td>
<td>21.73%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>23</strong></td>
<td><strong>100.00%</strong></td>
</tr>
</tbody>
</table>

the perpetrators to be step-fathers, rather than natural fathers. Table 2 shows that the participants in the present study were molested more often by their own fathers than by step-fathers. These two factors indicate that there may be some differences in the characteristics of the individuals in the present study, relative to the general population.
The current study showed no relationship between the ethnicity of the participants and their responses to the questions. Previous studies sampled predominately white populations (Finkelhor, 1979, 1984), while the present study was made up almost equally of Hispanic and white individuals (see Table 3). The present study, in terms of Hispanic and white participants, reflects the ethnic makeup of Riverside county, though the African-American population is significantly underrepresented.

Table 3

<table>
<thead>
<tr>
<th>Ethnicity of Participant</th>
<th>Number</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hispanic</td>
<td>10</td>
<td>43.48%</td>
</tr>
<tr>
<td>African-American</td>
<td>2</td>
<td>08.70%</td>
</tr>
<tr>
<td>White</td>
<td>11</td>
<td>47.83%</td>
</tr>
<tr>
<td>Total</td>
<td>23</td>
<td>100.00%</td>
</tr>
</tbody>
</table>

Open Coding

The study followed the "Grounded Theory" approach of qualitative analysis as defined by Strauss and Corbin (1990). A pattern of preliminary open-ended interviewing and data collection was followed by analysis of the initial data. In interviewing each participant, patterns emerged from the data, resulting in the development of initial concepts and working hypotheses. These concepts and hypotheses were then incorporated into the interviews of the next participants, and so on, through all twenty-three interviews. A final
analysis of the data yielded a comprehensive theory regarding the research question, and
allowed for the development of a theory related to the question.

The results of the open-ended questions (See Appendix C) were analyzed using the
technique of “open coding” (Strauss & Corbin, 1990). The objective of open coding was
to discover, name, and categorize phenomena; also to develop categories in terms of their
properties and dimensions. Analysis, at this point, was directed toward revealing as many
potentially relevant categories as possible, along with their properties and dimensions.

The process of open coding was approached in several ways. Initially, it was ex-
amined line by line, phrase by phrase, and often by single words. As categories began to
develop the focus was shifted to an examination of the data in terms of sentences and
whole paragraphs. The focus was geared more toward the categorization of major ideas.
Finally, as more information was developed, the data was viewed in terms of the entire set
of responses from each individual. The analysis focused on similarities and differences
between the participants’ total responses.

The data from the open coding was broken down into discrete parts, exactingly
examined, compared for similarities and differences, and questions were asked about the
phenomena as reflected in the data. These questions, and the conceptual products of
comparisons that emerge, were then added to the original list of questions.

Conceptualizing the data was the first step in analysis. In breaking down and con-
ceptualizing the data, an observation, a sentence, a paragraph, was taken apart and each
discrete incident, idea, event, or something that stands for or represents a phenomenon
was given a name. Data was compared, incident with incident so that similar phenomena could be given the same name.

Once particular phenomena in the data was identified, concepts were grouped around them. This was done to reduce the number of units with which the researcher had to work. In this process the concepts that seemed to pertain to the same phenomena were categorized. While at this point any proposed relationships were still considered provisional, the phenomenon represented by a category was given a conceptual name.

The process of open coding made possible the identification not only of categories but also of their properties and dimensions. The properties were the characteristics or attributes of a category, and the dimensions represented positions of a property along a continuum. Properties and dimensions formed the basis for making relationships between categories and subcategories. Each time an instance of a category appeared in the data, it was possible to place it somewhere along the dimensional continua (Strauss & Corbin, 1990).

A separate dimensional profile was developed from each occurrence of a category. A pattern was formed from the grouping of several of these profiles. Under the given set of conditions of this study, the dimensional profile represents the specific properties of a phenomenon.

During the process of Open Coding, the examination of the data yielded four discrete concepts related to the disclosure and impact of sexual abuse. These four concepts where then used as the framework for developing categories which more clearly explained disclosure of sexual abuse and its impact. The four concepts developed from the data
were: Characteristics of Person to Whom Disclosed, Factors Which Helped or Hindered Disclosure, Context of Disclosure, and Effects of Disclosure.

**Characteristics of Person to Whom Disclosed**

The most important categories related to the person to whom they disclosed which emerged from the participant’s responses were: Relationship, Position and Response. In Table 4, the participant’s relationship with the individual is seen to consist of six general

Table 4

<table>
<thead>
<tr>
<th>Relationship of Person to Whom Disclosed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Category</td>
</tr>
<tr>
<td>-----------</td>
</tr>
<tr>
<td>Relationship</td>
</tr>
<tr>
<td>Duration</td>
</tr>
<tr>
<td>Contact</td>
</tr>
<tr>
<td>Dependence</td>
</tr>
<tr>
<td>Trust</td>
</tr>
<tr>
<td>Communication</td>
</tr>
</tbody>
</table>

properties, each with a dimensional range. The participants were more likely to disclose to someone with whom they had a close alliance of long duration. They also chose to disclose to someone upon whom they were highly dependent, if that individual was someone they trusted and with whom they had easy communication. If this relationship lacked trust
and communication, they were more likely to disclose to someone upon whom they had little dependence.

The perceived position of the person to whom they disclosed (see Table 5) also played an important role in their decision of who to tell. They were more likely to disclose to someone who was more closely related to them, in terms of kinship. However, kinship was modified by availability, in that the person must be available to them at the time they chose to disclose. A person in authority (teacher, therapist, counselor) must have substantial knowledge of sexual molest issues in order to be selected for disclosure. In almost all cases, the position of having similar personal experience with sexual molest was the overriding factor in the choice of the person to whom they would disclose.

The expected and actual response of the person the participants chose was the key factor in their decision making process (see Table 6). In many of the participants’ cases
(57%), the person to whom they disclosed asked them if they were being molested. They also had to believe the person they told would keep the information in confidence, either absolute, not sharing with anyone, or conditional, not sharing it publicly. The person disclosed to had to offer encouragement to disclose and abundant support to the individual through the disclosure process. They had to be seen as an individual who would believe the victim, as many of the participants had either experienced disbelief in the past or feared they would not believed. There also had to be a strong belief they would respond to the disclosure with action, either in reporting it or at least making the abuse stop.

