

“In silence there was a lot of suffering”: The impact of disclosure of Child Sexual Abuse  
across the life-course.

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## Abstract

This dissertation explores the lifelong impact of Child Sexual Abuse (CSA) and the role that the timing of disclosure plays in shaping survivors' experiences. Using a life-course perspective, this study examines how the age at which survivors disclose – whether in childhood, young adulthood and late adulthood, affects outcomes across the life-course, such as access to justice, and social responses. This study adopted a qualitative approach, whereby 31 adult survivors were interviewed. Participants varied by age and disclosed abuse at different life stages. A thematic analysis was employed to interpret the data through the lens of life-course theory, exploring themes such as human agency, linked lives, timing of events and societal framing. The findings revealed that survivors described a multi-stage, non-linear journey of disclosure involving pre-disclosure silence, the moment of disclosure, and its aftermath. The findings also showed that participants that disclosed in childhood often encountered disbelief and inaction. Survivors that participated in this study reported difficulties in major life transitions such as education, forming romantic relationships, employment, and parenthood. These disruptions were particularly severe when disclosure was delayed or disbelieved. Furthermore, this study showed that older survivors often had less societal support and more institutional distrust, which affected their ability to disclose. Last, the findings showed that a reframing of CSA discourse such as replacing terms such as 'historical' or 'non-recent' with survivor-informed language that acknowledges the ongoing harm. The results from this study concluded that institutions should accommodate the complexities of disclosure by understanding the impact that CSA has on survivors across the course of their life. This research fills a significant gap in understanding CSA disclosures across the life-course and offers crucial insights for improving institutional response.



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# *“In silence there was a lot of suffering”*: The impact of disclosure of Child Sexual Abuse across the life-course.

## 1. Introduction

This thesis explores the impact of Child Sexual Abuse (CSA) across the life-course by analysing disclosures made at different stages, such as in childhood (0-18 years), young adulthood (19-35 years), and late adulthood (36+ years). Disclosures made at different stages of the life-course are important to investigate since there are 11 million CSA survivors in the United Kingdom (UK). Up to 55%-70% of survivors do not disclose before adulthood (London, Bruck et al. 2005, Radford, Corral et al. 2011). There are two ways CSA takes place, such as contact and non-contact sexual abuse of a child. Contact offences include indecent assault and rape, whereas non-contact CSA covers offences such as the making and distribution of indecent CSA images or indecent exposure (Long, Alison et al. 2013).

It is important to note that different terms are used when referring to those who have experienced childhood sexual abuse, for example “victim” and “survivor”, many people prefer the term ‘survivor’ (Newsom and Myers-Bowman 2017). I use the term ‘survivor’ throughout this thesis as I feel it better acknowledges the harm caused by perpetrators and the strength it takes these individuals to carry on with their lives (Newsom and Myers-Bowman 2017).

Disclosures made at different stages of the life-course have sparsely been addressed in research (Alaggia, Collin-Vézina et al. 2019) which is important because little is known about whether there are any differences in how disclosures occur and whether there are any differences in survivor's needs. A comparison of disclosures made at different stages of the life-course will enable us to find out the impact that CSA and disclosure may have had on survivors lives. Understanding the factors that influence or prohibit disclosures in adulthood is important as little is known about how disclosing at different ages and times of life may impact survivors differently (Radford, Corral et al. 2013). While there are always a myriad of factors at play, such as gender (Tang, Freyd et al. 2008), sexuality (Easton, Saltzman et al. 2014), disability (Klebanov, Friedman-Hauser et al. 2024), class (Reddock, Reid et al. 2022), and ethnicity (Ali, Butt et al. 2021), in this thesis my focus is primarily on how age can impact the experiences of survivors.

When researching CSA a trauma-informed approach is critical, as CSA often represents a major trauma to for those who have survived it. Thus, a trauma-informed approach means providing safe and supportive environments and acknowledging survivors current difficulties, such as addiction, being violent, mental health issues as a symptom of their CSA trauma (Quadara and Hunter 2016, Champine, Lang et al. 2019). In my research, my specific trauma-informed approach meant that I ensured that I provided safe and supportive surroundings for each interview. Further, I also interpreted the data using a trauma-informed approach, which allowed me to demonstrate that survivors face additional barriers throughout their life-course as a result of experiencing early childhood sexual abuse experiences.

To investigate CSA disclosures at different stages of the life-course, I draw upon the life-course perspective which is an interdisciplinary approach that has been



extensively applied in research on other topics (Elder Jr and Shanahan 2007). The life-course perspective conceives development as an ongoing process occurring from birth to death, where chronological age refers to the process of aging and how different ages and stages at which individual have specific experiences can influence their lives and life trajectories differently (Bengtson, Elder Jr et al. 2012). While it has been well established that childhood experiences affect life chances in adulthood (Elder 1993), life course theory explicitly addresses how childhood experiences influence outcomes in later life, such as well-being and health in adulthood (Elder 1993). The life-course perspective is multi-disciplinary since it draws upon sociological, psychological, anthropological, biological, neurobiological research to offer a comprehensive overview of how an individual is affected by their early childhood experiences throughout their life-course.

I address four main research questions in this dissertation:

1. What are the facilitators and barriers to disclosure across the life-course?
2. What impact does the timing of disclosure (i.e., in childhood, young adulthood and later adulthood) have on adult survivors?
3. How does disclosing CSA feel as a process, for example, pre-disclosure, disclosure, post-disclosure?
4. What issues arise when focusing on non-recency in CSA?

The life-course perspective provides a theoretical framework to address disclosures of CSA made in childhood, young adulthood, and late adulthood. Themes of the life-course perspective include: the interplay of historical time and human lives;

timing of lives; linked and independent lives; diversity in life-course trajectories; developmental risk and protection; and human agency (Hutchison 2018). In order to analyse disclosures across the life-course, I employ a thematic analysis. This technique is commonly used to examine narratives by assessing the data for particular patterns in texts to assess 'shared meanings' of a particular social phenomenon (Braun and Clarke 2006, Vaismoradi, Turunen et al. 2013).

## Overview of thesis chapters:

### *Chapter 2: Literature Review and Theoretical Framework*

Chapter two provides an overview of the theoretical framework informing my research. This chapter will show how the life-course perspective is a fitting framework for studying CSA disclosures made at different stages of the life-course. In addition, I draw upon framing theory as proposed by Goffman (1974) to analyse the current framing of adult CSA survivors (see chapter seven). This analysis examines whether there are any potential implications for adult CSA survivors from framing them as historical or non-recent (Barmaki 2021).

### *Chapter 3: Methodology*

Chapter three shows which methods I employ in my research project whereby I explain why qualitative methodology is fitting for answering my research questions. I also provide understanding for why I undertook this study by examining my positionality in reference to this research.

### *Chapter 4: Linked lives in child sexual abuse and the disclosure process*

Chapter four provides insight into participants experiences of telling someone about the CSA experiences for the first time, illustrating that disclosure takes place as a three-stage, non-linear process. This process includes a transition from silence and secrecy pre-disclosure to midst disclosure and post-disclosure.

#### *Chapter 5: The interplay of human lives and historical time periods in CSA disclosures*

Chapter five assesses the interplay of human lives by looking at socio-historical events, such as the emergence of Jimmy Savile's crimes, the #MeToo movement and other high-profile cases, as encouraging disclosures. This chapter also looks at the timing of disclosure by drawing upon participants born from different historical time points and their experiences of disclosing CSA at different points in time.

#### *Chapter 6: Timing of lives: The impact of disclosing child sexual abuse on life-course transitions.*

Chapter six addresses the timing of disclosures, i.e., in childhood, young adulthood and late adulthood, to provide understanding as to why survivors disclose at different stages of the life-course. Likewise, this chapter looks at how motives may differ depending on the stage of the life-course that the individual is disclosing.

#### *Chapter 7: Framing adult CSA survivors: Historical Sexual Abuse and Non-Recent Sexual Abuse*

This chapter addresses the framing of adult CSA survivors. Many survivors are adults at the point of disclosure (Hutchison 2018). Often, adult CSA survivors are framed as 'Historical Sexual Abuse' (HSA) or 'Non-Recent Sexual Abuse' (NRSA) survivors. This kind of framing is only applied to individuals aged 18 and over (NSPCC 2024). Little

research has addressed how adult CSA survivors are framed and whether framing has implications for them. An analysis of survivor's understanding of these terms will provide insight into both individual and sociological views of CSA and whether there are conceived differences in how child and adult survivors disclosures should occur and be responded to.

## 2. Literature Review

### The history of CSA

In the UK, there is a long history of CSA which provide insight into how attitudes and common beliefs surrounding innocence and children were shaped. For example, research shows that in the 1700s, children were characterised by innocence and naivety, and whilst they were treated as different to adults, older children were often seen as being able to consent to sex and as capable of seducing adults (Boxall, Tomison et al. 2014, Delap 2018). Historical documents from this time period illustrate how there were references to 'child-adult sex', highlighting that whilst CSA occurred, it was often not perceived or treated as such (Worrell 2001). In 1885 in the United Kingdom (UK), the age of consent was set at 16 years in law (Cocca 2015). Throughout the Victorian era, CSA was connected to families and the behaviours of the poor (Woodiwiss 2018). Common beliefs at this time were that children who engaged in sexual activity were not innocent and were typecast by society as abnormal and as social deviants (Jackson 2013, Delap 2018). Consequently, CSA survivors were often socially viewed as damaged who required re-training in order to be accepted by society (Brown 2006). This means survivors were not seen as survivors. Rather, minors alleging CSA were seen instead as dangerous and corrupt (Flegel 2016).

Throughout the late nineteenth-century, CSA was discussed and conceptualised more seriously (Jackson 2013). However, CSA was defined as a stranger having sexual activity with a child unknown to them, as evidenced by 'stranger danger' discourse. This definition was reinforced by institutions such as the National Society for Prevention against Cruelty to Children (NSPCC). By the twentieth-century,

societal understandings of CSA advanced, but with an emphasis on the survivor's reputation rather than the actions of the perpetrator (Whittier 2009). For example, child survivors in a court were accused of attempting to extort money or destroying the reputations of men (Bingham and Settle 2015, Bingham, Delap et al. 2016). Criminal justice for survivors was rare in CSA cases, due to a lack of reporting (Jackson 2013). It was not until the 1970's, when feminism began to heighten, that CSA policies were obligatory as the law of consent was enforced more rigorously (Herman 2015). Feminism revolutionised the ways in which western culture responded to survivors, such as the introduction of children's human rights in 1989, which protected children from abuse perpetrated by adults (Angelides 2004). Hence a feminist approach has been considered important for women's and children's human rights since the majority of sexual abuse has been shown to be perpetrated by men (Browne 2014). Furthermore, feminists proposed that CSA was a result of power and control rather than sexual desire (Whittier 2009), because men have historically treated women and children as objects (Warner 2009).

Just as the feminist movement heightened in the public domain, a theory surrounding the functioning of memory threatened the validity of survivors accounts and with it, the progress made surrounding the social awareness of CSA. Loftus & Palmer (1974) conducted a series of experiments which led them to theorise 'false memory syndrome', which suggested that people may be prone to altering their own memories when provided with false information (Laney and Loftus 2016). Subsequent studies led to claims that therapists were implanting or changing patients' memories and encouraging false disclosure, and that many convicted CSA offenders have been unjustly imprisoned (Otgaar, Howe et al. 2019). Consequently, CSA disclosures were

downplayed and reports to the authorities gradually faltered as a rhetoric of false memories emerged (Dunn 2010).

## Current research on CSA

The current literature shows that all realms of a survivors life are affected by CSA, such as sleep, mental and physical health, neurobiology, education, and behaviours (Hardner, Wolf et al. 2018). Statistics reveal the worldwide prevalence of CSA, with up to 1 in 5 children affected in Europe and the United States (Van der Kolk 2014, Horn, Eisenberg et al. 2015). In the UK, roughly one in twenty minors aged 11-17 years old have experienced at least one form of CSA (Radford, Corral et al. 2013). Currently in the UK, CSA is deemed a violation of the child's human rights (Collin-Vézina, Daigneault et al. 2013). The widespread prevalence of CSA has become more transparent in recent years, due to growing societal awareness around the issue (Browne 2022). In the UK, roughly 60 cases of CSA are formally reported to the authorities every day (Radford, Corral et al. 2011, Dorey 2018). Yet, only one in eight survivors come to the attention of the authorities and professionals warn that CSA is under-reported as many never disclose (Kelly and Karsna 2017). CSA is thought to have a detrimental impact on the UK economy, costing the state an approximate 3.2 billion pounds in healthcare services annually (Saied-Tessier 2014). Unlike other crimes, CSA has emerged, disappeared and re-emerged in western culture over time, meaning CSA has been considered more or less of a crime depending on how it is acknowledged at the time (Angelides 2004). Current understandings of CSA have been influenced by socio-political discourse, academic research and public policies (Lovett, Coy et al. 2018).

Current research often frames CSA in terms of masculinity. Masculinity is a concept that has prevented boys and men from disclosing due to the fear that others will perceive them as non-masculine (Whittier 2009, O'Leary, Easton et al. 2017). Men are encouraged to behave in accordance with socio-cultural norms of masculinity which may discourage disclosures. For example, strength, heterosexuality, dominance, and a pursuit for status, which all discourage disclosure (Easton 2013, Easton, Renner et al. 2013, Arttime, McCallum et al. 2014, Gagnier and Collin-Vézina 2016). Masculinity also guides perceptions of female offenders, as often, they are not as recognised in society. There are approximately 64,000 female perpetrators in the UK, yet the public consider it rare for women to sexually abuse a child because they are perceived as nurturers (Peter 2009, Hayes and Carpenter 2013). Hence, people often adopt the rationale that female CSA perpetrators are 'mad' or 'bad' (Turton 2007, Barlow and Lynes 2015). Perceptions of madness and pathology include hysteria and instability (Jewkes 2015), whereas the bad signifies an inherent evil whereby social norms and expectations around femininity are rejected (Barlow and Lynes 2015). Researchers (2015) point out that female CSA perpetrators are not treated the same as male perpetrators, as their crimes are deemed as less serious and harmful, despite engaging in the same level of criminality as men (Cain, Sample et al. 2017). Therefore, the ways in which CSA survivors are perceived by others and themselves depends on the gender of the perpetrator.

Research on CSA demonstrates the ways in which society has failed CSA survivors. For example, the failing of many children by UK authorities has recently come to light as many incidents were not prevented or stopped even after concerns about the occurrence of CSA were reported to the police (Dorey 2018). This failing includes a lack of suitable facilities for survivors in making a formal disclosure, or



discounting cases because of common CSA myths, such as treating a CSA survivor as a 'child prostitute' (Shead 2014, Bell 2018). Scandals of CSA and exploitation across Britain, such as cases in Rotherham, Oxford and Rochdale, have uncovered the institutional failings of many survivors, when the police fail to take action when they are informed of a CSA offence and did not adequately respond (Dorey 2018). Researchers have demonstrated the difficulty for the police to perceive exploitation and CSA because many of the survivors do not actively accept that they are being abused (Thomas 2016). For this reason, protecting children and policing the sex offenders can be complex as it requires adults to recognise CSA even when the survivor does not (Thomas 2016).

### UK system for dealing with CSA.

Currently, the UK largely relies on child protection work within the social work profession to uphold safeguarding measures and policies for vulnerable children (Munro 2019). It is considered to be in the public's interest to be concerned about CSA and report any suspected child abuse to the authorities (Faller 2014, Faller 2017, Levin 2019). The House of Lords (2016) state that it is the duty of local authorities to investigate all allegations and concerns of abuse as all children in the UK are protected under the Children Act (1989) and the 2004 Working Together to Safeguard Children Act (Coleman 2024). Child Protection Services is a governmental agency designed to protect vulnerable children from harm. For children at risk from harm, preventative and supportive methods are put in place (Hood, Goldacre et al. 2016). Children are therefore more protected than in previous years because past failings have been made transparent. However, for CSA survivors who become eighteen years of age,

parenting/authority responsibilities end, and it then becomes the adult survivors responsibility to disclose to the police or seek support from authorities.

To make past failings of CSA survivors transparent is one of the aims of the Independent Inquiry into Child Sexual Abuse (IICSA 2022) so that society can learn from what has gone wrong in the past order to prevent and reduce levels of CSA in the UK in the future. The IICSA was constructed in 2014 to review evidence and inquiries surrounding past CSA. Presently, when there is evidence of CSA, offenders are punished in the criminal justice system to help protect the public and to reduce rates of CSA perpetration (Zedner 2016). In principle, criminal justice is served when the guilty are given their 'just deserts', which often warrants some form of punishment in a court of law (Strelan and van Prooijen 2013). The criminal justice system has been accused by Newburn (2003) of focusing primarily on the offender wherein the survivor can be left feeling as if they are '*the forgotten party*' (pp. 146). For example, survivors are not always informed of court hearings, appeals in conviction, or kept up to date about their case (Wemmers 2010). The 'forgotten party' concept is enforced as survivors are labelled as complainants and do not gain victim status until there has been a conviction against the offender (Wemmers 2009). However, over time there has been growing awareness in the criminal justice system that survivors may require ongoing support (Mawby 2016). For example, in 1974 *Victim Support* was constructed to support individuals subjected to crimes (Mawby 2016). Additionally, in 1964 the Criminal Injuries Compensation Scheme (CICCS) was introduced to provide victims and survivors of crime monetary awards from public funds (Smith and Galey 2018). Furthermore, a Survivor Personal Statement Scheme (VPSS) was founded in 1996 to ensure all survivors and victims, or family members of a murder victim are offered the opportunity to voice the impact of the crime on their lives (Cheston 2007). All of these

services are largely accessible to survivors of CSA pursuing criminal justice even if there has not yet been a conviction. Most cases of CSA are dealt with in the crown courts (Jacobson, Hunter et al. 2015).