Table 6
Response of Person to Whom Disclosed

<table>
<thead>
<tr>
<th>Category</th>
<th>Properties</th>
<th>Dimensional range (applied to each incident)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Response</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Asked</td>
<td>always</td>
<td>←→ never</td>
</tr>
<tr>
<td>Confidentiality</td>
<td>absolute</td>
<td>←→ conditional</td>
</tr>
<tr>
<td>Encouragement</td>
<td>much</td>
<td>←→ little</td>
</tr>
<tr>
<td>Belief</td>
<td>unqualified</td>
<td>←→ none</td>
</tr>
<tr>
<td>Support</td>
<td>abundant</td>
<td>←→ none</td>
</tr>
<tr>
<td>Action</td>
<td>report</td>
<td>←→ conceal</td>
</tr>
</tbody>
</table>

The characteristics of the person to whom the participants in this study were most likely to have disclosed involved relationship, position and the response of that individual. The participants were more likely to disclose to an individual to whom they were related,
had a close alliance, of long duration, and with whom they had much contact. This
individual also had to be available to them at the time they wished to disclose. This
individual was more likely to be someone upon whom they were highly dependent, in
whom they had much trust and with whom it was easy to communicate. However, the key
factors of trust and communication overrode the importance of dependence. If there was
no one they depended upon which they could trust or with whom they could communi-
cate, dependence became less important. The second choice was a person who was in a
position of authority, who was available, had some knowledge of molest issues and with
whom they could communicate and trust. The person to whom they were most likely to
disclose must respond in a certain manner. That person must ask about molest, assure
some degree of confidence, and offer encouragement and support. This person must also
be seen as someone who would believe them and who would take some type of action to
stop the molest. In almost all cases, the participants saw a person in a position of having
personal experience with sexual abuse as an individual to whom they were more likely to
disclose.

**Factors Which Helped or Hindered Disclosure**

Coding of the participants' responses yielded three discrete categories relative to
factors that helped or hindered their disclosure: Experience, Awareness and Beliefs. The
participants' previous experience (see Table 7) was a factor in deciding to disclose their
sexual abuse. The category of experience included the property of having sufficient
knowledge about the meaning of molest, in their situation, in order to decide on the need
to disclose. Table 7 shows they also were more likely to disclose if they had always been believed in other circumstances. The amount they were threatened by either the perpetrator or others, either overtly or covertly, related to the willingness they had to disclose. Threats, no matter how unrealistic, to harm them, their families or that they would be the ones in trouble, were often believed. The more they were threatened and the greater their perception of the seriousness of the threat, the less likely were they to disclose. Their experience of promises made by the perpetrator or others to stop or reduce the molest impacted their decision to disclose. If the perpetrator, for instance, had promised to stop the molest, and did in fact stop, the victims were less likely to disclose the previous history of molest. If they had previously disclosed to someone and that person had taken some action to either stop or reduce the molest, they were more likely to disclose to that person or someone else again.

Table 7

<table>
<thead>
<tr>
<th>Previous Experience</th>
</tr>
</thead>
<tbody>
<tr>
<td>Category</td>
</tr>
<tr>
<td>Experience</td>
</tr>
<tr>
<td>Knowledge</td>
</tr>
<tr>
<td>Believed</td>
</tr>
<tr>
<td>Threatened</td>
</tr>
<tr>
<td>Promises</td>
</tr>
<tr>
<td>Action</td>
</tr>
</tbody>
</table>
The participants’ awareness of molest and the specific details of disclosure impacted their ability and willingness to disclose (see Table 8). If they were unaware that other individuals were being molested too, they often saw molest as something peculiar only to them. Knowing individuals who were molested decreases their sense of isolation and to some degree normalizes their experience. They are then aware that others disclosed and it was therefore possible for them, too. Many of the participants reported that they did not know what to say, what words to use to describe what was happening to them. The more familiar they were with words to describe molest and parts of their body, the more likely they were to be able to use those words. The participants’ responses indicated that a lack of awareness of who to tell hindered their deciding to tell. At the same time not knowing what would happen if they disclosed prevented several from disclosing sooner. They were not aware of the procedures of reporting sexual abuse and this lack of knowledge exacerbated any fears they had. Many of the participants reported that pro-

<table>
<thead>
<tr>
<th>Category</th>
<th>Properties</th>
<th>Dimensional range (applied to each incident)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Awareness</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Others Molested</td>
<td>know ↔ unaware</td>
<td></td>
</tr>
<tr>
<td>Words To Use</td>
<td>familiar ↔ unfamiliar</td>
<td></td>
</tr>
<tr>
<td>Who To Tell</td>
<td>know ↔ unaware</td>
<td></td>
</tr>
<tr>
<td>Procedures</td>
<td>know ↔ unaware</td>
<td></td>
</tr>
</tbody>
</table>
grams on sexual abuse at school, television specials, and even television talk shows gave them an increased awareness of molest and disclosure.

The beliefs the participants held about molest and disclosure had a strong influence on their decision making process. As shown in Table 9, there were four properties of beliefs which emerged. The primary belief which governed their decision to disclose was related to their perception of responsibility for the molest. If they believed or had been taught that they were responsible for sexual abuse, they were less likely to disclose than if they saw the responsibility as being external. Many of the participants strongly believed that if they disclosed the molest, they would be harmed, either physically or in terms of blame. There was also a similar belief that disclosure would bring harm to their families, physically, through legal repercussions, or the trauma of divorce. A substantial number of the victims had good evidence for their beliefs about harm to themselves or their family, having witnessed or experienced physical abuse, intervention of outside agencies, or

Table 9

Beliefs About Molest and Disclosure

<table>
<thead>
<tr>
<th>Category</th>
<th>Properties</th>
<th>Dimensional range (applied to each incident)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Beliefs</td>
<td>Responsibility</td>
<td>external ⟷ internal</td>
</tr>
<tr>
<td></td>
<td>harm to self</td>
<td>little ⟷ much</td>
</tr>
<tr>
<td></td>
<td>harm to family</td>
<td>little ⟷ much</td>
</tr>
<tr>
<td></td>
<td>harm to perpetrator</td>
<td>little ⟷ much</td>
</tr>
</tbody>
</table>
previous divorces. Finally, some of the participants believed harm would come to the perpetrator, generally in the form of arrest and jail. While these individuals wanted the molest to stop, they also had strong positive feelings for the perpetrator, and feared for his safety. Some were aware of the legal consequences, others intuitively knew he would be in trouble.

Factors which helped or hindered disclosure were reduced to three categories, experience, awareness, and beliefs, as discussed above. The participants in this study were helped to disclose by having knowledge of the meaning of molest. They were also helped when they had always been believed in other matters. They were hindered by the experience of threats of harm to themselves or their family. They were also hindered by promises of cessation or reduction of the molest. Previous experience of telling someone about the molest, who took some action, also helped in deciding to disclose. Further help in deciding to disclose came from knowing of others who were molested, having access to the correct words to describe molest, and being aware of who they could tell. It was also important that they had some idea of what would happen if they disclosed. Also helpful in disclosing was a belief that they were not responsible for the sexual abuse, no harm would come to them, their family or, in many cases, the perpetrator.

Context of Disclosure

Exploring the context of disclosure resulted in a number of categories which explain factors leading up to the disclosure of the sexual abuse. The category of location of the disclosure produced four distinct properties (see Table 10). The more familiar the
surroundings, the more likely was the individual to disclose. However, no matter how familiar, if the location was seen as less safe, disclosure was less likely to take place. Highly formal locations (hospitals, doctors' offices, therapy) were less likely to result in disclosure, unless they were perceived as being places that were more safe than familiar places. The same relationship held true for locations to which the participants were mandated (psychiatric hospitals, foster homes, therapy). If the location was highly formal or they were mandated to be there, but they were safely away from the perpetrator, disclosure was more likely.

Table 10

Location of Disclosure

<table>
<thead>
<tr>
<th>Category</th>
<th>Properties</th>
<th>Dimensional range (applied to each incident)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Location</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Familiar</td>
<td></td>
<td>very ⟷ not at all</td>
</tr>
<tr>
<td>Safe</td>
<td></td>
<td>more ⟷ less</td>
</tr>
<tr>
<td>Formality</td>
<td></td>
<td>high ⟷ low</td>
</tr>
<tr>
<td>Mandated</td>
<td></td>
<td>always ⟷ never</td>
</tr>
</tbody>
</table>

The decision to disclose was also viewed in terms of the emotions related to the molest. Coding of the participants' responses indicated five emotions were of primary importance: fear, shame, anger, depression and frustration (see Table 11). For many of the participants fear was paramount in their decision to disclose. They had a high level of fear, of ongoing molest, that is the molest continuing and increasing in intensity and

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activity (see Table 11). Even though some of the girls were molested for a number of years, each event elicited some degree of fear. They reported fear of the act itself and fear of the emotions which it elicited. The more often the participants experienced fear about the molest continuing or expanding the more likely were they to disclose. The more fear pervaded their lives the more the likelihood of disclosure increased. The higher the intensity of their fear of the continuation of the molest, the higher was their resolve to disclose. Finally, the longer the fear continued the greater the chance they would disclose, given the opportunity.

Table 11

Emotions Related to Molest

<table>
<thead>
<tr>
<th>Category</th>
<th>Properties</th>
<th>Dimensional range (applied to each incident)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emotions</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fear</td>
<td></td>
<td>high  (\rightarrow) low</td>
</tr>
<tr>
<td>Shame</td>
<td></td>
<td>more  (\rightarrow) less</td>
</tr>
<tr>
<td>Anger</td>
<td></td>
<td>intense  (\rightarrow) limited</td>
</tr>
<tr>
<td>Depression</td>
<td></td>
<td>more  (\rightarrow) less</td>
</tr>
<tr>
<td>Frustration</td>
<td></td>
<td>extreme  (\rightarrow) minor</td>
</tr>
</tbody>
</table>

The emotion of shame (see Table 11) relates to the participants’ reports of feeling dirty, bad, ashamed or damaged by the molest. The more often they felt shame about the molest the less likely were they to disclose it to anyone. The more shame they felt the less they wanted anyone to know about the molest. As the intensity of their sense of shame
around the molest increased, so did their own attempts to keep it hidden. The longer the molest and/or their feelings of shame continued the more they felt resolved to their condition. Many of them (41%) reported feeling as if others could tell they were being molested just by looking at them.

For many of the girls (65%) anger was an ever present emotion. They were angry at the perpetrator, angry at others for not protecting them and angry at themselves, believing they caused it. They also experienced anger when they believed the perpetrator was going to molest a sibling or friend. The more often and the more intense their experience of anger, the more likely they were to disclose the molest, often in an angry, impulsive outburst (22%). The extent of the anger indicated how much it ruled their lives. Several were in trouble for fights at school, fights with their mother or other caretaker, and fights with siblings. The higher the intensity of their anger and the longer it was maintained, the greater the chance it would overwhelm any other inhibitions they had about disclosing.

The fourth emotion expressed by many of the participants was depression (34%). For several it had resulted in suicide ideation or attempts (22%). Those who experienced more depression (see Table 11) often reported less inclination to report the sexual abuse. The more extensive, the higher the intensity and the longer the duration, the less likely were they to mobilize the energy to disclose. There was little effort to disclose, except when the intensity reached the point where they acted to harm themselves and were hospitalized or referred for psychotherapy. Once hospitalized or in therapy, the depression reduced, and in a safer environment, there was a greater likelihood they would disclose (see Table 10).
Frustration with the ongoing molest also emerged as a property of the category "emotions" during open coding (see Table 11). The participants who experienced frustration often and for whom it was more extreme, were ready to disclose, given the right opportunity. As the frustration reached a higher intensity and lasted for a longer duration, many experienced feeling "sick of it," "tired of it," "not going to take it anymore." Their desire to stop the molest at all costs became paramount. For them, disclosure took place within a few days.