## CSA and the #MeToo movement

In October 2017, the social movement #MeToo gained widespread attention worldwide, with the hashtag being used in 85 countries (Sweeny 2020, de Roos and Jones 2022). This global social movement was namely focused on women whereby survivors of sexual violence and abuse shared their experiences on social media (Nutbeam and Mereish 2022). #MeToo is important to highlight since the movement illustrates how society has changed over time and how social media platforms can provide survivors a voice. Thus, currently, survivors have more agency in telling the CSA experiences in society than in previous years.

## Experiential knowledge

Last, 'experiential knowledge' is a phenomenon central to social justice for CSA survivors because it enables invaluable insight into the social issue of CSA and ensures survivors voices are heard. The concept of 'experiential knowledge' has largely been utilized in studies assessing mental health (Faulkner 2017). Experiential knowledge is the notion that the real 'experts' are the individuals who have experienced the phenomena being studied (Beresford 2010). For research involving adult survivors, there has been arguably, a lack of experiential knowledge as there is a predominant focus on children who are currently affected by sexual abuse. Focusing primarily on children rather than adults could be problematic given the fact that the majority of survivors do not disclose until adulthood (Grandgenett, Pittenger et al. 2021). Collectively, the voices of adult survivors contribute to social justice, as

individual stories help to ensure CSA is a transparent issue in society (Mejia, Cheyne et al. 2012). Despite awareness in UK culture of CSA, survivors have consistently been shown to be disadvantaged in accessing social resources, such as institutional support (Lamoureux, Palmieri et al. 2012). A lack of social justice may be evident in the research showing that survivors do not have equality of opportunity at life-chances due to the long-lasting effects of CSA (Hackett, Masson et al. 2015).

## Disclosing CSA

Disclosing CSA can be considered a significant life event and is defined as a survivor of CSA telling another individual that they were sexually abused in childhood (London, Bruck et al. 2005, Reitsema and Grietens 2016). Researchers assert that little research has explored similarities and differences between adult and childhood disclosures (Tener and Murphy 2015). Yet the available literature suggests that the older the individual is at the time of disclosure, the more likely they are to be subjected to higher levels of blame and scrutiny than are younger survivors (London, Bruck et al. 2005, Connolly, Coburn et al. 2017). Delayed disclosure illustrates the complexity of CSA, since survivors may only come to terms with what has happened to them years after the event, meaning they themselves and others may not understand how current difficulties in adult life are, as a result of CSA. If survivors do not disclose for many years, they cannot receive support from peers, family, or professionals, which may delay healing and recovery (Gagnier and Collin-Vézina 2016). Disclosures can also be seen as forms of evidence, as disclosures are revisited by the police when prosecution is pursued by the survivor (McGuire and London 2020). Contrarily, many children deny they were abused, even when abuse has been corroborated with substantial evidence (Malloy, Lyon et al. 2007).

## Adult CSA survivors

Adult CSA survivors are often described as having experienced ‘Historical Sexual Abuse’ (HSA) or ‘Non-Recent Sexual Abuse’ (NRSA), labels which are applied to individuals aged 18 and over when they disclose or report the abuse (NSPCC 2024). These terms are often used interchangeably to describe a CSA offence reported after the passing of time. Yet definitions of HSA and NRSA are complex because these terms are formally defined in different ways by various organisations and academics. For example, Silverio, Bewley et al. (2021) state that whilst CSA is framed as historical for adult survivors, the CSA experiences may have not happened that long ago. Whereas the Children’s Commissioner (2017) defines NRSA as sexual abuse which occurred more than one year before being reported to the authorities. Alternatively, Quinn-Walker (2022) stated that a historical crime must have occurred at least 28 days ago. For some organisations like the NSPCC, NRSA and HSA are terms used to encourage disclosures of CSA and provide a platform for survivors to gain support. These definitions may be considered to be complex as often, individuals are victimized by sexual abuse in adulthood. For instance, rape is often described as ‘historic’ for survivors, as long as one year has passed since the offence. From this perspective, HSA does not accurately define adult CSA survivors as this term can, in some cases, be applied to individuals who were victimized when they were over the age of 18 and not just when they were children.

Recent research highlights how adult CSA survivors pursuing criminal justice are disadvantaged as in most cases there is a lack of evidence for a prosecution (Maslen and Paine 2019). For adult survivors, formally disclosing CSA is the only route to gaining criminal justice. Criminal justice cases cannot occur in cases where

survivors deny being sexually abused, due to re-traumatisation (Maslen and Paine 2019). Further, the process of going through the criminal justice system evokes feelings of revictimization and traumatisation for adult and child survivors alike (DeKeseredy and Dragiewicz 2011, Ost, de Namor et al. 2017). Feelings of trauma have been shown to be exacerbated by the process of giving evidence in court, as credibility of survivors are questioned by defence barristers, with emphasis placed on delayed disclosure and the unreliability of memories (Stolzenberg and Lyon 2014, Wessel, Eilertsen et al. 2016). Often, survivors are accused of making false allegations in cross-examination (Stolzenberg and Lyon 2014). Furthermore, HSA/NRSA could be considered a 'poor fit' for the criminal justice system when statistics show that for adult CSA survivors, criminal convictions are much lower in comparison to other crimes (Shackel 2009, Shead 2014, Tabak and Klettke 2014).

However, the lack of criminal justice in CSA cases is often the result of non-disclosure or a refusal to report formally to the police, as well as a reduced understanding of the crime in the courtroom, such as by the jury (Shackel 2009, DeKeseredy and Dragiewicz 2011). There are increasing reports in recent years of CSA, yet offenders are prosecuted with the same laws that were in place at the time the offences took place (SentencingCouncil 2024). For instance, many CSA perpetrators are sentenced in accordance with the Sexual Offences Act 1956 and Indecency with Children Act 1960. This is the case when prosecutors deal with CSA offences prior to May 2004 (CPS 2024). Therefore, adult CSA survivors who disclose are likely to be treated differently than children going through the criminal justice system due to the passing of time since the abuse.

## Theoretical Framework: The life-course perspective

In order to provide a comprehensive understanding of CSA disclosures, a life-course perspective is vital because of how it considers childhood experiences, such as CSA, as shaping outcomes in later life. A life-course approach views human development as a progression from birth to death, whereby history, biology and social structures are considered factors that influence the life course (Elder Jr 1998, Elder, Johnson et al. 2003). Moreover, a life-course is constructed by geographical location, historical time and social norms (Elder, Johnson et al. 2003, Settersten Jr 2003). This perspective contextualises how social institutions and structures influence and impact the development of the individual's life, such as expectations of appropriate conduct and socially desirable behaviours (Elder, Johnson et al. 2003, Bengtson, Elder Jr et al. 2012). Thus, according to the life-course perspective, there is always a transactional relationship between the person and the social world (Elder 1993). Even behaviours and choices made in early adulthood have the potential to affect people in the elderly stages of life (Cohen, Hitsman et al. 2006). There is a dearth of research adopting a life-course perspective in CSA disclosure studies, which warrants further attention (Alaggia, Collin-Vézina et al. 2019). For example, an investigation of adults' experiences of disclosing either in childhood, young or late adulthood may help to uncover facilitators and barriers to disclosure.

### *Transitions across the life-course*

A key aspect to the life-course perspective is *time*, because time is how people develop and transition throughout the life-course (Elder, Johnson et al. 2003). A transition is to depart from occupying prior roles to new statuses, such as leaving secondary school, beginning university or entering employment for the first time (Elder 1993). Transitions

include beginning school, getting a job, or retiring, among others (Hagestad 2018). There is a normative transition in culture, since life transitions are influenced by institutionalised expectations and norms, such as completing primary and secondary school (Hörschelmann 2011). Understanding children's life transitions to adulthood after experiencing sexual abuse is essential to understanding disclosures occurring throughout the life-course. According to Elder Jr (1998) transitions in the early years can affect subsequent transitions, even after many decades, which makes the impact of life course transitions important to study. CSA survivors can still typically transition through the life course. However, evidence suggests many CSA survivors are what researchers termed, "late bloomers", meaning transitioning may be off-time (Thomas and Hall 2008). Research investigating how transitions are experienced by CSA adult survivors is vital for understanding the psychological and sociological impact of CSA disclosure across the life-course.

### *Life-events*

A life event is defined as a substantial occurrence in life, creating sometimes significant, long-term effects, altering pathways of the life-course (Macmillan 2001, Mayer 2009). Elder emphasises that the ordering of events throughout the life course can vary in different cultures, as well as in different communities and social networks (Elder, Johnson et al. 2003). Marital separation, retirement from work and a diagnosis of illness are just a few examples of key life-events in which are known to create stress and can force the individual to adjust their life (Horwitz, Widom et al. 2001). CSA is considered to be a major life event (Wiersma, Hovens et al. 2009), which may alter subsequent, key life events. For example, CSA survivors often experience disordered life events, such as becoming pregnant at a much younger age than non-abused individuals (De Genna, Larkby et al. 2011, Mann, Bateson et al. 2020). For female



survivors, they experience three to five times the levels of androstenedione and testosterone than non-abused girls, causing an early onset of puberty (Putnam and Trickett 1993, Van der Kolk 2014). Therefore, CSA affects life events across the life-course, which in turn affects the development of survivors (Hovens, Wiersma et al. 2010).

CSA disclosure means recognising the abuse as wrong and against societal norms (Woodiwiss 2014). Research has shown that responses to survivors disclosures have the power to influence their experience as positive or negative (Allnock 2017). Further research is essential since no research to date has addressed any differences in disclosures made at different stages of the life-course. Differences in disclosures made at different stages of the life-course is of importance as little is known about whether survivors have diverse needs depending on what stage of the life-course they disclosed.

## Themes of the life-course perspective

### *Interplay of historical time and human lives*

History plays a key role in shaping attitudes of people, where historical movements and change are influential to how social issues are perceived and responded to (Moen, Erickson et al. 1997). Historical time accounts for how development is contextualised by history since social norms and societal “knowledge” changes over time and is the result of knowledge being passed through generations (Hutchison 2018). Hence, people born into different generations have developed in accordance to the prevailing social norms of the time, which can and do shift and change (Alwin, Felmler et al. 2018). From this perspective, people from different generations within a family

experience very different life events as a result of socio-historical change (Daly 2020). Historical time and the interplay of human lives is important for research since attitudes and perceptions of CSA may not be interpreted the same across cohorts from different generations.

Understanding the interplay of human lives means looking at how life experiences in childhood or in adulthood affect how individuals interact with their family, in society and with welfare institutions and agencies (Hareven 1994). A historical perspective shows how past events have affected the lives of people from different age groups (Hareven 1994). Historical change surrounding the treatment of CSA survivors has gradually increased social awareness of CSA, due to shifting attitudes toward supporting survivors (Alwin, Felmlee et al. 2018). For this reason, survivors' experiences of disclosing CSA and the responses they received may differ depending on the timing of disclosure in their life-course. The interplay of historical time and human lives may help to demonstrate the consequences and benefits for survivors disclosing CSA at different times across the life-course. For example, disclosures as a route to criminal justice may be related to historical time, since some survivors may have found it easier or more difficult to disclose to the police depending on what decade or time period they disclosed. Understanding access to criminal justice may also depend on the available policy and practices in place at the time of disclosure. Thus, historical time is integral to understanding historical attitudes (Hareven 1994), because people's views about topics change according to historical times. For example, identifying as gay or lesbian used to be taboo in western society and individuals identifying as LGBTQIA+ experienced prejudice and discrimination (Hammack and Cohler 2011). While there is undeniably still prejudice and discrimination toward individuals these individuals, these identities are more widely

accepted and attitudes are more positive today than in previous years (Sullivan 2004). The same can be said for CSA. In the past, such as in the Victorian Era, CSA was seen instead as child prostitution (Jackson 2013, Delap 2018). Hence, looking at the social norms prevalent in a participants youth when their CSA occurred, as well as the social norms in their adult lives, may help to unveil how both historical and contemporary attitudes surrounding CSA impact their willingness to disclose CSA.

### *Timing of lives*

Timing of lives looks at chronological age as influencing the life course (Kunkel and Settersten Jr 2021). An example of this is how events in childhood will be perceived as comparably different to events occurring in adulthood and late adulthood due to differences in maturity and brain development (Hutchison 2018). The timing of lives refers to shared expectations and the social norms of whether a life-event is considered timely or 'off-time' (Bengtson, Elder Jr et al. 2012, Hutchison 2018). An example of 'off-time' in western culture, is childbearing whilst in adolescence, yet in other cultures, adolescence is considered a natural time for childbearing (Settersten Jr 2003, Billari, Goisis et al. 2011). Age has been a factor in CSA due to the way in which UK laws are constructed around the age of consent, which sets the boundary between normal sexual relationships and sexual abuse of a child (Levin 2013).

The timing of lives is an integral theme of the life-course perspective since age is closely tied to societal norms. For example, the concepts of "*the terrible two's*" or "*life begins at 40*", are often referred to in western culture (Hutchison 2005) but may or may not be concepts that are meaningful in other cultures. Researchers have called this 'age structuring' in a bid to explain how societies standardise social roles by age, which are governed by cultural laws and policies (Barrett and Montepare 2015). In

western culture, there is an age stratification system, meaning there is a hierarchy in which the young and old are perceived as more vulnerable, less competent and are largely excluded from the social world (Kertzer and Schaie 2013). Age is an important component to life since it is at pivotal ages that key life events occur, such as beginning primary school (Clarke, Marshall et al. 2011). Furthermore, age-structuring means that individuals have to adapt when society allocates and reallocates roles, in accordance with age (Kertzer, 2013).

The timing of lives is a theme that can be used to explore when disclosure occurs after CSA and whether an age-structuring system is related to a survivors choice of when to disclose or even to disclose at all. Some research surrounding the timing of disclosure has been previously conducted (Weingarten and Cobb 1995, Jonzon and Lindblad 2004, Easton 2013). For example, researchers showed that 32% of female survivors disclosed in childhood, with the rest disclosing in adulthood (Jonzon and Lindblad 2004). Also affecting the timing of disclosures, is the relationship between the survivor and perpetrator, with disclosure often delayed due to intrafamilial abuse (McElvaney 2002, McElvaney, Greene et al. 2014). The timing of disclosures is a complex matter since there are many factors contributing to a delayed disclosure; for instance, fear of racism and gender stereotyping; being male; fear of not being believed; fear caused by threats from the perpetrator; fear of being blamed by others; mistrust of professionals; and experiencing severe abuse (Schaeffer, Leventhal et al. 2011, McElvaney, Greene et al. 2014, Thomas 2016, Alaggia, Collin-Vézina et al. 2019). Age also affects the timing of disclosures since children who were of an older age at the time of the abuse have been found to be less likely to disclose (McElvaney, Greene & Hogan, 2013). Age is particularly important with disclosure as research shows that rates of disclosure increase with aging into adulthood (Easton 2013,

Leclerc and Wortley 2015, Alaggia, Collin-Vézina et al. 2019). A recent study cites the average age of CSA disclosure at 52-years-of-age (Griffin, Hamilton et al. 2018), whereas other research suggests at least a 21-year delay in disclosure (Hetherington, Mangan et al. 2019, Romano, Moorman et al. 2019). Findings have also shown that the older the individual at the time of disclosure, the more likely they are to be subjected to increased blame and scrutiny (London, Bruck et al. 2005, Connolly, Coburn et al. 2017).

Furthermore, the timing of CSA disclosures which occur at different points throughout the life-course, has largely been neglected in research, with a predominant focus in the literature on childhood disclosures. An analysis of CSA disclosure that focuses on the timing of lives may reveal how social norms and expectations surrounding CSA disclosures may affect survivors ability to disclose. Thus, exploring the timing of disclosure may show the extent to which society and prevalent social norms contribute to disclosures occurring in childhood, young adulthood, or late adulthood.

The current research explores how participant's experiences of CSA disclosures may be similar or different when made at different stages of the life course, namely, childhood (0-18 years), young adulthood (19-35 years), and late adulthood (36+ years). The purpose of addressing the timing of disclosures across the life-course is to assess whether there is a relationship between *when* participants disclose and how they transition throughout the life-course.

### *Linked lives.*

The concept of linked lives accounts for how people's lives are fundamentally bound to relationships with others, such as acquaintances, friends, neighbours, work colleagues and family members (Marshall and Mueller 2003, Black, Holditch-Davis et

al. 2009, Umberson, Pudrovska et al. 2010). The links an individual does or does not form with those around them can have profound influences on their mental health and wellbeing. From this perspective, it is important to consider how survivors of CSA are linked to their perpetrators, as survivors are most often victimised by someone they know, such as a family member (Ferragut, Ortiz-Tallo et al. 2021). A survivor's early experiences of CSA can have profound impacts on their ability to form lasting links to other people in a variety of ways, and so the concept of linked lives is useful in examining and describing disruptions to the life course that are related to either negative links to other people, or a lack of positive links to others. Fundamentally, all people are linked to others through relationships, and people seek to link to and connect to others as social beings (Elder Jr 1998). Thus the concept of linked lives helps us to understand how other people in a survivor's life may influence a survivor's own life trajectory or the links they are able and willing to make as they form their own families as adults (Umberson, Pudrovska et al. 2010). The concept of linked lives also puts emphasis on the family unit, and highlights connections between generations (Gilligan, Karraker et al. 2018). Within different generations, attitudes toward social issues may differ depending on the socio-political and cultural influences on the individual at the time (Bengtson and Allen 1993, Hareven 1994). However, attitudes within the family may be similar because of close relationship influences (Miller and Glass 1989, Min, Silverstein et al. 2012).