The sense of isolation also pervaded many of the participants' lives. They reported feeling alone and cut off from the world. Table 12 shows how this category was coded using the resultant properties and dimensions. The responses of the participants indicated that the more often they felt isolated, the less likely they were to reach out to anyone, let alone disclose their abuse. The more extensive their isolation, the fewer people with
whom they had contact, the less opportunity they had to disclose. As the intensity of their isolation increased and the longer it went on, the less they were to validate their own experiences. This increased their view of molest as peculiar to them (see Table 8). The locus of their isolation was either their own internal decision or was the result of external controls by the perpetrator and/or others. When it resulted from the perpetrator and was of long duration, it often resulted in anger and frustration (see Table 11), leading to an increased likelihood of disclosure.

The decision to disclose the sexual abuse is related to each of the previous categories and at the same time has properties all its own (see Table 13). When all other factors are in place the decision is made. In the case of eleven of the participants, they acted upon impulse. They may have thought of telling, but each states she did not plan to tell when she did, "it just slipped out." They were angry or scared and acted without any conscious

<table>
<thead>
<tr>
<th>Category</th>
<th>Properties</th>
<th>Dimensional range (applied to each incident)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Decision</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Impulse</td>
<td>total &lt; &gt; none</td>
<td></td>
</tr>
<tr>
<td>Accidental</td>
<td>always &lt; &gt; never</td>
<td></td>
</tr>
<tr>
<td>Pressure</td>
<td>high &lt; &gt; low</td>
<td></td>
</tr>
<tr>
<td>Plan</td>
<td>supported &lt; &gt; alone</td>
<td></td>
</tr>
<tr>
<td>Asked</td>
<td>always &lt; &gt; never</td>
<td></td>
</tr>
</tbody>
</table>
plan. Another five of the girls had their molest discovered by accident. Someone ob-
served something, they had an unrelated physical exam or some other factor beyond their
control. Pressure was placed upon three of the girls to disclose. They had shared the
molest in confidence with a friend, a sibling, who was also being molested, disclosed, or a
sibling had guessed. In each case the other person pressured them to tell or that person
would. The final four had made concrete plans to disclose, either alone or with the sup-
port of a sibling or peer. Each of these girls had given the matter some thought, selected a
specific person and time and disclosed.

In thirteen of the cases, the victim would not have disclosed, at that time, even im-
pulsively, if they had not been asked by someone. Almost all of the girls wanted to tell,
they were tired of keeping it inside, afraid to tell, but had to tell somebody. All of the
conditions were right at that moment and someone asked. They had not previously dis-
closed, no matter what the conditions, because “no one ever asked before.”

The context of disclosure was reduced to the categories of location, emotions,
isolation and decision to disclose. The participants in this study were more likely to
disclose in a location which was very familiar, where they felt safe, which had a low level
of formality and into which they had not been mandated. However, locations which were
high in formality and/or into which they had been mandated, when viewed as more safe,
were more likely to support disclosure. Disclosure was more likely to take place in the
context of high levels of fear, less feeling of shame, intense anger and a sense of extreme
frustration. Disclosure was less likely to take place when the victims more often felt a
high intensity of isolation for a long period of time, which was their own internal decision.
The decision to disclose was more likely when it was the result of total impulse, or when molest was accidentally discovered. The likelihood of disclosure increased with a high level of pressure to disclose or with a plan supported by others. The decision to disclose was most likely to be made when someone asked about sexual abuse.

**Effects of Disclosure**

The effects of disclosure were varied and generally not what was expected by the victims. Open coding yielded ten categories: Removal From Home, Questioning by Authorities, Testifying in Court, Consequences to Perpetrator, Response of Perpetrator, Response of Family, Regret Over Consequences to Perpetrator, Relief at Disclosing, Desire to Recant, and Handling of Disclosure.

One of the least expected, and most frightening effects of disclosure for many of the girls (35%) was being removed from their home and placed in some type of facility, generally a foster home (see Table 14). For most of the girls the action was immediate,

**Table 14**

**Removal From Home Following Disclosure**

<table>
<thead>
<tr>
<th>Category</th>
<th>Properties</th>
<th>Dimensional range (applied to each incident)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Removal</td>
<td>Action</td>
<td>immediate ←→ none</td>
</tr>
<tr>
<td></td>
<td>Duration</td>
<td>long ←→ short</td>
</tr>
<tr>
<td></td>
<td>Experience</td>
<td>negative ←→ positive</td>
</tr>
<tr>
<td></td>
<td>Decision</td>
<td>official ←→ self</td>
</tr>
</tbody>
</table>

33
which elicited a great deal of initial fear and confusion. Their initial response was followed by anger that they had to leave their home when they had done nothing wrong. The duration of out-of-home placement averaged approximately six months, ranging from a minimum of three days, to the two years one girl has been in placement. The experience was seldom perceived by the girls as a positive one. They felt torn away from their family and their friends. None of them believed the alternative caregivers understood what they were going through. Although for eight of the girls the decision was official, made by juvenile court, two of the girls were placed at their own request. The experience for these two was much more positive, perceiving the foster home as a much safer environment than their home.

The most difficult experience following the disclosure being questioned by numerous people, each asking the same questions. The majority of the participants (74%) cited this as the most difficult part of disclosing. The questioning (see Table 15) occurred more

Table 15

<table>
<thead>
<tr>
<th>Category</th>
<th>Properties</th>
<th>Dimensional range (applied to each incident)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Questioning</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Frequency</td>
<td></td>
<td>often ⟷ never</td>
</tr>
<tr>
<td>Extent</td>
<td></td>
<td>more ⟷ less</td>
</tr>
<tr>
<td>Intensity</td>
<td></td>
<td>high ⟷ low</td>
</tr>
<tr>
<td>Duration</td>
<td></td>
<td>long ⟷ short</td>
</tr>
<tr>
<td>Number</td>
<td></td>
<td>many ⟷ few</td>
</tr>
</tbody>
</table>

34
often than any other factor after disclosing. The more they were questioned, by more and more people, the more they felt the impact of the molest. When the intensity of the questioning was high and the duration of long, they all began to feel revictimized. Each experienced an increase in negative feelings about themselves (dirty, ashamed, blamed). All felt extremely embarrassed, having to go over and over all of the intimate details of their molest. The majority of them did not understand the reasons for the questions and began to feel resentful, and as one put it: “they all wrote it down, couldn’t the rest just read it.”

The third category, which was least expected by the victims, was having to testify in court against the perpetrator (see Table 16). All of the girls just wanted the molest to stop, but several of them (30%) had to go to court to ensure it. Some of them received much preparation for what would happen by an attorney or social worker, others received

<table>
<thead>
<tr>
<th>Table 16</th>
</tr>
</thead>
<tbody>
<tr>
<td>Testifying in Court</td>
</tr>
<tr>
<td>Category</td>
</tr>
<tr>
<td>---</td>
</tr>
<tr>
<td>Testifying</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>
little. Those that were well prepared experienced the court sessions as less traumatic.
The number of questions asked of each girl in court varied from few to many. Those who
were asked many and were the least prepared, experienced a great deal more embarrass-
ment and negative feelings about themselves. The girls, for whom their court testimony
and trial were short, felt less traumatized than those who had to sit through many days of
trial and testify for long periods. The most traumatic aspect for several of the participants
was having to face the perpetrator in court. The more often they were exposed to him the
more traumatic the event became.

The consequences to the perpetrator (see Table 17) were varied, and seldom satisf-
fying to the victims. Almost all of the perpetrators left the home immediately, some by
their own choice, others by official order. Less than half (47%) were arrested, and only

Table 17
Consequences to Perpetrator

<table>
<thead>
<tr>
<th>Category</th>
<th>Properties</th>
<th>Dimensional range (applied to each incident)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Consequences</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Removal</td>
<td>immediate</td>
<td>none</td>
</tr>
<tr>
<td>Arrest</td>
<td>immediate</td>
<td>none</td>
</tr>
<tr>
<td>Jail</td>
<td>long</td>
<td>short</td>
</tr>
<tr>
<td>Treatment</td>
<td>much</td>
<td>none</td>
</tr>
</tbody>
</table>

39% spent any time in jail. Actual time in jail ranged from one day to eight years. The
average was less than two years, for those who served time. Several were referred for
mental health treatment, but only four actually attended and only one continued beyond a few sessions. The victims felt, with the sexual abuse, removal from home, questioning, and court, they were punished more than the perpetrators. The level of resentment and sense of continued victimization was quite high.

The response of the perpetrators (see Table 18) was fairly consistent across all of the cases. Only two accepted total responsibility for the molest, two more accepted minimal, the rest denied it totally. The two who accepted responsibility showed some remorse,

Table 18

<table>
<thead>
<tr>
<th>Category</th>
<th>Properties</th>
<th>Dimensional range (applied to each incident)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Perpetrator</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Response</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Responsibility</td>
<td>accept ←→</td>
<td>denied</td>
</tr>
<tr>
<td>Remorse</td>
<td>much ←→</td>
<td>none</td>
</tr>
<tr>
<td>Blame</td>
<td>much ←→</td>
<td>little</td>
</tr>
<tr>
<td>Rejection</td>
<td>total ←→</td>
<td>none</td>
</tr>
<tr>
<td>Flight</td>
<td>total ←→</td>
<td>none</td>
</tr>
</tbody>
</table>

the rest indicated none. The victims were blamed for instigating or perpetuating the molest by the perpetrators more than half of the time (52%). In four cases the perpetrators totally rejected the victims, refusing to talk to them or see them. In all but four of the rest of cases there was rejection to some degree. The response of three of the perpetrators was total flight, leaving the area with no further contact with the victim.
The response of the victim’s family was of crucial importance to how she experienced the effects of disclosure. The families responded in a number of manners, some positive, some very negative (see Table 19). At least four of the participants were blamed for the molest by some member of their family. Some victims (26%) were rejected by some members or sections of their family. Anger was the response by family members toward some of the victims (35%). Closeness was felt to have increased in some of the families (17%), while in others (43%), it was felt to have decreased. Many of the participants were relieved to find that most of their family believed them, however others found they were disbelieved by some members of their family (30%). Only slightly more than half (57%) of the participants reported they felt complete support from their family.

<table>
<thead>
<tr>
<th>Category</th>
<th>Properties</th>
<th>Dimensional range (applied to each incident)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family Response</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Blame</td>
<td>often</td>
<td>never</td>
</tr>
<tr>
<td>Rejection</td>
<td>more</td>
<td>less</td>
</tr>
<tr>
<td>Anger</td>
<td>high</td>
<td>low</td>
</tr>
<tr>
<td>Closeness</td>
<td>increased</td>
<td>decreased</td>
</tr>
<tr>
<td>Belief</td>
<td>high</td>
<td>low</td>
</tr>
<tr>
<td>Support</td>
<td>complete</td>
<td>incomplete</td>
</tr>
</tbody>
</table>
Some of the participants experienced a sense of regret that the perpetrator had to go to jail. This was not an outcome they had anticipated or fully considered when they disclosed. The sense of regret (see Table 20) is important to them and contributes to their overall feeling about disclosing. The regret was acknowledge as occurring in 22% of the participants. The extent to which they feel it varies, but is not reported as being all encompassing. The intensity also varies over time, in specific locations and on certain occasions. The duration often coincided with the length of time the perpetrator was jailed.

The most immediate experience of the victims and the one which occurred most often was the sense of relief that was reported by almost all of the participants (83%) following disclosure (see Table 21). Despite all of the ordeals the had to undergo once they disclosed, they felt relief at having done so. The extent of their relief was quite powerful and of high intensity, however the duration was often somewhat short as the other realities of disclosure appeared. The sudden reduction in fear and the increase in their sense of

<table>
<thead>
<tr>
<th>Category</th>
<th>Properties</th>
<th>Dimensional range (applied to each incident)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Regret</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Frequency</td>
<td></td>
<td>often ←→ never</td>
</tr>
<tr>
<td>Extent</td>
<td></td>
<td>more ←→ less</td>
</tr>
<tr>
<td>Intensity</td>
<td></td>
<td>high ←→ low</td>
</tr>
<tr>
<td>Duration</td>
<td></td>
<td>long ←→ short</td>
</tr>
</tbody>
</table>
validation as others supported and believed them, offered them a new freedom. The release from the secret unbound them and offered hope.