The theme of linked lives provides insight into CSA disclosures, since a disclosure requires telling another individual and without a disclosure, no one would be aware of the survivor's experiences other than the perpetrator (Lippert, Cross et al. 2009). The concept of linked lives is particularly important to researching family dynamics in CSA disclosures due to the close relationship ties which can influence

how CSA is perceived by the survivor and responded to by their family members. A survivor's ability to link their lives to others may be disturbed or disrupted by their experiences of CSA. Further, the degree to which this is the case may differ across individuals and also is likely to be dependent on both who they disclose to and when they disclose, such as in childhood, young adulthood, or late adulthood. An inability to link to others may result in a survivor remaining silent about CSA which may in turn affect outcomes across the life-course.

A survivor's ability to link to others and who in their lives they choose to disclose to, as well as what life stage they disclose at, can provide insight into how and why either positive or negative responses are received from others when they do choose to disclose their CSA experiences. Positive responses to disclosures include active listening and a non-judgemental attitude (Miller and Najavits 2012). However, research shows that negative reactions are more prominent when survivors are abused by a relative (Collin-Vézina, Daigneault et al. 2013), but less intense when the abuse occurred many years ago (Browne and Finkelhor 1986). Similarly, some research indicates that whilst adults express fear of social reactions (Tener & Murphy, 2015), they are generally responded to more positively than when a child discloses, largely because adults have more control over how their experiences are told (Draucker and Martsolf 2010) and to whom they chose to disclose. Assessing disclosure in context with linked lives can illustrate the process of transitioning from silence and secrecy to speaking to another individual about CSA and how this transition influences outcomes in later life. The theme of linked lives also may be relevant to survivor's feelings about their relationships and their perceptions about how they have been positively or negatively affected by CSA throughout the disclosure process.

### *Diversity in life course trajectories*

Life-course trajectories are the expected patterns of transitions that occur across the life-course, meaning that transitions are embedded within trajectories (Taylor 2010). Thus, researchers concur that there are typical ways to develop throughout the life-course, whereby the individual experiences a series of life events that occur in a linear way. For example, a child goes to school, they then develop into adolescents and are then expected to attend college, then university, graduate, become employed, get married and then have their own children (Hostetler, Sweet et al. 2007). From this perspective, life transitions are often age-graded, meaning that there are culturally shared expectations of *when* these transitions should take place (Macmillan and Eliason 2003). For example, people are expected to transition from college to university at around the age of eighteen years and to graduate from university in the early twenties (Thomas, Orme et al. 2020). If an individual was to transition to university in later years, they would be considered to have violated societal norms about how the trajectories of life are *supposed* to proceed (Kerckhoff 2019).

Trajectories in life-courses are important for CSA because they illustrate changes experienced in a survivor's life when disclosing for the first time. A trajectory is defined by Wheaton and Gotlib (1997) as '*the continuation of a direction . . . toward a destination*' (p. 1). Trajectories are often influenced by turning points, since life events implement change, often shifting the individual's life-course in a different direction (Allnock 2017). Turning points are a concept within the life-course perspective and are defined as life events that result in profound changes in an individual's life-course (Legewie and Tucci 2021). CSA can be considered a negative turning point, even though it was not the survivor's choice, a violation of social norms



occurs with CSA due to the notion that survivors have experiences with sex much earlier than is socially normative (Mathews and Collin-Vézina 2019).

Researchers assess individual and family life trajectories to understand how history, politics, economic circumstances and society influence the life-course (Hutchison 2018). There can be multiple trajectories in an individual's life which are made up of *transitions* (Elder Jr 1998). Disclosures of CSA can be considered a transition that impacts a survivor's life trajectory since speaking out can change the direction of their life. Similarly, a survivor's choice to not disclose earlier in their life course may influence life trajectories, which needs to be explored, since transitioning from non-disclosure to disclosure may have different underlying motivations.

Some survivors may not disclose until later life due to not acknowledging they were sexually abused in childhood because they engaged in disassociation, a condition which alters reality (Kenny 2018). Symptoms of disassociation are characterised by the distortion of memory and emotional detachment from the self, such as numbness, which leaves survivors feeling as if their life-events are disordered (National Health Service, 2019). Disassociation enables survivors to be mentally absent at the time of experiencing trauma and abuse, essentially enabling survival, and preventing psychological harm, hence, survivors may not consciously remember the CSA as it was a traumatic experience (Wolf and Nochajski 2013, Herman 2015). Often, for dissociative amnesia to occur, the trauma is accompanied with guilt and in adulthood memories unconsciously resurface (Spiegel 1997, Staniloiu and Markowitsch 2014). Thus, disassociation appears in many CSA survivors which helps to explain why disclosure rates are higher in adults than children. However, resurfacing memories of CSA after experiencing dissociation can be traumatising with many survivors reporting feelings of reexperiencing CSA (Wolf and Nochajski 2013). The

same can be said for other dissociative disorders, such as post-traumatic stress disorder (Dorahy and van der Hart 2015).

Much research indicates that CSA survivors life trajectories are disrupted as a result of negative, traumatising childhood experiences (Macmillan 2001, Hajat, Nurius et al. 2020). Subsequent trajectories can be disrupted because survivors often do not have the same social and psychological resources as non-survivors to cope with daily stresses and other negative life events (Moen, Erickson et al. 1997). A comparison of the diversity of trajectories after disclosure across the life-course is important because this remains largely unexplored in research. Moreover, the life trajectories of CSA survivors who disclosed in childhood, young or late adulthood may help to show positive factors that may emerge from turning points after disclosure. Researching life trajectories subsequent to CSA disclosures also may help to potentially improve trauma-informed care and practice.

### *Developmental risk & protection*

Developmental risk and protection address the long-term effects of experiencing negative life events in childhood (Hutchison, 2018). This theme of the life-course perspective evaluates how there are risk factors in different stages of development that may negatively affect the individual in later life. Likewise, the identification of protective factors can enable a reduction of negative effects in adulthood (Jenson and Fraser 2016). The life-course perspective helps to identify multiple influences of CSA on survivors that help to explain what are often more negative life outcomes than those who do not experience CSA. Existing research shows how early sexual experiences in childhood increase the likelihood of promiscuity, risk-taking in sex and developing mental health issues (Senn, Carey et al. 2008, Walsh, Latzman et al. 2014, Hébert,

Cénat et al. 2016, O'Driscoll and Flanagan 2016). Moreover, women who have experiences of domestic violence in adulthood often have been subjected to CSA (Cavanaugh, Messing et al. 2012).

Developmental risk of CSA survivors is illustrated by neuroscientific research. For instance, a sexually abused child is more likely to develop atypically, due to the detrimental impact trauma and abuse has on the brain and body (Van der Kolk 2014). Furthermore, the limbic system facilitates survival as this is the neurobiological structure that responds to danger, causing the individual to run (flight), freeze or fight, whilst the prefrontal cortex shuts down inhibiting logical thought (Van der Kolk 2014). This system would have been activated at the time of experiencing child abuse and trauma, therefore, for adult survivors, the limbic brain is on high alert, even when there is no trauma being experienced (Ashy, Yu et al. 2020).

Researchers argue that identifying risk factors of children at risk from harm can prevent incidents of actual harm and prolonged child abuse. However, there are protective factors for CSA survivors which act to reduce developmental risk and can be beneficial for survivors life chances and outcomes (Hutchison 2005, Racine, Killam et al. 2020). Protective factors may act as facilitators for a disclosure, for example, education wherein the child learns about the social norms surrounding sex (Walsh, Latzman et al. 2014). On the other hand, protective factors may have an adverse effect on disclosure, for example, psychological resilience may prevent disclosure as survivors may feel that speaking out was not necessary at that point of time. Processes of justice after disclosing CSA may be relevant to protective factors that reduce harm in adulthood, since criminal, restorative and social justice are a means of action for survivors to take post-disclosure.

## *Human Agency*

Human agency is considered a positive, major theme of the life-course perspective (Hareven 2018). Agency is defined as autonomy, meaning humans have freedom to make choices and personal power to construct their own life-course (Elder Jr 1998, Benson 2013). Examples of human agency can be seen in personal goals, wherein individuals set themselves an aim to complete tasks that contribute to achieving life dreams (Crockett 2002). Human agency can take form in two ways, subjectively and objectively, as individuals exercise autonomy but are enabled or constrained by structural forces and institutions (Hitlin and Kwon 2016). Agency can be limited; for example, through limited access to certain social roles due to systemic age stratification in cultures (Mortimer and Moen 2016). Life-course human agency accounts for how people exercise subjective beliefs and how choices affect outcome in later life (Hitlin and Kwon 2016). Researchers illustrate how perceptions of human agency are dependent on the age of the individual. Whilst children are deemed to have the capacity to make agentic decisions and life choices, the level of agency is significantly more limited in comparison to adults (Blazek 2015). Thus, for individuals transitioning to adulthood, levels of subjective agency are deemed to increase due to the structural, age-graded expectations that adults are agentic in their decisions and behaviours (Macmillan 2001).

Transitioning from childhood to young adulthood also influences how agency is exercised in association with cultural norms and expectations (Dannefer and Huang 2017). For example, individuals transitioning to young adulthood are socially expected to make responsible decisions surrounding the roles they occupy in an ordered society, such as entering further education and employment (Hitlin and Long 2009, Hitlin and Kwon 2016). Moreover, agency and context are interrelated since autonomy

can be constrained in certain situations (Dannefer and Huang 2017). For example, structural context can affect a survivor's agency due to socio-historical and political change (Shanahan and Elder Jr 2002).

Human agency is applicable to survivors since a loss of agency occurs from a compromised sense of safety and well-being (Ciurria 2018). CSA research has assessed the role of agency in survivor's disclosures. For adult survivors of CSA, disclosure is a deliberate decision (Easton 2013, Allnock 2017). Agency in CSA disclosure can be affected by anticipated social responses to disclosures (Collin-Vézina, Daigneault et al. 2013, Tener and Murphy 2015). Therefore, agency is a theme relevant to understanding personal facilitators and barriers to disclosure and the structural forces affecting survivors agency. For instance, cultural issues and religious beliefs surrounding sex have been shown to affect survivor's agency in disclosing (Brazelton 2015). How human agency can constrain or facilitate CSA disclosures has been under-researched which is important to understand since there may be differences in how agency is experienced depending on what stage of the life-course that disclosure takes place (McElvaney, Greene et al. 2014), highlighting the necessity for a life-course framework. Human agency is also relevant to processes of justice as not all survivors are able to gain criminal justice, which is likely to negate any feelings of control and autonomy the survivors may have. Additionally human agency can help to explore the perceived level of autonomy when transitioning through the life-course, from a child to an adult survivor, and the level of control (or lack of control) they may feel pre, during and post disclosure.

The life-course perspective is a fitting theoretical framework to investigate disclosures of child sexual abuse across the life-course because it explicitly examines how early childhood experiences can affect people in later life through different

mechanisms (Gee and Cohodes 2021), which helps to provide an understanding of how a survivor's experiences of CSA and disclosure of that abuse may impact long-term outcomes and emphasises that interventions specific to age of both abuse and disclosure are needed. The themes of this perspective will facilitate a thorough understanding of disclosures as occurring either in childhood, young adulthood, or late adulthood. The timing of disclosure is an important theme in exploring the decision process surrounding disclosure. Developmental risk and protective factors resulting from disclosure will facilitate an understanding of the positive and/or negative implications, how the abuse has impacted survivors, and how the abuse has been responded to, i.e., psychological resilience, denial, or silence. Human agency will demonstrate whether survivors felt autonomous in timing their disclosure and the underlying motives for speaking out after a passing of time. Moreover, survivors disclosures either in childhood, young or late adulthood can be assessed in context with historical and social change. Therefore, the life-course perspective highlights the diversity of agency from different generations of survivors and can help to reveal the structural processes that influence disclosure.

### Framing CSA survivors

Framing theory was proposed by Goffman (1974) to demonstrate how information from the social world is interpreted, processed, and organised. This theory illustrates the reliance on stereotypes in the understanding and responding to events within society (D'Angelo 2017). Goffman (1974) referred to frames as *schemata of interpretation* (Emmott and Alexander 2014) to show how information is processed by the individual and then ordered into meaningful information, which shape interpersonal attitudes and behaviours (pp.756). The framing of information primes people to

respond in a particular way, which informs the communication and wider comprehension of a social issue for individuals, groups of people, institutions, and society (Druckman 2001, Kitzinger 2007, Entman, Matthes et al. 2009). Furthermore, framing occurs at four levels: in culture; by those in elite political power; in communicative texts; and by everyday people. Frames that illuminate social issues are created, portrayed and limited to the different topics and events within the culture (Entman, Matthes et al. 2009). From this viewpoint, the same social issue may be framed differently in different cultures. Therefore, the understanding of a social issue depends on the frames created in cultures and audiences receiving the framed information (Entman, Matthes et al. 2009). Framing theory is frequently utilised by researchers, analysing the media and news, since how societal issues are framed contributes to public policies. The media is largely influential in the framing of societal issues, which informs and shapes public opinions (Weatherred 2017).

How CSA has been framed within the UK has contributed to the societal acceptance of CSA as an issue for public concern (Beckett, 1996). The media is an important platform for the framing of CSA where daily broadcasts from news influences individual and societal perceptions about CSA, and often, the survivor and/or perpetrator (Weatherred 2017). For some, hearing of CSA in the media may be the only means of gaining information (Mejia, Cheyne et al. 2012). Researchers illustrate how the framing of CSA is not always accurately represented within the media, as there is often a predominant focus on sensationalised, extreme cases (Mejia, Cheyne et al. 2012). An example of how the societal framing of CSA can have a negative impact on survivors, is the framing of 'child prostitution'. Framing children as prostitutes even occurred in the 2000's, which only changed in more recent years, such as from 2014 onwards (Elliott 2021). This framing influenced people, including

professionals, to perceive children as instigators of sexual activity rather than sexual exploitation and abuse survivors (Leary 2016).

For adult survivors telling their stories in the public domain, there is an attempt to ensure that the past is not forgotten (Ring 2018). Bringing survivors lived experiences of CSA to the forefront of current discourse and news means that society can learn from the past and make current inequalities transparent (Browne 2014). It should be in the public's best interest to be concerned about past CSA, but often, it is framed as distinct and unrecognisable for contemporary concern, because CSA is always an issue of the past (Browne 2014). Lovett, Coy et al. (2018) argue that this framing of CSA places emphasis on autonomy and consent of the survivor, whilst downplaying the seriousness of the crime and denying recognition of the harm caused.

The socio-political framing of NRSA may create beliefs that past CSA is less of an issue for current society. For example, Boris Johnson stated in 2019 that HSA is a waste of public funds and that spending money on adult survivors cases will not protect the public (Gore 2019). MP Boris Johnson's statement frames past CSA as not an issue worth public concern or funds, which may perpetuate a systemic lack of urgency in responding to survivors and perpetrators. However, living adult survivors often require ongoing support in order to recover from CSA (Quadara and Hunter 2016), which is why there must be a socio-political understanding and economical investment to ensure their protection and well-being. Further, research shows a lack of resources and funds for adult CSA survivors navigating the criminal justice system (Maslen and Paine 2019). For instance, it takes much longer for adult survivors than for children for a trial to reach the UK criminal courts. On average, CSA survivors are left waiting up to 406 days for a trial (Maslen and Paine 2019). It could be the case that there is a lack of urgency and public funds when adult's CSA experiences are framed as



nonrecent. Hence, framing perpetrators as nonrecent may influence perceptions that there is less risk to current children or less risk of harm to the adult survivor.

### *Historical Sexual Abuse (HSA) and Non-Recent Sexual Abuse (NRSA)*

Adult CSA survivors are often framed and referred to as Historical Sexual Abuse (HSA) survivors (NSPCC, 2019; BPS, 2016). The term HSA does not have a widely agreed upon definition (IICSA 2022, Quinn-Walker 2022, NSPCC 2024). The Survivors' Consultative Panel (VSCP 2022) of the IICSA (2022) stated that HSA implies their childhood experiences happened a long time ago, which is supported by looking at the synonyms attached to the word history, such as, bygone; past; ancient; ages ago; old (Merriam-WebsterDictionary 2024). For this reason, an HSA framing may be deemed inaccurate because there are often not connotations to 'childhood' when describing a survivor as 'historic'. The concept of innocence has been shown to affect social attitudes, survivor responses, public policies and criminal justice (Smith and Woodiwiss 2016). By not incorporating 'child' into the framing of HSA, the concepts of innocence and references to the age of the survivor may not be evident, and perceivers may not understand that the survivor was a child when they experienced sexual abuse.

### *The Current Study*

An investigation of CSA disclosures at different stages of the life-course is essential because this has seldom been explored in research. Exploring disclosures in childhood, young adulthood and late adulthood means that I will be able to show when, how and why CSA survivors disclose. A life-course theoretical framework enables me to show barriers and facilitators of disclosures made at different times of the life-course. Themes such as the timing of lives and human agency will be helpful

to address the barriers and facilitators in disclosures across the life-course, and whether there are differences between those who disclose in childhood, young adulthood, and late adulthood. The timing of disclosures may be affected by the framing of adult CSA survivors which must be addressed in research.