Table 21

**Sense of Relief at Disclosing**

<table>
<thead>
<tr>
<th>Category</th>
<th>Properties</th>
<th>Dimensional range (applied to each incident)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Relief</td>
<td>Frequency</td>
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</tr>
<tr>
<td></td>
<td>Extent</td>
<td>more $\rightarrow$ less</td>
</tr>
<tr>
<td></td>
<td>Intensity</td>
<td>high $\rightarrow$ low</td>
</tr>
<tr>
<td></td>
<td>Duration</td>
<td>long $\rightarrow$ short</td>
</tr>
</tbody>
</table>

There was a very strong desire on the part of many of the victims to take back their disclosure (see Table 22). In some of them it never happened, while in others it happened often (44%). It occurred more in those where the perpetrator went to jail and/or

Table 22

**Desire to Have Recanted Disclosure**

<table>
<thead>
<tr>
<th>Category</th>
<th>Properties</th>
<th>Dimensional range (applied to each incident)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Recant</td>
<td>Frequency</td>
<td>often $\rightarrow$ never</td>
</tr>
<tr>
<td></td>
<td>Extent</td>
<td>more $\rightarrow$ less</td>
</tr>
<tr>
<td></td>
<td>Intensity</td>
<td>high $\rightarrow$ low</td>
</tr>
<tr>
<td></td>
<td>Duration</td>
<td>long $\rightarrow$ short</td>
</tr>
</tbody>
</table>
where there was a significant amount of questioning about the molest (see Table 15).

There was a strong sense of regret (see Table 20), a desire to undo what they felt they had caused and/or a wish to stop the questions. The intensity was at its highest just following the sentencing and/or during the most intense questioning and decreased in the months after. The duration was often short, lasting only a few days to a few months.

All twenty-three of the participants reported that they would have handled their disclosure differently, if they had it to do over again (see Table 23). The frequency was always often, with none wishing to never change what they had done. Only three of the girls would not have disclosed. The other twenty would have told much earlier, as soon as the molest first happened. Only nine of those twenty would have told the same person, feeling it would have been handled better if they went to the authorities themselves. Of the twenty girls, fifteen would have disclosed more details right away, to not only insure

<table>
<thead>
<tr>
<th>Category</th>
<th>Properties</th>
<th>Dimensional range (applied to each incident)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disclose Differently</td>
<td>Frequency</td>
<td>often ←→ never</td>
</tr>
<tr>
<td></td>
<td>Time</td>
<td>earlier ←→ later</td>
</tr>
<tr>
<td></td>
<td>Person</td>
<td>different ←→ same</td>
</tr>
<tr>
<td></td>
<td>Details</td>
<td>more ←→ less</td>
</tr>
<tr>
<td></td>
<td>Place</td>
<td>different ←→ same</td>
</tr>
</tbody>
</table>
the perpetrator received some punishment, but also to reduce the number of questions they were asked later. Only four of the twenty would have disclosed in the same place, the others feeling the location did not aid in their disclosure.

The effects of disclosure often resulted in additional trauma for the victims. The participants saw removal from their homes as more traumatic when it was immediate, lasting for a long time, an official decision and with an overall negative experience. The most traumatic experience was being questioned about the molest, especially when it happened often, was extensive, highly intense, of long duration and involved many people. They also found testifying in court increased their sense of revictimization. This was most often the case when they had little preparation, there were many questions, which involved much embarrassment, the questioning lasted a long time and they had to confront the perpetrator. The consequences to the perpetrator also influenced how the victims viewed the effects of disclosure. Many of the participants felt less revictimized if the perpetrator was immediately removed and arrested, then sentenced to a long period in jail and mandated to some type of treatment. The sense of continuing trauma experienced by many of the victims was exacerbated when the perpetrator denied all responsibility, showed no remorse, blamed and rejected the victim and took flight. The desire to punish the perpetrator led to contradictory feelings, in some of the victims, when they experienced regret over the consequences to the perpetrator.

The trauma experienced by some of the victims following disclosure was often the result of the response of their family. There was more trauma when the family blamed, rejected and responded with anger. The traumatic effects of disclosure were reduced
when the victims felt an increased closeness, high level of belief and complete support from their families.

Following disclosure most of the participants in this study reported a profound sense of relief at no longer having to live with the secret. However, for some the relief was short-lived as the effects of their disclosure became apparent. A number of them felt a strong desire to recant their earlier statements about molest, in fact, many did retract their disclosures. In each case they would have modified how they disclosed their sexual abuse, disclosing earlier, to a different person, with more details and in a different place.
DISCUSSION

The results indicate the process of disclosure and its after effects are highly involved and not a simple matter of "molest, disclosure, cessation of molest." It can be seen that a number of points the process can take various turns and the results be totally different. The data give a clearer picture the process of disclosure for this sample, offering a characterization of the individual to whom the victim is most likely to disclose, the factors which helped or hindered it, the context and the effects of disclosure.

The experiences presented in this study partially answer the questions of "what" happens and "what" the impact is, of the disclosure of sexual abuse. It is clear there was a process by which the participants in this study decided who to tell, that various factors helped or hindered that decision, which occurred in certain context, with specific results. The results support the findings of many authors who have investigated sexual abuse, its disclosure and the impact of that disclosure. Finkelhor and Browne (1985), Browne and Finkelhor (1986), and Russell (1983) found similar results in their research, though presented quantitatively.

The results of this study are limited by the very specific nature of the sample, only females between the ages of ten and nineteen, who were in a treatment program for sexual abuse victims. This sample prevents wide generalizations from the results, but does offer insight into this group and allows for speculation relative to other victims of sexual abuse.

The responses gathered from the limited sample of this study offers some insights into the disclosure of sexual abuse and its impact upon adolescent females. First, in terms
of to whom a victim, as represented in this study, would most likely chose to disclose. As shown in the results, the recipient of disclosure is more likely to be someone to whom the victim is related and upon whom they are dependent, rather than a person in authority. Therefore, this person is likely to be a parent or other close relative. Holding the factors of alliance, duration of relationship and contact constant, the key factors in disclosing to a relative revolve around trust and communication. In increasing the likelihood of disclosure, the first goal of the social work profession would be to enhance trust and communication between family members. The second goal would be to increase, not only the family members’ availability to suspected victims, but also their general knowledge about sexual abuse. It would also be important to help the family members to understand the importance of the victim’s confidentiality, the need to offer encouragement and unqualified belief. The need to provide support for the victim in disclosing and afterward would need to be emphasized, as would the need to take immediate action to report the abuse. However, the most important response to encourage on the part of family members is for them to ask about sexual abuse.