The long-term impact of CSA illustrates how living adult survivors may not be accurately represented in wider society, such as by institutions and in the media. A nonrecent framing may be influential to barriers and facilitators to CSA disclosures, such as the perceived risk of the perpetrator, the socio-political investment in trauma-informed responses, and/or funds for prosecutions of CSA when disclosures are delayed. This theoretical framework of the life-course perspective and framing theory can together explore motives and hindrances to disclosures across the life-course. The life-course perspective can exclusively assess the CSA survivor's relationship with the social world as influential to disclosures. Framing theory is useful for understanding whether survivor's feel autonomous in how they are responded to by society and if this affects their ability to disclose.

Finally, how CSA is framed in public discourse is important. The currently used terms of NRSA and HSA are potentially problematic. Neither concept includes the concepts of innocence or childhood. Even more important is the emphasis of these terms and others focus on placing the abuse in the past. For survivors living with the abuse they experienced, there is an ongoing day to day impact so terms which include a focus on when the abuse occurred, fail to represent the current struggles they face as survivors of CSA. A NRSA label may be deemed inaccurate if it renders potential problems for adult CSA survivors, such as unacknowledged symptoms of trauma by situating experiences as 'nonrecent'. Thus, a non-recent framing may discourage disclosures in adulthood. Moreover, NRSA as a label representative of adult survivors

must be investigated to ensure labels are accurate, fair, and representative of the harm imposed on survivors.

### 3. Methodology

I conducted 31 qualitative interviews with participants that disclosed CSA experiences at different stages of the life-course. A qualitative design with open-ended questions elicited in-depth responses from participants (Hennink, Hutter et al. 2020, Turner III and Hagstrom-Schmidt 2022), which enabled me to assess the variability of subjective experiences of CSA disclosure. I chose qualitative interviews for data collection which is invaluable for gaining insight into subjective, lived experiences that cannot be captured in the same manner using quantitative methods (Hesse-Biber and Leavy 2010). The qualitative framework adopted in this research was thematic analysis as a number of different themes emerged in the data (Ayre and McCaffery 2022) which enabled me to capture similarities and differences between participants lived CSA experiences.

Interviews with CSA survivors enabled me to address how disclosures in childhood impacted them in later life as compared to those who disclosed in early or in late adulthood. An exploration of CSA survivors experiences of disclosure is important for research since they provide invaluable insight. ‘Experiential knowledge’ is a term that explains how people who are the knowledge producers based upon their experiences are ‘experts’ (Taggart 2021). Therefore, assessing CSA survivors’ disclosures is a form of experiential knowledge which can be beneficial for research since an adult survivor perspective may help to improve or further current understandings of disclosures across the life course.

For data analysis, I undertook a thematic analysis that addressed the themes of the life-course perspective, such as: linked lives and human agency; the timing of lives; the interplay of historical time and human lives; and diversity in life-course

trajectories (Elder 1993, Hutchison 2018). Last, for researcher reflexivity, I utilised Donna Haraway's (2003) *situated knowledge* as it enabled me to take a critical stance and demonstrate my interpretation of the data (Haraway 1988).

## Participants

My participants were adults (18+) who have experienced CSA and disclosed to another individual. I conducted 31 interviews with survivors from three age groups, to assess the impact of disclosure at different times in the life-course as this has sparsely been addressed in research (Hagestad 2018). I recruited participants who had experiences of disclosing in childhood, young adulthood or late adulthood which provided a rich, variety of survivor accounts.

Participants in this research were aged between 19-72 years. The average age of participants was 45 years and the average age at first disclosure was 22 years. The sample of participants included 9 men and 22 women. All participants were residing in the UK at the time of the interview. Thirty participants were of British ethnicity and one participant was of Indian origin and had resided in the UK for six years. The majority of participants were in employment at the time of the interview with several different professions, such as teachers, researchers, therapists, and electricians.

Participants first disclosed their abuse at different stages of the life course and were categorised as disclosing in childhood, in adulthood and in late adulthood. The average age of disclosure in childhood was 10 years old, while the average age of disclosure in adulthood was 20 years old, and the average age of disclosure in late adulthood was 44 years old. The time between the participants' initial CSA disclosure and the interview varied, with some participants having disclosed as little as 5 years ago and some as many as 68 years ago. Therefore, the participant's experiences of

first disclosing CSA may differ due to generational changes in the predominant cultural views of CSA.

Twelve participants disclosed in childhood, twelve participants disclosed in young adulthood, and seven participants disclosed in late adulthood. It was difficult to recruit participants that disclosed in late adulthood in comparison to other cohorts. Participants childhood disclosures ranged from 6-17 years, often years after the CSA, with an average delay of four years from the onset of abuse. Ten years of age was the average age of disclosure for participants disclosing in childhood. For participants disclosing in young adulthood, the average age of disclosure was 20 years, with disclosure delayed on average by twelve years from the onset of the abuse. Last, disclosure was delayed on average by 33 years by participants that disclosed in late adulthood, with 44 years being the average age of disclosure. Whilst participants were asked to recall potentially traumatic experiences, the participation process can be a liberating and empowering experience (Ryan-Flood and Gill 2013). Thus, partaking in interviews may have provided participants a platform to be listened to and responded to without judgment (Amar, McClain et al. 2012).

## Recruitment

To recruit participants, I shared my advertisement online (see appendix for example), such as Facebook and Twitter (now referred to as X) so that anyone who wished to partake in my research could contact me by phone or email to request inclusion in the study. Recruiting participants in this way allowed me to ensure participants had anonymity. The recruitment process began once I had received communication directly from an individual that they were interested in participating in my research and I then emailed them a Participant Information Sheet (PIS), so that they had all the

information required to be fully informed about the study in order to consent [see appendix for PIS example]. It is important to note that whilst my main method of recruitment was online, some participants were recruited through the technique of snowballing (Leighton, Kardong-Edgren et al. 2021), meaning that I relied on word-of-mouth, wherein participants that had taken part told other people that they knew, who then contacted me.

## Ethics

This project was approved by the Ethics Committee at the University of Essex. Informed consent was gained from every participant in the form of a written signature after they had read the PIS. Once the interview had commenced, I ensured each participant were reminded that they had the right to withdraw from the study at any given point. Participants were also informed that they could contact my supervisors, the Sociology Departments Research Director and/or the University's Research Governance and Planning Manager should they need to make a complaint or query about my research project.

I explained to each participant that the interview would be about their experiences of disclosing CSA and that it was up to them how much detail they wanted to share of their experiences. I also shared with participants that I wanted to gain an understanding on survivors views on the labels used to frame adult CSA survivors, such as historical and non-recent sexual abuse. Participants were also informed that all personal data would be anonymised. For example, the names of participants were anonymised and any other identifiable information, such as the names of family members or specific locations mentioned in the interviews were changed to other locations so that participants could not be identified. I anonymised names in the data

by replacing them with a pseudonym name (Ryan-Flood and Gill 2013). Further, I ensured that safeguarding measures were in place because my target population could be considered vulnerable. Safeguarding procedures included providing on the PIS, details for the Samaritans, which is a service that can be used by participants for support; CARA (Centre for Action on Rape and Abuse) which is a service provided to survivors of sexual abuse and violence to which participants can self-refer; and helplines, including signposting to mental health services CALM and SANEline, as well as the National Association for People Abused in Childhood (NAPAC), which is a charity-led organization offering support for adult survivors [see PIS in the appendices for example].

To minimize potential risk of harm and to put participants at ease before the interview, I had a brief conversation with the participant, which helped to ensure they were comfortable to talk with me about their personal experiences of CSA disclosure. Participants were told that the results from this study would be published in articles and made available upon completion of my PhD. A couple of participants requested to have their transcript sent to them so that they had a copy, which I did shortly after their interviews. If at any time during the interview the participant became upset, I took a moment to ask if they were okay and if they wanted to stop the interview. All participants felt that they could continue with the interview and so I gave them time to recompose themselves. Last, to ensure the emotional well-being of all my participants, I offered a follow-up phone call or email to check on their well-being and address any feelings that may have arisen as a result of participating, although this was declined by all participants. I also referred back to the PIS so that participants were reminded of the list of contact details, so they had support if they felt they needed it after the interview.



## Data Collection

Data was collected via interviews taking place on Zoom, an online platform used to enable individuals to communicate via videography. Zoom was the chosen method of communication for interviews because of the COVID-19 pandemic. This method of conducting such sensitive interviews was not ideal because I was unable to offer tissues if the participant was upset, or face-to-face support because in-person contact was prohibited at the time.

Research employing a life-course perspective has been conducted from gathering data from individual biographies and in-depth interviews (Heinz and Krüger 2001). Data for this study was collected between July 2020 and March 2022 and each interview lasted between 50 minutes and 4 hours, with an average of 1 hours and 19 minutes. Data saturation was reached after 25 interviews, meaning that no new information was uncovered thereafter (Saunders, Sim et al. 2018). In order to make this determination, I looked at how participants spoke about CSA in relation to the time period they were raised and how they perceived the framing of adult survivors, and the same themes were emerging across participants disclosing at different stages of the life-course and the collection of an additional six interviews did not substantially change the primary themes identified and conclusions drawn from the data.

## Method of Analysis: Thematic Analysis

A thematic analysis is a common tool used in qualitative research to examine patterns within data sets that are expressed by multiple participants (Braun, Clarke et al. 2017). Thus qualitative methods such as interviewing and thematic analysis are not as

restrictive as utilizing quantitative methods as participants are able to avoid fixed responses (Guest, MacQueen et al. 2011). Utilising a thematic analysis meant that I looked for similarities and differences in participants responses across the full dataset (Braun, Clarke et al. 2017). In this research, themes are defined as particular patterns in texts that allow for construction of a shared meaning of specific social phenomenon (Vaismoradi, Turunen et al. 2013). A theme arises by identifying repeating ideas across interviews which suggest that there are certain shared experiences that most people experience, in this case, in regard to CSA disclosures. In other words, conducting a thematic analysis means looking for commonalities across qualitative interviews to understand similarities and differences in what participants have said. Utilising a thematic analysis enabled me to show themes of the life-course in my data, such as linked lives (or how people do or do not connect to others through social relationships), historical time periods and timing of lives, or when and how people experiences specific events in their lives, (see chapter one for a more in-depth definition of these life-course themes).

Moreover, thematic analysis examines narratives by structuring the text into smaller units (Sparkes 2005), which enable me to identify and code the data according to the content of the interviews. I first colour-coded the data in accordance what participants said and in line with my theoretical life course framework. I then looked across interviews for similar content, and where similar points were made by multiple participants, this became a theme. Searching for themes within the data is useful as it enables me to draw comparisons between participants experiences, identify where those experiences are similar or dissimilar, and to see how these themes relate to my research question. The utilisation of a thematic analysis also meant that I could gather naturally emerging themes across the data set, look for differences, or subthemes,

within my broader identified themes, and to see over-arching patterns in the data (Braun, Clarke et al. 2017). This form of analysis allowed me to make a comparison between individual's accounts of disclosing CSA either in childhood, young adulthood, or late adulthood. This choice of method of analysis helped to ground the data within the theoretical framework of the life-course perspective.

### *Procedure*

The initial four interviews took place in person, but due to the COVID-19 pandemic, I was prohibited from conducting face-to-face interviews, and so I relied on Zoom, an online video platform for the rest of the interviews (Gray, Wong-Wylie et al. 2020, Oliffe, Kelly et al. 2021). On Zoom, I was able to record interviews which I later relied on for transcription. Subsequent to the recruitment stage, I forwarded all potential participants the consent form [see appendices for example] so they were fully informed about the nature of the study. I then scheduled a time and date for the interview. Prior to the interview commencing, participants were asked to verbally clarify they provided consent to be asked about disclosures of child sexual abuse.

Interviews were recorded on an audio device , whereby participants were asked a series of open-ended questions to gain in-depth responses (Turner III and Hagstrom-Schmidt 2022). I then transcribed each interview verbatim. Any audio recordings were deleted after I had transcribed each interview recording. Transcripts are stored on my password protected laptop, which is kept at my home address in order to guarantee data protection, anonymity and confidentiality (Wiggins 2014). Next, I began the thematic analysis. My analysis of the data followed Braun and Clarke's (2006) six stages. First, I became familiar with the data by reading and re-reading the transcripts (Michalos 2014). Second, I generated initial codes by looking for similarities across

the interviews and how many participants made comparable or similar statements . Third, I searched for themes related specifically to the life-course perspective. Fourth, I reviewed all identified themes, and fifth, I defined each theme. Once I exhausted searching for and reviewing themes, I named and outlined themes with clear definitions (Braun and Clarke 2006). Utilising, a thematic analysis also enabled me to analyse the data for themes related to the framing of survivors, and how this relates to wider socio-cultural attitudes.

### *Researcher Reflexivity*

Reflexivity is vital for researchers (Wilkinson 1988) so my interpretation of the data from my own social position is clearly illustrated. In order to be reflexive, I adopted the concept of 'situated knowledge', proposed by Donna Haraway (Haraway 1988). This concept has been deemed as important to incorporate in all research as it shows how both individual and social reality is relative to the knowledge produced in society (Knigge and Cope 2006). Haraway conceptualised a feminist theory of situated knowledge to demonstrate how all forms of knowledge in which they derive, are situated within geographical location, history and are inseparable from culture (Stoetzler and Yuval-Davis 2016). This is exemplified by history showing how men have been at the forefront of constructing crimes, laws and policies which has traditionally disadvantaged women in regard to sexual abuse, violence and rape perpetrated by men (Whittier, 2009). Situated knowledge is central to understanding how disclosures are widely understood in the past and currently, as much of what we know about CSA is built upon previous knowledge. Additionally, Haraway places emphasis on taking a 'gods-eye view' to research, meaning the researcher must not refer to their own experiences when interpreting the data, but to take an objective stance (Knigge & Cope, 2006, pp.2022). To guide the analytic process, I used a journal

throughout the research process, which helped me to be reflexive in my analysis to limit interpersonal biases and to identify how I may have influenced the findings.

I am an ingroup researcher as I have experiences with disclosing CSA which has been influential to my research investigations. For instance, I set out to investigate definitions of HSA and NRSA because I was referred to as an HSA survivor by professionals which I felt I did not resonate with because my experiences were not that long ago, and I was affected by my CSA experiences in adulthood. Therefore, prior to conducting this research, I felt that an HSA framing did not acknowledge the fact that I was currently effected by my experiences. Then, in the early stages of conducting research for this project, I came to realise that I had been victimized a second time throughout my childhood by a social worker; a relationship that I had previously perceived to be consensual. I established with much research that I was unable to consent as a fourteen-year-old, which took some time for me to come to terms with. I then reported the social worker to the police.

I have diverse experiences of disclosing CSA. For instance, my first disclosure of experiencing CSA to the authorities resulted in a criminal justice conviction against my perpetrator. Whereas disclosing for a second time was very different. I endured a three year wait to see whether my perpetrator would be charged, and eventually, I was informed that there was a lack of evidence to support my claims and that he would not be facing criminal charges. Thus, I have diverse experiences of reporting CSA to the police and can relate to my participants experiences of both gaining and being refused criminal justice. My personal experiences of disclosing CSA informed my research enquiry as I am researching a phenomenon of which I am a part. Throughout the research process, I often chose to briefly share some of my own experiences to encourage my participants to be open with me. Even though I shared some of my

experiences with participants, I did my best to remain objective throughout the process of interpreting and analysis of the data. I believe that being open about my own experiences was beneficial as participants felt that they were talking to someone who had empathy and understanding about what they had been through.

## Findings

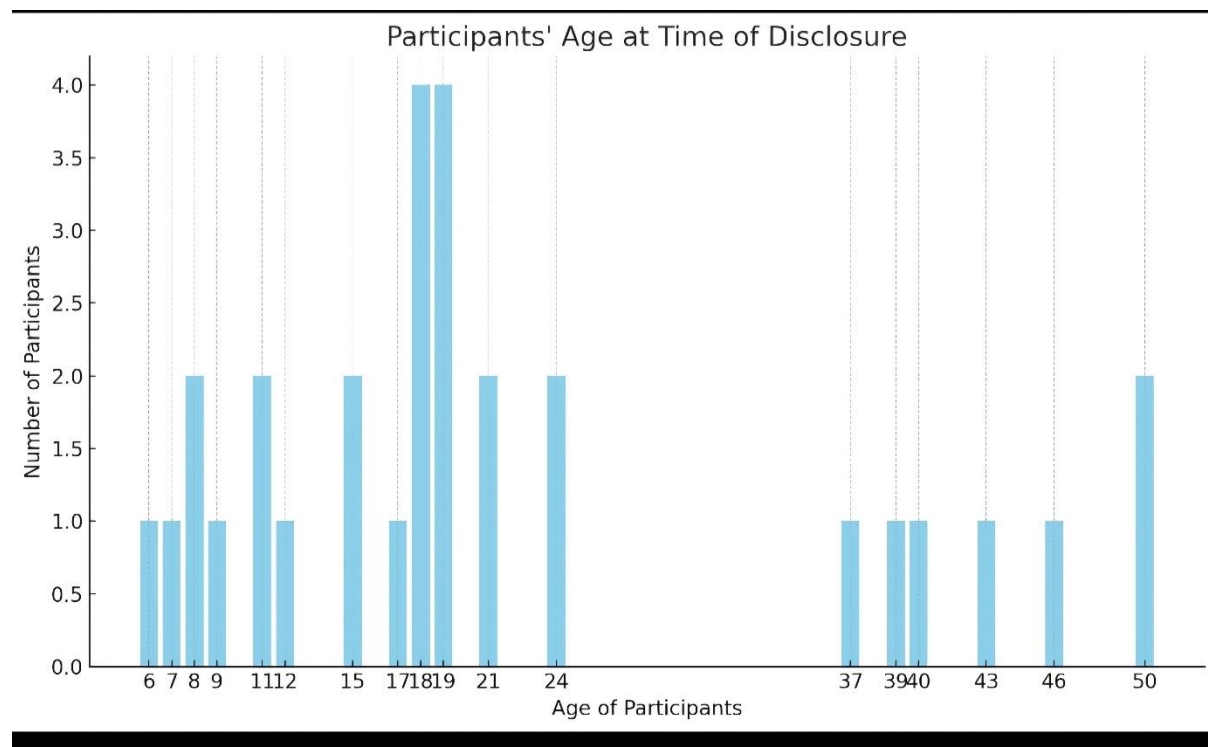
### 4. Linked Lives in Child Sexual Abuse and The Disclosure Process

This chapter draws upon the concept of linked lives, a key theme of the life course. The theme of linked lives refers to how, when, and for what purpose people form or are unable to form connections with other people. This concept assists us in understanding individual choices survivors of CSA make about the disclosure process. Using the idea of linked lives, we can examine how CSA impacts relationships in the distinct periods of pre-disclosure, disclosure and post-disclosure by showing that these processes are all defined in juxtaposition to other individuals and the survivors relationship to those individuals. For example, pre-disclosure survivors seek to tell an individual, while during disclosure, they are telling another individual, and post-disclosure, the survivor relies on other people for support or to secondarily disclose. It is through exploring this process that it is possible to illustrate the facilitation or restraint of agency within the context of how individuals' lives are linked to others.