The practitioner themselves, must work to enhance trust and open communication between them and the suspected victim. They must be available and knowledgeable about sexual abuse and disclosure. The social worker should strive to increase in themselves all of the characteristics needed to enhance disclosure. They should also endeavor to enhance these characteristics in other authority figures who have contact with potential victims, such as teachers and doctors. Most of all they must ask about sexual abuse.
The social work practitioner must work to reduce the factors which hinder disclosure. Education is a key factor in increasing knowledge about the meaning and nature of sexual abuse. Advocating for programs in schools and in the media would help to increase knowledge and belief and reduce the impact of threats and promises. Education would increase the awareness in victims and potential victims that others have been molested and have disclosed. It could also convey information regarding the appropriate words to use in disclosing, to whom one could disclose, and the procedures involved in disclosing. Increased education about sexual abuse would also help to clarify the role of responsibility and reduce fear of harm to the victim and their family. Advocacy for appropriate laws and consequences would mitigate concern for the perpetrator and impact the effects of perpetrator’s response to disclosure.

While the data in this study indicate that a familiar location fosters disclosure, many of these familiar environments are not safe for the victims of sexual abuse. The social worker needs to work to develop safe environments which foster disclosure. The emotions which exist in the context of disclosure can be addressed in a manner which will maximize the likelihood of disclosure. Identification of fear, anger and frustration and appropriate therapeutic work can help the victim channel these emotions into action. Work to minimize shame and depression can release these blocks to disclosure.

Education about the effects of isolation can help individuals who come into contact with potential victims identify potential problems and affect some intercession. Interventions with families and suspected victims can serve to reduce the effects of isolation and increase the possibility some victims will disclose.
Awareness that the decision to disclose may often be an impulsive action precipitated by a high level of emotional arousal might allow practitioners to be more receptive to these impulses. Simply asking a suspected victim during an emotional period may be all that is needed to stimulate disclosure.

In order to minimize the increased trauma following disclosure, alternative methods of dealing with the victims and gathering information would need to be explored. The data from this study indicate that it is important to make every effort possible to maintain the victim in their own home and to minimize the length of out-of-home placements. The safety of the victim is always of paramount concern, but that must be carefully weighed against producing further trauma by removing the victim from a familiar environment.

A radical change would need to be made in the way evidence is gathered and legal testimony is addressed. A team approach, which has been tried in some areas, involving a minimum number of individuals from requisite agencies would respond to take a child abuse report. The majority of evidence would be gathered by this team using various means, including video recording. Their assessment, expertise and testimony would need to be acceptable in all legal matters involved. This would reduce the number of people who would need to interview the victim and would minimize further trauma. The use of video taped testimony could become standardized to eliminate, all but extraordinary cases, the need for the victim to have to appear in court.

The consequences to the perpetrator would need to be more rigorous and thoroughly enforced. This would include minimum jail time, probation and mandated (and enforced) treatment. It would be very important to insure that there were consequences
for the perpetrator, in order to reduce the victim's perception that they are the only ones being "punished."

There would need to be an increased effort to work with the families of the individuals who disclose sexual abuse. The role of the social worker would be one of interceding with the family to help it understand the cause and effects of sexual abuse. It would be important to help all members accept responsibility and minimize blame, rejection and anger. Increasing understanding would elicit belief in the victim, as well as, enhance closeness and support.

Appropriate interventions with the victim at the time of and following disclosure would help maintain their level of relief and minimize their desire to recant. Often victims are seen only briefly and then remanded to a waiting list for future treatment. Immediate intervention would reduce future trauma and solidify their desire to maintain their decision to disclose.

The recommended goals for the social work profession cited above, may be summarized as follows:

1. Work to enhance trust and communication between family members.
2. Increase family members' availability to suspected victims.
3. Educate family members' about sexual abuse, confidentiality, the need for encouragement, belief, action and asking.
4. Social workers must enhance trust and communication with suspected victims, as well as, be available and knowledgeable.
5. Social workers must ask about sexual abuse.
6. Advocacy for programs to increase knowledge and awareness about sexual abuse.

7. Advocacy for appropriate laws and consequences for perpetrators.

8. Work to develop safe environments for disclosure.

9. Work to identify emotions which maximize or minimize the likelihood of disclosure.

10. Provide education about the effects of isolation and intervene to reduce its impact.

11. Awareness that disclosure is often an impulsive act.

12. Advocacy for alternative methods of gathering information from victims.

13. Weighing the need for out-of-home placement against the impact upon the victim.

14. Interventions with families following disclosure to minimize after-effects.

15. Advocacy for more immediate interventions with victims.

Many of the recommendations noted above would have significant fiscal impact, locally and on a state and federal level. However, when weighed against the cost to the individuals and to society, these costs are small. The literature offers strong evidence that the impact of sexual abuse and its after effects are much costly if left untreated (Finkelhor & Browne, 1988; Strean, 1988; Briere & Runtz, 1991). The interventions of social workers with victims and their families could increase the likelihood of disclosure and minimize the traumatic effects of disclosure. Advocacy for policy changes could enhance the prospect of disclosure and reduce its impact upon the victims and their families. Social work could have a significant impact on reducing this cost, not only on the micro level, but on the macro level as well.

Further research is needed to better understand the decision making process in the disclosure of sexual abuse and to develop methods of intervening to expedite the process.
Research is also needed to better understand the traumatic effects of disclosure and develop policies to reduce this trauma. There is also a need to understand the role of education in the prevention of sexual abuse and insure the immediate disclosure of that abuse.
APPENDIX A

Informed Consent

The study in which you are being asked to participate is designed to investigate the experience of the disclosure of sexual abuse. This study is being conducted at (name removed from report for confidentiality) by John Weible, a graduate student in Social Work at California State University, San Bernardino. The study will be supervised by Dr. Teresa Morris, professor of Social Work.

In this study, John Weible and/or your group leader will be asking you a series of questions about your experience of the disclosure of sexual abuse. These questions will require that you answer in your own words about your feelings and thoughts. What you say will be written down and recorded on audio tape. You may be asked a second set of questions several weeks later. Each series of questions will take no more than one hour. There will be no “trick questions” and no right or wrong answers. You will not be asked any questions about the sexual abuse itself, any sexual activity, nor the names of anyone involved.

There are minimal risks to you involved in answering these questions, however, if at any time during or after the interview you feel uncomfortable about the questions or they bring up other issues, please feel free to discuss it in your group, with your group leader, with John Weible, or with the (name removed from report for confidentiality) Program Manager, (name removed from report for confidentiality). You may contact your group leader, John Weible, or (name removed from report for confidentiality) at (number...
removed from report for confidentiality). If you have any questions about the study itself you may contact Dr. Teresa Morris at (909) 880—5561.

This study is concerned with learning how YOU experienced the disclosure of sexual abuse in your own words. It is interested in a number of factors related to disclosure. For example, how the disclosure came about, how the decision to disclose was made, why the disclosure was made to one person and not another, and what happened after the disclosure. It is believed that this information will be helpful to others who may be deciding to disclose or have disclosed sexual abuse. It is also hoped this information will be useful to counselors and therapists in helping others deal with the process of disclosure.

Please be assured that any information you provide will be held in strict confidence. At no time will your name be reported along with you responses, and only John Weible and your group leaders will be aware of your name. No information with your name on it will leave (name removed from report for confidentiality). The audio tapes will only be used by John Weible to insure that what was written down was correct and will not leave (name removed from report for confidentiality). All data will be reported in group form only. At the conclusion of this study, you may receive a report of the results from John Weible and/or your group leaders.

This study and your participation in it, are not part of the normal clinical treatment offered by (name removed from report for confidentiality). While it is hoped that the
study will benefit both those who provide and those who receive treatment for sexual
abuse, it should be considered to be distinct from that treatment.

Please understand that your participation in this research is totally voluntary and
you are free to withdraw at any time during this study without penalty, and to have any
data about you removed at any time during this study.

I acknowledge that I have been informed of, and understand, the nature and pur-
pose of this study, and I freely consent to participate.

_________________________________________          _______________
Participant’s Signature                                      Date

If under 18 years of age you must also have the signature of your parent or legal guardian.
Their signature acknowledges that they also understand the nature and purpose of this study, and consent
to your participation.

_________________________________________          _______________
Parent or Legal Guardian’s Signature                    Date

_________________________________________          _______________
Researcher’s Signature                                  Date
APPENDIX B

Debriefing Statement

The study in which you just participated is designed to investigate the experience of the disclosure of sexual abuse. This study is being conducted at (name removed from report for confidentiality) by John Weible, a graduate student in Social Work at California State University, San Bernardino. The study is being supervised by Dr. Teresa Morris, professor of Social Work.

This study is concerned with learning how YOU experienced the disclosure of sexual abuse in your own words. It is interested in a number of factors related to disclosure. For example, how the disclosure came about, how the decision to disclose was made, why the disclosure was made to one person and not another, and what happened after the disclosure. It is believed that this information will be helpful to others who may be deciding to disclose or have disclosed sexual abuse. It is also hoped this information will be useful to counselors and therapists in helping others deal with the process of disclosure.

Please be assured that any information you provided will be held in strict confidence. At no time will your name be reported along with your responses, and only John Weible and your group leaders will be aware of your name. No information with your name on it will leave (name removed from report for confidentiality). The audio tapes will only be used by John Weible to insure that what was written down was correct and will not leave (name removed from report for confidentiality). All data will be reported in
group form only. At the conclusion of this study, you may receive a report of the results from John Weible and/or your group leaders.

It is assumed there were minimal risks to you involved in answering these questions, however, if at any time after the interview you feel uncomfortable about the questions, the answers you gave, or they bring up other issues, please feel free to discuss it in your group at (name removed from report for confidentiality), with your group leader, with John Weible, or with (name removed from report for confidentiality) Program Manager, (name removed from report for confidentiality). You may contact your group leader, John Weible, or (name removed from report for confidentiality) at (number removed from report for confidentiality). If you have any questions about the study itself you may contact Dr. Teresa Morris at (909) 880-5561.
APPENDIX C

Interview Questions

1. How old are you now?
2. How old were you when the molest first occurred?
3. How long did the sexual abuse go on before it finally stopped?
4. How old were you the first time you told someone about the sexual abuse?
5. How old were you when the sexual abuse was disclosed?
6. Who was the perpetrator—what was your relationship?
7. Who did you tell about your being sexually abused?
8. How did you decide who to tell?
9. Did you tell anyone about being sexually abused who did not believe you or did not do anything?
10. Did anyone try to convince you not to disclose?
11. Did anyone try to convince you or help you decide to disclose?
12. Where were you when you disclosed the sexual abuse?
13. How did the disclosure of your molest come about?
14. Who reported the sexual abuse to the authorities?
15. What was happening in your life right before the sexual abuse was disclosed?
16. If you disclosed the sexual abuse, what made you decide to tell someone when you did?
17. What did you imagine was going to happen if your sexual abuse was disclosed?
18. How is what really happened different from what you imagined?
19. Did you have any difficulties in disclosing your molest?
20. What helped you the most in deciding to disclose your molest?
21. What happened to you after the sexual abuse was disclosed?
22. What happened to your family after the sexual abuse was disclosed?
23. What happened to the perpetrator after the sexual abuse was disclosed?
24. Where and with whom do you live now?
25. What were the most difficult things that happened after the sexual abuse was disclosed?
26. What were the best things that happened after the sexual abuse was disclosed?
27. How is your life different after the sexual abuse was disclosed from what it was before disclosure?
28. If you could do it over what would you do differently about the disclosure of your being sexually abused?
29. Did you ever want to take back the disclosure?
30. If you had a friend who was being molested, what would you say to them about telling someone?
REFERENCES