This chapter is primarily concerned with looking at participants relationships with other people pre, midst, and post-disclosure. I assess participants connections prior to disclosing and how their ability to connect (link) to others may have changed as a result of disclosure. One aspect of looking at how relationships, such as to family members and friends, may have changed due to disclosure means looking at responses to disclosure.

Figure 4.1 depicts the age of participants at the time of disclosure which illustrates a variation of disclosures occurring across the life-course.

Figure 4.1: Participants age at time of disclosure



The above graph shows how two participants disclosed in later life, at the age of 50. The youngest participants disclosed was at the age of six years, in childhood. Many disclosures taking place in young adulthood occurred between the ages of 18-24 years of age. The variation of age at the time of disclosure illustrates how there are different perspectives that participants have to offer on their CSA experiences and disclosures. This chapter considers CSA disclosure as taking place as a process occurring prior to talking to someone for the first time, for example, pre-disclosure. This stage of the disclosure process means that the survivor is often experiencing secret-keeping after the first incident of CSA. For a select few participants, their CSA experiences occurred only once, whereas for the majority of participants, they experienced repeated incidents of CSA for a prolonged period of time. For these participants, they were considering disclosing whilst the CSA was still occurring.



Participants in this research spoke about life pre-disclosure and what it was like for them living in silence. There were various reasons why survivors carried their secret alone for many years, such as not recognising the CSA as abuse or not remembering or acknowledging the abuse. A major linked lives theme in the data was secret keeping and both the desire to, and often inability to, connect to others, in order to disclose. The theme of secret keeping demonstrates how CSA survivors felt pre-disclosure, what it was like for them to not disclose, and the ways in which they felt their secrets impacted their abilities to form close ties to other people.

Two thirds of participants mentioned struggling in silence. Another participant who remained silent for a number of years pre-disclosure was Lisa who disclosed in young adulthood after experiencing CSA beginning at the age of five. She felt that her experience of CSA negatively impacted her ability to have a relationship with others which then affected her life course: "I mean I was in complete and utter silence. My inner child has been sacrificed because I didn't say anything". Lisa stated in her interview that the impact of her abuse left her feeling traumatised and the continuous threats to kill her from her perpetrator meant that she kept her CSA experiences secret for fourteen years. Lisa's statement shows that whilst survivors may have various, valid reasons for not disclosing as and when the CSA occurs, keeping the abuse, a secret can have a significant, detrimental impact on their well-being and sense of self. Lisa was one of many disclosing in young adulthood that felt the impact of secret-keeping in childhood, as Maxine said: "carrying secrets is such a heavy burden". Maxine's quote exemplifies what it was like for her to try and independently keep her CSA a secret for ten years as her abuse began at the age of five and she did not disclose until she was fifteen years of age. This quote illustrates the importance of linked

lives in CSA disclosure since for participants in this research, feeling as if they could not connect to others had a negative impact on their life-course.

This suffering in silence was also shown by Sean, who disclosed in late adulthood, and stated that keeping his CSA experiences a secret was having a detrimental effect on his life: “you know that load of secrets just pulls you down”. Sean’s statement shows how not disclosing CSA can often be negative for survivors, since Sean was experiencing difficulties sleeping and maintaining his romantic relationship, which he attributed to keeping his CSA a secret. Once Sean disclosed, he said that he felt he was able to address his issues with understanding as to why he was struggling in the first place, something he was unable to do until he reached the point of disclosure. These findings show how participants in this research dealt with the CSA experiences pre-disclosure and how remaining silent affected participants in a myriad of ways. For instance, participants gave anecdotal descriptions of keeping the CSA experiences a secret, describing this silence as a ‘heavy weight’, ‘keeping the CSA in a box’, or ‘pulling them down’, or a ‘darkness seeping in’. These descriptions indicate that when participants feel that they do not have a close enough relationship to any one individual, that would facilitate disclosure, it had a negative on them during the secret keeping pre-disclosure part of their lives. Therefore, these findings show that the desire to connect with others and to disclose CSA experiences is often connected to survivors feeling burdened by secrecy and silence. One factor that contributed to secret-keeping was not having the words to disclose. For example, Elsie aged six years at the time of her abuse, said this:

I wanted to tell immediately cause you know, this was a horrible experience, didn’t really know what to call it or, or what words to put to it but I knew I needed

to tell my mum. I went over and over it in my head, constantly. I still couldn't put into words that was the hardest thing because I wanted to make sense of it.

Elsie describes how she tried to connect to her mother as she trusted her and wanted to better understand what had happened to her, but her mother's negative response meant that Elsie struggled to make further connections in order to disclose again. Whilst Elsie found a way to put into words to disclose to her mother in the weeks after the first CSA incident, she was not believed and was left to fend for herself, which meant she experienced further CSA.

Furthermore, Elsie demonstrated how her secret-keeping was facilitated post-disclosure as she also disclosed her CSA experiences to a school friend, in childhood, at the age of 6-years. When Elsie was negatively responded to by her friend, she took this to mean that she should not publicly speak about her CSA experiences: "It [response to disclosure] made me realise it was something that I'm supposed to keep quiet about cause I learnt by then that you do not tell them, it's your secret". As Elsie's story demonstrates, at times, when a person managed to disclose in childhood, a negative response from a friend affected her life-course and her ability to trust others, resulting in her not disclosing again for another 9 years, when she was fifteen years old. From a life-course perspective, Elsie experiencing a negative response to her CSA disclosure at such a young age had a profound effect on her ability to trust and connect closely to other individuals resulting in her not disclosing again for many years.

Not being able to initially put CSA experiences into words for a disclosure was experienced by more than one participant, due to their being too young to comprehend what had happened to them. For example, Peggy, who first disclosed in childhood at the age of nine years, said: "I wasn't able to verbalise it". Peggy's illuminates one of

the difficulties participants in this research faced pre-disclosure when they were too young to have the words needed to disclose, resulting in delaying disclosure to a later point in their life, with their secret often standing between them and close connections to other people in their lives.

Similarly, Julia reveals she also was not able to find the words to verbalise her experiences when she was trying to disclose a second time to her mother in her late forties, after successfully disclosing to her friend eight weeks prior: “I couldn’t get my words out... I physically couldn’t speak about it”. The reason for Julia feeling as if she was struggling to disclose to her mother may be because of a fractured family unit, for instance, she said:

Even my family, like my brother. It’s like an inconvenience if I mention my past... so I just keep it to myself... I mean my mother and I have a very fractured relationship. Well not fractured, like I find my mum quite cold sometimes because she... you know she’d only hug you when you were unwell. And like... I don’t even think she’d say she loved you on her death bed... maybe it was a way of the times, I don’t know.

Julia’s admission on her relationships with her brother and mother indicates why it may have taken her so long to disclose. Hence, Julia may have felt that she was not connected to anyone enough to be able to trust who she was disclosing to, until she and her friend both disclosed to each other. Julia was seventeen years post-disclosure at the time of her interview, and she stated that she still has trouble saying that she was sexually abused as a child out loud.

Not having the words to disclose illustrates the importance of ensuring that CSA is talked about in society so that other CSA survivors do have the words to disclose and do not face similar issues surrounding disclosure. An open societal discourse will

facilitate survivors being able to form trusting relationships with others so they can disclose their CSA history without worrying that they will not be believed. These findings show that participants felt burdened by keeping the CSA experiences a secret, highlighting the thought processes behind not being able to link to others to disclose. The next section of this chapter looks at participants experiences of being in denial about the CSA experiences, and how being in a state of dissociation can hinder connections to others, and thus preventing the disclosure process, from taking place.

### Linked Lives and Barriers to Disclosure

#### Denial & dissociation as disclosure barriers

Living with CSA pre-disclosure was overall not a positive experience for participants. Many participants felt that they had to avoid connecting to others as they were they were in denial about what had happened to them, or because they did not wish to be seen as a victim and linking to others threatened their ability to keep the CSA experiences secret. For example, Sean said this about his life pre-disclosure:

Before I disclosed to Jen [his partner at the time], I'd sit there and secretively cry so she didn't see me but yeah, I'd wake up crying. When you think about it, holding on to that secret for twenty-five years on your own you know it's going to take some sort of toll on you.

Sean eventually disclosed to his partner at the time aged 39 years, lending insight into how and why a disclosure can take place so many years after the CSA, such as struggling with mental health (explored further in chapter seven). Faye was another participant that showed an inability to disclose until late adulthood:

I felt that shame, cause of the way its seen, like it was incest and so then I felt so dirty that there was no way I was going to tell anyone. And especially... like there's no way mum can ever find out about what he did to me because it would destroy her, I mean, I couldn't do that to a 74-year-old woman, it would break her. Cause like I don't blame her at all, she was and is a good mother to me, but I just made a decision that I'd never tell anyone about it and that I'd deal with it on my own.

Faye's statement illustrates that whilst she has a close relationship with her mother, many survivors may opt not to disclose because they have concerns that it will change the way that people they have formed relationships with will see them once they become aware of the CSA experiences. An additional reason why Faye was able to remain silent for so long was that she pretended that the CSA had not occurred. This quote explains why she was no longer able to pretend:

I think it was having children myself that triggered the erm... like I had basically forgotten it. Not forgotten it, but you know like suppressed it. I just kind of went through life trying to pretend that it wasn't affecting me.

Faye asserts how she did her best to not acknowledge her CSA, which she feels affected her relationship mother and others in her life. When she became a mother herself and was embarking on forming a close connection with her own child, she was motivated to address her own abuse, likely as she worried about how to make sure that her own children did not have such experiences and to prevent issues with her being able to form close connections with them.

Needing to keep the CSA a secret often prevented those interviewed from connecting to others in a meaningful way, which in turn hindered the disclosure

process for many participants, and this was described in similar ways across participants. For instance, Kitty, who disclosed in young adulthood aged 19 years, said

I knew that like my siblings and that might not believe me. I don't know I still thought they would. But some of them didn't and that was yeah... really hard. It made me feel that the family had broken up which was like... my fault. So, we don't talk now because of they couldn't accept it really.

I would say it (disclosing CSA) is very difficult for family... obviously my mum knows what happened. One of my other brothers who I'm in contact with... I haven't told him, and my mum hasn't told him, so we are presuming he doesn't know. And none of my other family know.

Thus, Jodie made a deliberate decision post-disclosure not to reveal the CSA to other family members, as she does not want them to judge her or to perceive or treat her differently. Jodie's quote demonstrates her concerns about being able to continue to connect closely with the people in her family drive her silence. She also stated, "I think it's a feeling of being erm... silenced. You're never really accepted into society". From the perspective of the concept of linked lives,, Jodie felt that she was unable to make links to people within society which led her to feel socially excluded.

These quotes demonstrate the importance of the idea of linked lives in understanding the complexity of CSA disclosures as participants were concerned about their existing relationships and how they would change if they disclosed the CSA. Instead, many participants chose not to disclose in order to ensure the quality of their relationship, indicating that linked lives poignant to comprehending why survivors may choose not to disclose. In line with the concept of linked lives, a lack of disclosure may be

motivated by the desire to preserve existing relationships to those they are linked to in their lives.

For some participants in this research, dissociation served as an unconscious barrier to disclosure which prevented them from connecting to individuals in their lives sooner. Dissociation as a barrier to linking to others for a disclosure was discussed by Kelsey, who disclosed in childhood, at eight-years-of-age. The interference the abuse caused in her ability to form close relationships with others that might present an opportunity for her to disclose was explicitly discussed by Kelsey, who said: “I never disclosed anything because I wasn’t always fully there. I was just very dissociated I think”. As Kelsey indicates, she could not connect to other people to disclose because she was in a similar state to daydreaming, meaning that she spent more time in her own head than trying to relate to others. Thus, agency in the disclosure process may be constrained due to dissociation which may mean survivors are disconnected from their emotions, preventing them from forming close connections to others on an emotional level. The concept of linked lives is important here because the premise of this theme is that individuals are connected to others in ways which influences their life-course outcomes (Elder, 1993), including disruption to desired outcomes due to CSA limiting their ability to form meaningful links with other individuals.

#### [Fear of being disbelieved.](#)

This section of the chapter addresses participants fear of not being believed, which is important as it also shows how some survivors delay disclosure because they may be concerned that they will be deemed a liar by the individual they are disclosing to. This theme was prevalent in one third of interviews. It is important to note that just because a participant noted that they feared they would not be believed, does not mean they



did not desire to form close connections to others to disclose. For example, Allen, who was a professional football player for a high-profile team, was sexually abused by his football coach. He disclosed in young adulthood, aged 24 years, and said this about his reasons for delaying disclosure: “If I had of told my dad actually what had happened, I don’t know if I’d ever played football again really... people wouldn’t have believed me, so it was kind of really difficult to kind of tell anyone”. This quote illustrates that because Allen experienced abuse by his football coach, he failed to disclose the abuse to his father in fear that his father would prevent him from being able to continue to play football as a professional career.

Hence, sometimes, it is not just the fear of being disbelieved, but the anticipation of experiencing negative consequences as a result of disclosure that prevents survivors from disclosing to others which in turn can limit their ability to form close emotional ties, even with close family members. Allen was also concerned what would happen if he was disbelieved by his team-mates and was concerned about having to still face his perpetrator football coach. Thus, the concept of linked lives along with Allen’s quote show the complexity of how non-disclosure can prevent survivors from forming truly close relationships, because survivors may fear that disclosure will result in the loss of relationships, i.e., with his team-mates. Furthermore, Allen’s career may have exacerbated his inability to connect to others since football is often closely linked to concepts of masculinity and often, men find it more difficult to disclose than women (Easton 2013).

Some survivors may have an internal battle between wanting to disclose and not wanting to disclose because of fearing they would be disbelieved, as was the case with Kelsey: “In my head I was having a battle, like I wanted someone to know what was going on, but that feeling of not being believed was just so erm... it just took over”.

Therefore, even when CSA survivors actually want to connect with others, the fear of not being believed often prevented them from pursuing close relationships. Throughout the data, there appeared to be an inner conflict within the participants who wanted both to disclose and not to disclose simultaneously. The conflict that participants experienced here has been found in the CSA literature which researchers have termed, 'the pressure cooker effect' (McElvaney, Greene et al. 2012, Tener 2018). However, the ways in which the pressure cooker effect is related to survivors ability to connect or link their lives to others throughout the life course has not been explored.

The fact that participants in this research had an innate fear of being disbelieved at a young age, suggests that society does not send out a strong enough message to survivors that they will be believed if they do disclose. The concern that survivors will not be believed can be a main driver for non-disclosure, despite them still wanting to form close connections and emotional links to others. This concept is further demonstrated by Amy who first disclosed in childhood at the age of eleven to her school friend and received a negative response. While she did later find someone else to disclose to, it was another nine years before she did so:

I had this stereotype in my mind about what people were thinking... like can I tell them this? Like will they think 'oh my god, she won't be able to cope with her life and stuff. I feel like I was doing alright considering, cause I always had this idea that if you were being abused by someone who's really close to [you] then you'll like... not be able to cope with life... and like you'll have loads of difficulties, loads of problems... so people won't believe it happened to me because I kind of manage it alright. You don't disclose because you have all of these concerns and fears that no one is going to believe you.

Amy's statement illuminates the thought processes of a CSA survivor pre-disclosure and shows that societal ideologies, such as what constitutes an ideal victim may play a role in whether survivors disclose. An ideal victim includes a survivor that appears as blameless, weak and was harmed (Lewis, Hamilton et al. 2021). The fear of being disbelieved stems from feeling that they do not meet the societal criteria for being a survivor. These fears are deep seated and greatly impact a survivors ability to connect with others emotionally.

This section of the chapter has shown that many survivors will be unable to connect to another individual sufficiently for a disclosure to take place, due to the concern that they will be disbelieved, which is due to societal ideologies surrounding what may constitute a good/bad survivor. This finding shows the significance of ensuring all individuals are exposed to a society that sends out a message that CSA survivors will be believed when they disclose, regardless of their age. Although, in UK culture, there is currently a normative societal message that tells survivors that they will be believed, this is not always the case, and it is of importance to ensure that the social message is actually adhered to by those responding to survivors. This section of the chapter has also shown that participants were concerned about existing relationships. Thus, linked lives as a concept is applicable to understanding survivors thought processes pre-disclosure since participants were linked to those that they considered disclosing to and were aware of a possible loss of those links if they did disclose.

#### Shame, guilt and feeling at fault.

This section of the chapter looks at feelings of shame and guilt and the various reasons why these feelings arose, including examining the ways in which feelings of shame

and guilt prevented participants from being able to connect with others in order to disclose, and how individual links to others may have been disrupted or changed as a result of responses to disclosure. Many participants spoke of feeling guilt and shame as a barrier to being able to disclose for the first time, regardless of age. Agency and shame/guilt are intertwined because many participants said that they felt guilt or shame for 'allowing the CSA to happen'. This shows that many survivors may not acknowledge that they had a constrained level of agency at the time of the CSA, which was then internalised into guilt and shame, as participants in adulthood analyse what they should have done to prevent the CSA from occurring. For example, Faye stated that she felt guilty because she 'allowed' her CSA to occur, despite being a seven-year-old at the time of the abuse: "so there's that layer of guilt for allowing it [CSA to] happen". Faye's statement illuminates how feelings of guilt may stem from the not being able to do anything at the time to stop the CSA from occurring. Moreover, Faye may be looking back at her childhood experiences through an adult lens, whereby with hindsight, she blames herself for something that she most likely would not have been able to prevent as a defenceless child.

As adults, participants often felt that they had let themselves down and in retrospect saw avenues of resolving the abuse that may not have existed when they were children, or that they, as children, lacked the agency to pursue. Faye was not alone in feeling guilt as an adult for not being able to stop the sexual abuse as a child. Catherine discussed similar feelings: "it makes you feel guilty, doesn't it, that you didn't try and do something. No one speaks about it because when you're a child you're so ashamed". Catherine's perspective was similar to Faye's as she felt she could not stop the CSA and for her, shame stemmed from the lack of exposure to CSA discourse when she was a child. Again, this view may be a result of hindsight whereby their lack

of human agency when the CSA occurred is not recognised by their adult self. Whilst Catherine disclosed at the age of nineteen, at the time of the interview when she was 54 years old, she was still blaming herself for not being able to stop the CSA. Catherine's self-blame may be linked to the notion that she received a negative response to her initial disclosure to a social worker who referred to her disclosure as 'just an allegation'. Furthermore, Catherine stated in her interview that she is a recluse and does not see anyone due to a lack of trust, which shows how feelings of guiltiness can influence whether survivors connect to others throughout their life-course, and not just at the time of disclosure. In line with the premise of the life-course perspective, Catherine's lack of relationships with others means she has no social life in later life, indicating how CSA can impact a survivor's ability to form close emotional ties to others even post-disclosure.

The notion that many survivors would not be able to stop the CSA from happening is well established in research, since it has been shown that many survivors go in to the 'freeze response' (Katz, Tsur et al. 2021). This response is often unconscious and is shown to occur for CSA survivors (Sanderson 2013). This freeze response becomes learned and so can affect how CSA survivors connect to others outside of the abusive encounter or relationship, a concept which has not yet been looked at in research. Therefore, while it is clear that survivors could not have done anything to prevent the CSA when they were children, as adults, they may be unaware of the lack of autonomy they had at the time resulting in them feeling a sense to responsibility for the abuse they experienced. Whilst it is unclear in participant's interviews what they feel they may have been able to do to stop the CSA from occurring, it appears that they may be using the lens of hindsight to reanalyse their childhood experiences with an adult mind. The adult perspective then exacerbated

feelings of guilt, which in turn prevented them from connecting to others as they were left feeling worthless, and ashamed of their lack of ability in childhood to stop the abuse. These feelings directly influenced their ability to connect with others, and the resulting lack of connection to others also acted as a barrier to disclosure. These stories indicate that perceived human agency is important when looking at CSA disclosures and that more needs to be done in society to ensure that survivors do not internalise feelings of guilt. Participants who disclosed at different stages of the life-course said similar things about feeling as if they had partaken in their own CSA, which may be a motivator for feeling shame and guilt, even post-disclosure. Through the lens of the life-course perspective, it is because survivor's lives are interlinked with others through their relationships and interactions, that they worry about how others will perceive them should they reveal the truth of their CSA experience. Further, the internalisation of negative responses they may receive to any disclosure attempts they have made mean that they continue to feel guilt/shame and often do not disclose their experiences again, impairing the ability of other people to fully know and understand them. Thus, not disclosing can affect survivors relationships and connections with others – or their ability to link to other people – throughout their life (see chapter six).

Steve, who disclosed in young adulthood was one participant who felt as if he had allowed his CSA to occur and as a result, he felt guilt: "Imagine that [CSA experiences] and the guilt of letting something happen to you". Steve's statement was in response to him freezing when he was sexually abused as a child, which led him to blaming himself as he did not (and could not) do anything to stop it from happening. Again, with an adult mind, Steve should be able to recognise that he could not have done anything to prevent the CSA but the feelings he had as a child have stayed with him and coloured his adult perspective. Steve's quote, and others provided in this

section, demonstrate how significant feelings of guilt can be despite the fact that these participants were children who did not have agency in their own CSA. Pippa was a participant who disclosed in late adulthood. She felt shame when she tried to disclose to another individual about her experiences:

Just gives it so much shame then that when you have to try and tell somebody... the shame is just overwhelming the shame around having partaken, and I use that word really carefully, partaken in this act, because there's this sense that you've partaken in it because you didn't stop it.

Pippa's feelings of shame were a driver for her non-disclosure for so many years and shows how early life-course experiences have an effect on those later in life. Pippa shows how feelings of shame often do not dissipate with age and that her sense of having participated in her own CSA prevented her from disclosing until she was fifty-years-of-age, reducing her ability to form close relationships to others throughout her life course – any link formed was necessarily incomplete because she held back the CSA she experienced and thus part of herself.

Therefore, despite the lack of human agency that survivors have at the time of the CSA, they still may feel that were complicit and this acts as a barrier to disclosure and may prevent the survivor from talking about their experiences. For instance, Jackson was abused by his friend's father, and he reveals the impact of believing he was at fault for the CSA he was put through: "I carried the shame and hated myself for a long time". These feelings of shame may stem from the response he received when he disclosed to his friends at school:

They [headteacher] said to my parents "he shouldn't be talking about this kind of stuff in school... he's not allowed to talk about it at school". They treated it

more like a disciplinary matter really... and that was really upsetting. On the one hand I was being told I need to talk about it (by society), but then at school when I was talking about it, I was getting in trouble, so it was really quite conflicting for me. I felt like I had done something wrong.

Jackson's quote lends insight into a negative disclosure experience whereby he was exposed to the message in society that he should speak up about his CSA experiences, but when he did, he was not met with the response that he was expecting. Hence, Jackson's feelings of shame may have stemmed from the negative response he received in his initial disclosure, which he believes prevented him from disclosing to the police for a number of years. Jackson ended up homeless after leaving the family home at the age of fifteen. His parents were called into the school when he disclosed to his friends, which was reported to the headteacher. Jackson was then disciplined by his parents and headteacher, demonstrating that a negative disclosure experience can disrupt some survivors connecting to others, such as to family members, or the police. The response Jackson received illuminates the importance of linked lives in understanding CSA disclosures, as the person to whom survivors choose to disclose has the potential to affect the survivor's life course and may result in the loss of relationships the survivors considers important, such as with their family.

Last, feelings of shame may be related to the survivor's relationship with their perpetrator. For example, one factor that may elicit feelings of shame is the survivor may be concerned that the CSA would be perceived as consensual. For Sean, who was sexually abused by his father and disclosed in late adulthood, it was first hearing about the concept of incest that evoked feelings of shame: "when I first heard about incest, but that's when I felt really like... you know dirty and ashamed because well...



I thought if I did tell anyone that's how it'd probably be seen as". Sean portrays his fear that if he did disclose, people would perceive his experiences as consensual because the word incest indicates, in his belief, a consensual relationship rather than abuse. Feelings of guilt and shame are a factor that facilitates silence pre-disclosure, and this shows how survivors often struggle with secret-keeping throughout the life course.

Many of the participants experienced repeated incidents of CSA, and these feelings of shame/guilt may be worsened because they did not disclose after the first incident. For instance, a few participants shared their belief that if they had disclosed after the first incident of CSA it may have prevented them experiencing further, repeated incidents of CSA. Thus, survivors ultimately blame themselves for the CSA experiences, and the shame and guilt they feel about what they perceive to be their own failure can act as a further barrier to disclosure, ultimately preventing them from relating to others.

Many participants directly said that they felt like they were at fault for their experiences, which in turn exacerbated feelings of shame. This feeling was noted by Sally as impacting her ability to disclose:

So, in my mind it was like... I was scared to tell anyone. Partly to do with the fact that I was always worried that I had let it go on for too long. If I had spoken and you know that kind of a... which I now know is kind of misplaced, but at that age I was always worried that I was at fault. So, it took me so much longer [to disclose].

Sally was abused as an adolescent and for this reason, she felt as if she may have been at fault because of the duration of the CSA. This in turn prevented her ability to connect to an individual for four years, when she finally disclosed to her mother.

Feeling at fault for the CSA was mentioned by several other participants, for example, Julia said: "I had convinced myself for years that it was all my fault". Julia indicates the reason why she did not disclose until the age of 43, was because she believed for many years that it was her fault that she had been sexually abused as a child, due to not disclosing the CSA after the first incident. These feelings of being at fault for the CSA may be internalised as a child and carried into late adulthood.

One last example of how and why CSA survivors may place blame on themselves lies with Peggy, who was sexually abused by her father and then was further victimized by multiple different men when she went into care at the age of fifteen. However, when she disclosed to the authorities in the 1990's, they accused her of being a prostitute which she believes led to her blaming herself for her own CSA:

It was one of those situations where the... the workers knew about it, but that's in the early 2000's, we were just told that it was our fault and that we were being slutty... us girls. So... there was not really much point in disclosing when I knew that people already knew and were just going to blame me anyway and again it was very much normalised. Because of the things that were taking place in front of these different people... I mean there were gangs of men and gangs of young girls... I was full of a lot of self-blame.

Peggy's experiences shows that the number of perpetrators that a survivor has may be a factor that evokes self-blame. The professionals around Peggy actively told her that her being sexually abused and exploited was her fault and that she was making a lifestyle choice. Current research surrounding grooming gangs demonstrates the attitudes to have existed throughout the 1990's-2000's that survivors exposed to

sexual exploitation were blamed by professionals as they were perceived to have been agentic in their own abuse (Colley 2019). Peggy's quote also shows how self-blame can prevent survivors from connecting to others, further acting as a barrier to disclosure.

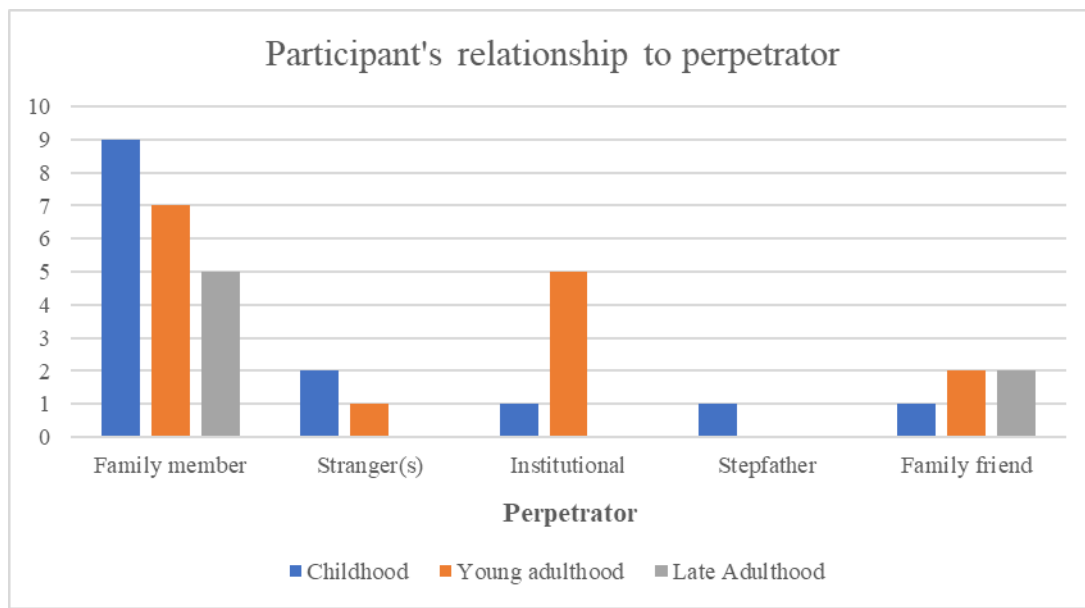
This finding also has shown that some survivors that feel at fault may not realise that they did not have human agency when they were sexually abused in childhood, which acts as a barrier to disclosure since this feeling acts a driving force for secret-keeping. The next section of the chapter explores the complex relationships between the participants in this research and their perpetrators, in order to show how survivors are most often connected (linked to) to the individuals who abuse them.

### *Linked Lives and Relationships with Others*

#### *Relationship between participants and perpetrators*

This section of the chapter briefly looks at the participant's relationship to their perpetrator in order to illustrate how significant the concept of linked lives is in understanding CSA disclosures occurring at different stages of the life-course. The below graph shows how the majority of perpetrators were known to the participants.

Figure 4.2: Participants relationship to perpetrator by timing of disclosure



The findings show how intrafamilial CSA was the most prominent type of CSA, which may also account for many of the participant's feelings of shame, guilt, and self-blame that were explored earlier in the chapter. This is because intrafamilial CSA is connected to incest which is historically linked to strong societal taboos which creates an additional layer of shame for the survivor (Lawson and Akay-Sullivan 2020). In total, two-thirds participants were sexually abused by a family member, with a few participants having multiple perpetrators. Family members included fathers, older brothers, grandfathers, and cousins. A select few were sexually abused by a friend of the family, illustrating that CSA often occurs within the family home and by someone known to the survivor. Moreover, some participant's perpetrators worked for institutions, such as a scout leader, policeman, or social worker to name a few. These findings show the survivor is often very much connected to their perpetrator, which may have implications for disclosure and for how the survivor is able to heal post-CSA.

The notion of being closely connected to their perpetrators may be the driving force for not being able to connect to others later on because the abuse contributes to a prominent lack of trust in others which inhibits them forming meaningful relationships. From the perspective of linked lives, being abused by someone with whom they have a close relationship will have a long-term effect on their life.

### *Relationship between participants and who they disclosed to*

The disclosure process shows how there is a relationship between the individual disclosing and the person that is listening and responding to a disclosure. The analysis shows that participants mostly chose to disclose to an individual close to them at the age when they did disclose. Mothers were prominent figures in CSA disclosures, particularly for participants disclosing in childhood and young adulthood. Other disclosures occurred to their romantic partners, friends, sisters, and grandparents. Most of these participants disclosed in young and late adulthood. In contrast, a few participants disclosed to an individual working for an institution, including a social worker, a GP, or ChildLine caller. The next section of the chapter draws upon the concept of trust in order to establish the thought-processes of participants pre-disclosure, and whether trust in those linked to them acted as a facilitator or a barrier to disclosure.

### *Linked Lives and Responses to disclosure.*

An analysis of responses to CSA disclosures will enable me to show that there are key differences in survivors disclosing at different stages of the life-course and what may be the motivator for positive and negative responses. The below graph depicts the variation of responses participants received, showing that those who disclosed in

childhood overall received more unsupportive responses than participants disclosing in young or late adulthood.

Figure 4.3: Responses that participants received to their disclosures made at different stages of the life course.



Figure 4.3 demonstrates that negative and positive experiences of disclosure are characterised by whether they are believed and supported by the person they are disclosing to. One key difference in participants disclosing in childhood and those disclosing in young or late adulthood, was that those disclosing in childhood were mostly still being sexually abused at the point of disclosure. Hence their disclosure may have been more motivated by attempting to stop the CSA from happening, whereas for participants disclosing in young or late adulthood, they may have been motivated to disclose in order to link to others, such as to access support, or just be listened to and believed.

One explanation for the disparity of responses to CSA disclosures in childhood and adulthood, is that survivors disclosing in childhood may not have had the words,

the capacity to judge, and/or the ability to anticipate potential CSA responses, all of which can effect a survivor's ability to link to others. This is evident in findings that discussed how participants could not find the words to disclose, which may be related to the notion that they cannot fully understand the CSA or the implications of experiencing CSA. Whereas those disclosing in young or late adulthood may have more agency over who they told and a better ability to assess a potential reaction, which in turn may have increased the likelihood of receiving a positive response. Another explanation is that because participants who disclosed in childhood were children disclosing and therefore the violation of social norms surrounding what age is appropriate to engage in sexual behaviour, would be much stronger for children than for those disclosing at an older age. Thus, a violation of social norms can prevent survivors from linking to others.

Just over half of participants received an unsupportive response after disclosing for the first time and some of these responses to disclosures were to participants that disclosed in childhood. These findings illustrate that whilst there has, in more recent years, been a consistent message in society that children should disclose CSA, those that did in this research were not believed. Although it is important to note that not all participants would have been exposed to the same societal message that children can disclose CSA, since some participants born from different generations report that society has changed over time in terms of how CSA is perceived and responded to (see chapter nine). Therefore, historical time periods are of importance to how CSA disclosures have been experienced by participants, lending insight into how there are differing ways in which they were effected by socio-historical time periods. These differing experiences of disclosure may also facilitate or hinders how survivors are able to connect to others (see Chapter 5).

## Institutional responses to disclosures.

A select few participants disclosed to an institution for the first time, with some also secondarily disclosed to an institution. Institutions participants disclosed to include a General Practitioner, ChildLine, and Social Services. The findings show that some survivors did not feel they received a supportive response to their disclosure which negatively impacted their wellbeing. Although it is important to add that these responses to disclosures were not in recent years. For example, Peggy disclosed 21 years ago to ChildLine, when she was a child at the age of nine, after seeing an advertisement raising awareness of child abuse. Peggy stated that she thought it was the year 1999 she phoned ChildLine for the first time “they [ChildLine] thought I was a prank caller and hung up on me”. Peggy said that she was only nine years old when she made this call to ChildLine and perhaps one reason they hung up on her was because she was such a young child that the call-handler assumed she was not genuinely making a report. Furthermore, the impact of receiving a negative response was noted by Peggy, “I went home and attempted suicide a couple of days later, so it definitely had a huge impact because I’d built up so much courage over time to make this call”. Peggy’s disclosure experience lends insight into initial CSA disclosures as a process whereby survivors are connected to the individual they disclose to, and how they are responded to has the power to evoke strong feelings in the survivor, and impact how they form relationships across their life-course [explored further in Chapter 6]. In Peggy’s case, receiving a negative response exacerbated her existing mental health issues, which were also likely related to the CSA she experienced. Another example of how a CSA survivor is connected to the individual they are disclosing to is Amber, who disclosed to her GP for the first time at the age of 11:



No one ever asked [if she was ever sexually abused]. I told my doctor. He was our family doctor. Dr Burke. And I'd got like a urine infection, and I told him, and he told me I was lying. Erm... attention seeking.

Amber's first experience of disclosing her CSA experiences as a child was negative since she was told that she an attention seeker and no help resulted from the disclosure. Consequently, she did not disclose again until she was in adulthood. In contrast to Amber's experience, Julia said she has felt as if she could not disclose to her GP:

Sometimes... like when I've been to the doctors or something. I don't think they are actually listening. They just want to get you out of the room as quick as they can because they have loads of patients. No one actually takes the time to listen.

Julia makes clear that she believes that GPs are overworked, and that a lack of time was why she felt she would not be listened to by her own GP. This way of working within an institutional setting may prevent disclosures, although GPs are clearly individuals that many survivors feel they are trustworthy and are people to whom CSA survivors wish to disclose. Archie made his initial disclosure to his GP at the age of eighteen years, and he said this about his response: "the GP was very flippant". Archie stated that he told his GP he had been raped by his father, and he interpreted his GP's response as dismissive of his CSA which led him to struggle in the workplace, in his relationships and with his mental health. Receiving a negative response can exacerbate poor outcomes across the life-course as participants in this research have shown that they are very much impacted by who they link to and how they are reacted to when they do chose to disclose the CSA experiences.

This point is supported by Catherine, who was sexually abused whilst in the foster care system and she believes that social services refuted her disclosure, since her caregiver was employed by the same institution to which she was disclosing. Catherine was 19 when she disclosed to a social worker: “my social worker had written all over it [her social services file], ‘this has not been verified, this is just an allegation’”. Catherine states that the social worker’s response impacted her because she felt like she was not believed as her experiences was referred to as ‘just an allegation’, and this had a profound effect on her life-course post-disclosure. Catherine believes that the sceptical approach taken by the social worker created problems for her in maintaining relationships with others later in life, impacting her relationship with her children, her mental and physical health and ultimately her life chances and outcomes. The response that Catherine received in her view created feelings of distrust which is why she struggles so much to maintain relationships with other individuals:

It’s had an effect on all of my relationships, like with my daughter. With my son... you know, it’s had a really bad affect... and I want to break the cycle. I’ve been alone for fifteen years. Totally alone... no men nothing.

Catherine’s quote shows how her life-course post-disclosure has been impacted by her inability to make connections to other individuals as a result of both the CSA she experienced and the reactions to her efforts to disclose those experiences. Not only did the CSA negatively impact her, but the negative response to her disclosure to the social worker she told impacted her inability to trust and form connections with others.

Last, Kelsey provides another example of a negative response from an institution when she secondarily disclosed to an institutional figure, a community psychiatric nurse, over thirty years ago: “Then I started to have nightmares and

flashbacks and things like that... and then erm... she says, 'I'm not qualified to listen to this incestuous talk' [when she disclosed her CSA]." The unsupportive response Kelsey received from her psychiatric nurse could be linked to the cultural and societal ideals surrounding CSA at the time of her disclosure in the 1980's. Throughout the 1970's and 1980's, CSA discourse began to positively shift in survivor's favour (Angelides 2004) but this is not necessarily reflected in Kelsey's experience of disclosure to a professional. The next chapter explores in further depth how an analysis of historical time periods can provide insight into how the prevailing societal ideals surrounding CSA can influence responses to disclosure.

A lack of support from institutional figures was a prominent theme in this research. These findings are important as they emphasise that more needs to be done for survivors to feel supported. Things that may help are changes in the form of the language used to address or respond to survivors. For example, it may be helpful for staff in institutions such as social work to be trained to not refer to CSA survivors experiences and disclosures as an allegation, or for them to use language such as abuse, which puts the onus on the perpetrator, rather than as incest, which suggests that the survivor was an active participant in the abuse. Another aspect of ensuring survivors are responded to positively, is ensuring that survivors are heard and listened to within institutional settings. As GPs are likely to be a target for disclosure, especially for those survivors who are having trouble linking to others in their personal lives, additional time should be offered by the GP when CSA is disclosed so that they have time to explore the issue and provide a supportive and positive response to the individual disclosing. Therefore, training professionals that work within institutions is important to ensure that they respond to disclosures with a trauma-informed approach,

such as believing the survivor, making time for the survivor, active listening and using supportive language.

### Responses from family members.

Assessing responses to family members provides insight into how CSA survivors are inextricably connected to their families at the point of disclosure. This section of the chapter explores the complexity surrounding disclosure since often, survivors not only choose to disclose to a family member, but as these results have shown, are also sexually abused by a family member. The findings reveal that about half of participants first disclosure occurred to a family member, including their mother, father, siblings and grandparents, and a large proportion of those disclosures were negatively responded to. One example lies with Charlotte, who was sexually abused by her father. Charlotte said that she regretted telling her family because of how they responded to her disclosure:

I told her [my sister] then. She erm... she didn't really know what to say she was just asking me things like did sexual intercourse happen and what age did it happen and that. And I told her and then like she just started threatening me and just turned against me and tried to make out I was crazy.

Charlotte's motive for disclosure to her sister was because their father was around her sister's six-year-old daughter, and she wanted to ensure her niece was protected from CSA. The response that Charlotte received may be because her sister was put into a difficult position feeling that she had to choose between Charlotte and their father, which resulted, in this case, with her not believing Charlotte. The outcome of Charlotte's disclosure resulted in her being cut off from all of her family members, indicating how responses to disclosure can impact survivors existing relationships to

others as well as their ability to connect to others in the future. Charlotte's experience demonstrates the complexity of disclosure for some CSA survivors, since there are often familial links between the survivor, perpetrator and individual the survivor discloses to which can greatly impact how people respond when they learn of the abuse. For CSA survivors, when the perpetrator is a family member, there is a situation where family members have to choose who to believe, the survivor or the perpetrator. Survivors are often aware of this situation which is a barrier to disclosure, particularly for those disclosing in early or late adulthood.

Participants that disclosed to their mother in childhood and received an unsupportive response were all sexually abused by a family member, most frequently fathers and stepfathers. One example is Kelsey, who was sexually abused by her grandfather which she disclosed to her mother at eight years of age, over thirty years before she was interviewed: "I can remember telling her and... she was angry at first... and then... [her mother said] it's your responsibility to not be alone with him [grandfather]", then she was a bit tearful and then she didn't say anything, ever again". The response that Kelsey received can be considered complex since her mother was unable to deal with the situation and Kelsey was then left to try and avoid the CSA in any way she was able to. The lack of protection from further CSA had the most profound effect throughout Kelsey's life-course as she felt unable to trust and become close to anyone else after her mother's response. Thus, Kelsey's experience of disclosing to her mother illustrates how mothers are prominent figures for survivors disclosing for the first time, particularly if they receive a negative response leaving them to feel unprotected from further CSA. Overall, two thirds of participants disclosing to their mother did not receive a supportive response.

Ebony was sexually abused by her father, brother, and neighbour which she repeatedly disclosed as a child: "I told my mum. I told her. Loads and loads of times. She knew what was going on. Didn't stop it. Never once said it was abuse. Never once said it was wrong". This response that Ebony received from her mother may have been because her mother did not want to believe that her husband and son could be perpetrators. Or it could be the case that Ebony's mother was facing spousal abuse or was financially reliant on her spouse and in turn, ignored Ebony's CSA experiences. Thus, Ebony's mother felt that she could not stop the CSA from occurring as she may have perceived that she had constrained by human agency, even though she was an adult. Consequently, Ebony was left feeling unprotected throughout her childhood. Understanding the complexity surrounding responses from mothers is important for research since there may be multiple factors at play that influence such responses. One example lies with Amber's secondary disclosure to her mother in adulthood about her CSA experiences from her stepfather, a disclosure which Amber made just days before her wedding: "I didn't really have to say it, she [her mother] just said that she knew. She said, 'I... I don't want to talk'." Amber stated that she felt she was negatively responded to by her mother which maybe because her mother felt guilty or did not want to accept that her husband could be capable of committing a crime such as CSA. Amber went on to say what she hoped the end result would be from her disclosure:

I think more than anything I wanted them to believe me, and I wanted them to... like you know it's really childish cause it's almost like I wanted them to take sides. Not take sides I guess... maybe it is maybe it's like... it's my feelings around... I wanted to be believed.

In the end, the attempts Amber made to disclose were negatively responded to, by her GP at the age of eleven (discussed earlier in the chapter), and by her mother in her

twenties. These negative response left Amber feeling disbelieved which had a major impact on her life-course. In young and late adulthood, she went on to take class A drugs, such as cocaine and heroin, which led to an addiction, and to her eventually losing her job, home, and relationship with her children for many years.

Although there were a lot of negative reactions received on disclosure, this was not always the case. One participant who disclosed in childhood to her mother and received a supportive response was Chloe:

I was quite relieved actually because it was like... I almost just like handed the problem over. I mean I was lucky because I had support to deal with it, I know some people sadly don't... but you know it was kind of that support... uh total relief that you know, somebody else was there.

As Chloe highlights, having support and care from her mother when she disclosed to her at the age of 12 gave her a feeling of relief that she no longer had to deal with the problem. For instance, that someone else would help her and stop the abuse, which Chloe's mother achieved. The positive response from her mother that Chloe received may be linked to the notion that the perpetrator was a friend of the family, which was likely easier for Chloe's mother to accept, than if it had been a close relation such as a husband or son. Another example of a supportive response to disclosure came from Sally who also disclosed to her mother aged eighteen. She said: "She asked me how I'd been dealing with it and then she helped me get through the traumatic experiences that came with it. So, she was very supportive". Similar to Chloe, Sally's perpetrator was a family friend, indicating that responses from mothers may be influenced by who the perpetrator was. It is likely that it is much easier for a mother to provide a positive response to disclosure when the mother is not in a situation where she may have to

choose between family members, such as between their husband and daughter or son.

Supportive responses from family members provide insight into how CSA survivors may reflect on their disclosure as positive. One example provided by participants of what constitutes a supportive response was that they were simply listened to by the individual to whom they chose to disclose to. For example, Faye who was sexually abused by her cousin, said this about her disclosure to her sister, which took place in late adulthood:

She [her sister] just listened to me and erm... she told me that she believed me, and she understood why I didn't want to tell anyone else about it. But the one thing... she said I was brave. I mean as I say we wasn't really that close, but I do think we are closer now.

Faye portrays what a supportive response that makes the survivor feel believed and listened to can look like. In Faye's viewpoint, telling her sister about her CSA experiences meant they grew closer, demonstrating a positive outcome for her post-disclosure and a more positive connection to her sister. However, Faye went on to talk about how she did not want to disclose to specific individuals due to not wanting her close relationships to change. She said this:

It was especially hard cause obviously no one else in the family knows. It was just me and him that knew, well obviously, now my sister. But she won't tell my mum as she understands what it might do to my mum. And my mum's sister is pretty poorly lately as well so I wouldn't want to put that on her. But even telling my sister at the age of 36, up until that point I didn't think I'd ever tell anyone about it.



Whilst Faye received a supportive response from her disclosure to her sister, she still felt at the time of her interview that she could not tell her mother, since she was concerned that it may change their relationship, or that her mother would blame herself for the abuse Faye experienced. Thus, a lack of disclosure can be due to wanting to protect existing relationships to people in the survivor's life. Additionally, participants quotes have demonstrated that responses may be influenced by who the perpetrator is in relation to the survivor and to the individual to whom the survivor is disclosing the abuse. From a life-course perspective, CSA survivors are linked through relationships and connections to society which this research has shown can be impacted by both disclosing and not disclosing.

#### Responses from friends.

Some disclosures occurred to friends showing that who they link to when disclosing may influence responses. For example, a few disclosures occurred to a school friend in childhood, and these participants said that the individual to whom they disclosed did not know how to respond. This was described by Amy:

I feel like that [disclosure] didn't count because she [her young friend] didn't really recognise that, that was wrong. Like she thought it was a really bad thing, but it was more like "I don't know what to do with it, so I'll just ignore it".

Amy's response from her school friend was perceived as negative as no action was taken to prevent the CSA, although as an adult looking back on the experience, Amy recognised that because her friend was so young, she may not have known how to respond and was also likely powerless to do anything to help Amy.

Elsie's experience was slightly different because when she told her school friends at the age of six, they told their parents. Unfortunately, this led to the parents

involved blaming Elsie for the abuse: “it was the adults that see it as bad. Yeah, when they [her young friends] told their mum’s they were like ‘err we got stay away from her, she’s dirty’. Yeah, they bullied me after that”. Whilst this disclosure of Elsie’s took place in the late in 1980’s and may in part be due to the historical time period in which she was living, her experience provides insight that often, children may choose to disclose to other children who have an equal lack of agency as does the survivor. While in Elsie’s case, those children turned to their parents, Elsie stated that her friend’s parents did not report this to her school or mother, which could be because there was not as much awareness on CSA in the 1980’s as there is now. It is possible that if this same incident took place in contemporary society, children may better know how to respond as they are now taught about CSA in schools (Stanley, Barter et al. 2021) and adults may be more likely to report to safeguarding.

An example of a supportive response from a friend can be seen in Julia’s interview, who disclosed in late adulthood, rather than in childhood like Amy and Elsie: “she [her colleague] was just like super supportive. She didn’t really react at all. She just listened and then held me when I cried”. So, for Julia, she felt she was supported because she was actively listened to and comforted emotionally throughout her disclosure. However, as Julia was older, she was better able to select someone to disclose to who was likely to be supportive, and that individual had more maturity and understanding of the situation, in addition to being removed from it as a coworker rather than a family member, which may have enabled them to be more supportive.

This section of the chapter shows that disclosures to friends are complex since the age of the person that participants disclosed to may have had an effect on the type of response they receive. These findings show that participants in this research who received supportive responses felt that being listened to was what made disclosure a

positive experience for them. This chapter has also shown that participants felt a need to connect to others in order to disclose, although the response they received was often negative. The following section of the chapter draws upon trust as a major theme for disclosure, either as a facilitator, or barrier.

## Trust.

Trust is a theme of linked lives that naturally emerged in the data, and trust is a key concept to understanding to whom participants decided to disclose to. Trust can act as either a facilitator or hinderance in the disclosure process. An example of trust as a facilitator to disclose, are situations in which trust was a key factor that enabled the survivor to feel comfortable telling someone for the first time. Participants also stated that a lack of trust was a factor that hindered the disclosure process, as it made them uncertain about how the individual would respond. Last, I discuss the difficulties participants had trusting others as a direct consequence of suffering from CSA.

Trust is an important theme in this chapter since trust may be a way for survivors to make connections to others in order to begin the disclosure process. Anthony, who disclosed in young adulthood at the age of 24 to his friend, said this when I asked him why he chose this individual to disclose to:

He was a trustworthy person. I think at the time... [his friend felt] relief and upset, yeah... I've had far worse reactions since shall we say. It's certainly allowed [me] to live a life whereas before I was just existing.

The way Anthony's friend responded so positively helped him heal post-disclosure and motivated him to pursue criminal justice as his friend encouraged him to report his CSA experiences. Thus, trust was important for Anthony to be able to disclose,

whereby he was able to connect not only to his friend, but with societal institutions such as the police.

Kitty, who disclosed as a young adult, was another participant to state trust as a reason for disclosure: “we had chosen each other [to disclose] because we [her and her mother-in-law] trusted each other enough”. Kitty directly noted trust as a factor in her disclosure to her mother-in-law and it is likely that she would not have disclosed to anyone else where that level of trust was not present. Another perspective on the importance of trust is offered by Raymond, who asserts that disclosure is “all about building trust”. Raymond also put forward his viewpoint that children may struggle to trust adults, saying: “it is much, much harder to get that trust with an adult”. Raymond’s statement that it is more difficult for a child to disclose to an adult, may help to explain why many disclosures occur in adulthood long after the CSA occurred. Raymond’s point that children may find it more difficult to trust adults may explain why so many participants disclosing in childhood did so to mothers, although in many cases here that trust in their mother was somewhat misplaced as more negative responses were given than positive ones. Another aspect of trust is the notion that individuals from institutions, such as General Practitioners (GP) are automatically perceived as trustworthy even if the participant has a less strong relationship with the GP than with someone like their own mother. An enhanced level of trust in their GP was suggested by Michelle who disclosed to her GP aged forty because she was struggling with her mental health: “I thought in my head that doctors are to be trusted”. Michelle illustrates how she believed that because society regards doctors as trustworthy professionals, she felt that she could disclose to him. However, when she disclosed, he said this in response: “you’ve got two successful sons, and you’re still married. Go away and get

on with it". This response from her GP left Michelle feeling unsupported post-disclosure, which discouraged her from disclosing or connecting to anyone else.

As this section shows, trust is a facilitator for disclosure since participants in this research assert that they disclosed because they trusted the person to whom they chose to disclose. Hence, trust is an important aspect of linked lives since it has the capacity to facilitate disclosure, though it is not clear that the trust offered to others whose lives were linked to theirs was always well placed. Whilst trust may be a facilitator for survivors to be able to connect to other individuals, this research has also shown that disclosure does not always result in a positive response which can have a negative impact on the survivor. The next section addresses how participants may have difficulties trusting other people as a result of experiencing CSA and what factors may exacerbate their feelings of distrust and further inhibit their ability to form close relationships with others.

A lack of trust was prominent among the narratives of participants, and participants mentioned not being able to trust people in their lives as a result of being a survivor of CSA. This is an important theme of linked lives as it provides insight into the difficulties that some survivors may face in finding meaningful relationships with other individuals. This difficulty is often exacerbated by the fact that the majority of survivors were sexually abused by people closely linked to them, such as family members, or close and trusted family friends. Many survivors discussed their inability to trust people in adulthood as a consequence of being sexually abused in childhood by those they were told they could trust. One factor that appeared to be important in feelings of distrust was the participant's relationship to their perpetrator. Sally was sexually abused by a friend of her parents, who she trusted prior to her CSA experiences: "[After experiencing CSA] you are not a very trusting person, so you

know you'll never trust people". This statement of Sally's demonstrates *why* some survivors are left with issues trusting people, because most were abused by individuals that the survivor may have once trusted and even cared for.

As well as the survivor's relationship to the perpetrator, survivor's may have difficulties trusting due to their upbringing. For example, Ebony was a participant that was sexually abused by her father, brother, and next-door neighbour, which she attempted to disclose to her mother as and when different incidents occurred, but she was not listened to or protected from further abuse. Ebony stated in her interview that she was explicitly directed by her parents to not trust any professional: "All I remember is [my parents saying] 'don't trust social services, the police'. The reason why Ebony's parents may have instructed her to not trust professionals was because of the CSA that was occurring in the family home, and they wanted to prevent her from disclosing this to someone. However, a lack of trust of authorities such as the police and social services is linked to lower social classes (MacDonald and Stokes 2006). Ebony was from a lower social class. When Ebony was asked if she felt there were any consequences for her as a result of experiencing CSA, she replied, "probably trusting people". Thus, Ebony still struggles to form trusting bonds, and therefore conn to others, because she was taught not to trust people outside of her family home, during a key stage of development, childhood. Likewise, Ebony's close relationships to her perpetrators may have in exacerbated feelings of distrust.

It is not just the survivor's relationship to their perpetrator that can create feelings of distrust, but also responses to disclosure. For instance, Catherine demonstrates how the way in which institutions responded to her disclosures left her with the inability to trust professionals: "I don't trust them [professionals]. I give everybody a chance but as soon as they let me down that's them gone". Catherine

indicates she still struggles with trusting professionals despite first disclosing over 30 years ago. Catherine's distrust for professionals may stem from the fact that she first disclosed to a social worker who responded negatively. These findings show why some CSA survivors experience ongoing difficulties linking to others throughout the life-course, such as to professionals, either because they were taught not to trust professionals, or because when they do, they were often disbelieved and mistreated. The next section of the chapter looks at participant's lack of trust as a barrier to disclosure.

Some participants detailed a lack of trust as a reason why they were unable to find an individual to link to in order to disclose. Elsie was one of the participants to identify how a lack of trust prevented her ability to disclose: "You're not able to make any of these trusting bonds with people so then you're not going to disclose. It took me so many years to find an adult that I could trust". Elsie disclosed repeatedly as a child when she was six years of age, first to her school friend, and again to her mother, both of whom responded negatively but when she was 15, she confided in a member of staff from the children's home she lived at when she was in care and was positively responded to. This means that it took her a total of eight years to disclose again, demonstrating how trust or lack of trust was a barrier to disclosure, as she deliberately waited for an individual she felt she could trust after her earlier negative disclosure experiences. This finding shows how survivors may deliberately disclose to someone they deem trustworthy, but when they do not acquire the desired response, they will wait to disclose again, even if this means waiting for a number of years, and in some cases even decades.

An additional example of how a lack of trust affects people's ability to connect to others and disclose is Julia, who said, "you have to trust them to speak out so it's

hard... you know, to just talk to anyone". Julia's distrust for people may be linked to the notion that she was sexually abused by a close friend of her family. Thus, a reason for Julia's non-disclosure was because she did not want her parents to feel as if they had let her down by not noticing that an individual closely connected to her family was a CSA perpetrator. Trust was a factor that acted as either a hindrance or facilitator of disclosing CSA, and also prevented or enhanced links to other individuals pre- and post-disclosure.

This chapter has shown that the disclosure process means that the connections to others were heavily influenced by the CSA experiences. The findings revealed that pre-disclosure, CSA survivors actively sought an individual that they trusted before they felt ready to disclose. For some participants, they were unable to connect to others because they feared they would be disbelieved, or there were feelings of guilt or shame which inhibited the disclosure process, and their ability to link to others. The findings also showed that many of the disclosures were unplanned whereby participants disclosed as they felt an opportunity arose where they will be believed. This finding indicates the importance of ensuring that there are plenty of opportunities for children to disclose in situations where they will receive a supportive response. One main finding in this chapter is how participants disclosing at different stages received different responses, with those disclosing in childhood receiving more negative responses than participants disclosing in young or late adulthood. There may be various reasons for this finding, with one being that children may not be able to anticipate who they will receive a negative or positive response from in the same way as adults. Another reason is that participants that disclosed in childhood mainly disclosed to their mothers which garnered more negative responses, likely due to the impact on the family structure. This chapter has shown that these negative responses



may be the result of more complex factors at play, such as the relationship between mother and the survivor's perpetrator. The theme of linked lives ran throughout the chapter, which highlights that families, who are often the most closely connected to individuals especially in childhood, are significant since family members are often perpetrators, but also who survivors most often choose to disclose to for the first time. For this reason, CSA that occurs in the family home can be seen as more complex than abuse perpetrated by individuals outside of the familial home. This is the case because often, the disclosing survivor wants to be believed or protected from further CSA.

Another finding to emerge is that participants who delayed disclosure into young or late adulthood garnered more supportive responses than negative, even for those that disclosed to their mother. Although these participant's perpetrators were all outside of the family home, indicating that mother's unsupportive responses may occur when they are in a situation where they have to 'choose' between their child survivor, and their husband/son. Those that disclosed in young or late adulthood also chose to disclose to those outside of their family, such as to institutions, partners, and friends. The findings show that whilst those disclosing in young or late adulthood overall received more supportive responses, half of participants felt unsupported during their initial disclosure, indicating that more needs to be done to ensure in the public arena so that when disclosures do occur, survivors feel supported to those they are disclosing to.

The timing of disclosure, i.e., in childhood, young or late adulthood has sparsely been addressed in research. This chapter has explored differences between participants disclosing at different stages, showing that the positivity of responses may be significant for survivors post-disclosure, and those who disclosed at younger stages

were more likely to receive negative responses than those who disclosed at an older stage. Therefore, CSA disclosures can be seen as a complex, multi-faceted process which depends on the facilitators and barriers to disclosure, the survivor's relationship to the perpetrator, who the survivor is disclosing to and their relationship to the perpetrator, and the response the survivor receives. Whilst this chapter has addressed some of the implications of receiving a negative response to disclosure, the following chapters explore in further depth how society influences disclosures and the consequences on a survivor's life-course if they are unsupported when they do disclose.

## 5. The interplay of human lives and historical time periods in CSA disclosures

The purpose of this chapter is to explore participants from different generations experiences of disclosing for the first time at different historical time points. First, I explore the interplay of human lives through the lens of historical events such as when the public first learnt of Jimmy Savile's CSA crimes. Second, I discuss the participants views on the occurrence of CSA and acceptability of disclosure during that historical time period. Third, I then discuss disclosures to the criminal justice system, showing how participants had motives for *not* disclosing to the police and pursuing criminal justice, illustrating the ways in which individual and societal factors influence survivors willingness to report to the authorities. Last, I assess societal attitudes in relation to the time period in which participants were raised, in order to show how general or personal victim-blaming attitudes influence CSA disclosures.

### Jimmy Savile

A large proportion of participants mentioned the historical event of finding out about Jimmy Savile's crimes and how this impacted their thoughts about disclosure and therefore, their life-course. Jimmy Savile is known to have sexually abused vulnerable people all across the UK, including children that he had on his BBC show, 'Jim'll fix it' (Cross 2015, Greer and McLaughlin 2015). This is an important historic event, and some participants mentioned or referred to first hearing of his crimes, discussing the influence this had both in society, and on their own willingness to disclose their own CSA. Archie said this about the national impact Jimmy Savile had on the UK: "But it

all changed, the Jimmy Savile thing. I am glad it all came out because it's almost like taking an enormous, big sheet off of this country". This quote of Archie's shows that the unveiling of Savile's campaign of CSA had a significant effect on making CSA a visible issue in the UK, which to him, gave survivors an opportunity to be open about their experiences while feeling that they would be heard and believed. Similarly, Anthony credits the notion that Savile's crimes becoming public shifted attitudes toward adult survivors who disclosed CSA years after the abuse occurred: "I think sort of over the last three or four years they've [organisations in UK society] improved slightly. It's probably pre-Savile and post-Savile really. In the way it's high profile and the way they [authorities] kind of changed their tunes". Anthony's statement indicates that Savile's case put CSA into societal discourse heightening responses from authorities such as the police, which in turn provided survivors with the feeling that if they chose to disclose they would be believed. The degree to which adult CSA survivors were effected as a result of the emergence of Savile's crimes becoming public knowledge was stated by Catherine, who secondarily disclosed in the workplace soon after Savile's crimes came to light:

I'm at work and Jimmy Savile comes out and there were about fourteen men in this office and one guy said, "yeah look at all the bloody women that's going to be jumping on that? A load of money". I just couldn't take that, and I said, "I'm sorry? Why would you think that? It happened to me". I said it out loud, the first time I had done that.

Catherine's statement indicates that she disclosed her CSA experience as a direct result of an historical event being discussed within her workplace. Likewise, Catherine's quote indicates that some female CSA survivors may be accused of fabricating CSA allegations for financial gain when historical events surrounding CSA

enter public discourse, especially in the case of such a high-profile perpetrator as Savile. Maxine also disclosed to the police because of this historical event, 28 years after her first disclosure to her friends when she was fifteen years old. She said: “When the Jimmy Savile thing came out and they had operation Yewtree<sup>1</sup>, and all of the people started going to the police and then I started thinking about [disclosing] again”. In Maxine’s case, the publicity surrounding Savile’s crimes made her reconsider disclosing to the police and as a result, she was eventually able to secure a conviction against her perpetrator. Maxine’s decision to disclose because of Savile illustrates the importance of historical events surrounding CSA since societal awareness can influence both disclosures and how those disclosures are received among the people around the survivor.

Research confirms that disclosures of CSA made by adults increased following the public exposure of Savile’s crimes (Hindley and Lord 2021). Hence Savile appears to have played a key role in raising awareness about CSA which then increased adult survivors’ willingness to disclose past experiences of CSA to the authorities, even when time had passed since the abuse occurred. This event illuminates how significant historical events can be a catalyst that can impact the interplay of human lives and act as a facilitator of CSA disclosure. Thus, these findings demonstrate how the visibility of CSA in society can have a direct impact on people with undisclosed experiences.

#### Other societal events influencing the interplay of human lives.

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<sup>1</sup> Operation Yewtree was a Metropolitan police investigation into CSA, which took place in 2012 Charnock, H. (2024). Reflection: Writing the history of male sexuality in the wake of Operation Yewtree and# MeToo. Men and masculinities in modern Britain: A history for the present, Manchester University Press: 288-298.

It was not just Savile that influenced participants viewpoints on CSA and disclosure. For example, a couple of participants referred to the #MeToo movement as being unhelpful for encouraging CSA disclosures because the movement was too focused on women's experiences. For instance, Julia said that the #MeToo movement was more focused on the experiences of attractive women, rather than representing real-life adult survivors:

In the media it's often celebrities and famous people that come and sort of... freely talk about it and to me it often feels that they are not really representing... sort of erm... actually what really goes on out there. Like the #MeToo movement... I think it's good in a way, but sometimes bad... but in the media it just seems to be women who look like they've got their stuff together... they're attractive... they're... they seem well in their head, and they seem well in their mind... and they said, 'oh you know, that this happened to me when I was younger', and it just doesn't seem to actually represent what it is actually like for adults.

Julia states that she feels that the #MeToo movement may not represent the views of adult CSA survivors as the movement was closely linked to the media, which mainly focused on mentally well, attractive women, linking back to the idea that there is an ideal survivor, for example that survivors cannot be mentally unwell. This view that the #MeToo movement was not always helpful for adult CSA survivors was also shared by Steve, who said that the social movement was exclusively for women:

When the #MeToo movement was out, there were friends, I say friends, they were just Facebook friends, who were very left-wing, very feminist orientated and they would post stuff about #MeToo. I said it shouldn't just be about women,

you know, it should be about all survivors... it should be about people who have survived abuse... you know, it should be about men as well.

Steve demonstrates his belief that there should have been a societal movement that was inclusive for all genders. From this perspective, there needs to be more of a societal discussion surrounding CSA for both men and women which may help to encourage men, as well as women to disclose CSA. Although it is important to note that the #MeToo movement was crucial for enabling survivors of sexual violence to collectively tell their stories online and feel heard by society (Wexler, Robbennolt et al. 2019), it is not a movement focused on CSA specifically, and tends to lean more toward a focus on the rape or sexual assault of adult women. Thus, the #MeToo movement can be seen as a facilitator to disclosing CSA, though the findings in this research suggests that there needs to be more inclusivity for survivors. Inclusivity may include the representation of everyday survivors, i.e., not necessarily culturally attractive survivors, or including the viewpoints of men in societal movements.

The findings also revealed a number of references to other high-profile CSA perpetrators such as Rolf Harris, Michael Jackson, Jeffery Epstein, Prince Andrew, and Donald Trump. One example of how public figures can interplay on the human lives of CSA survivors lies with Maxine, who said:

I mean just look at the Michael Jackson one. Oh, the survivors, they just do it for money... it's the default isn't it? [It's] very painful cause all you want is justice and then they're trying to smear you with being greedy and it's not like you haven't been abused enough, they'll shove that in your face as well. Even though everyone hates paedophiles until they know who they are and then suddenly it's kind of less. Erm but what about Michael Jackson's music erm...

and whatever he was never convicted, well Jimmy Savile was never convicted<sup>2</sup> either, but it's well known he's a paedophile. But yeah... err... there's a lot of pathologizing [of survivors] I feel.

Maxine's quote illustrates how Maxine felt that the coverage of Michael Jackson's alleged CSA created a discourse that survivors are attempting to extort money. Thus, sometimes, the coverage of CSA in the media can have a negative effect on survivors. Such discourses may be reinforced by historical attitudes, such as the case of survivors attempting to extort money, an attitude prevalent in the Victorian era, since children who complained of CSA were often accused of being prostitutes or blackmailing their perpetrators (Jackson 2002, Delap 2018). These findings demonstrate that survivors' disclosures are sociologically interlinked due to the visibility of CSA in society. Societal visibility includes social movements, discourses, and media coverage of high-profile perpetrators.

### Generations of participants and general experiences of disclosure

As well as how historical events interplay on human lives, this chapter is also concerned with historical time periods and how people of different experiences growing up may influence CSA disclosures depending on the time period in which the participant was born. There are four different groups of participants in this sample that shows how historical time periods are pertinent to CSA disclosures. For example, participants born between 1940-1960's, 1960-1980's, 1980's-2000's. It is important to note that many participants were not necessarily sexually abused in the same

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<sup>2</sup> Jimmy Savile's crimes did not become apparent to the authorities or public until after his death, hence he was never prosecuted Greer, C. and E. McLaughlin (2013). "The Sir Jimmy Savile scandal: Child sexual abuse and institutional denial at the BBC." Crime, media, culture 9(3): 243-263.



historical time period as the one in which they disclosed, and this may well be due to changing societal norms which encouraged and supported disclosures in later time periods. Disclosures in this research were made between 1954-2017, offering a wide range of experiences.

This section looks at themes in accordance with participants born in different generations. The findings show that overall, the time between CSA and first disclosure decreased over time. For example, the younger the participant, the less time there was between first experiences of CSA and first disclosure of the CSA. This can be seen from the below figure which depicts the average latency between CSA and initial disclosure.

### 1940-1960's

The first group of participants assessed accounts for participants born between 1940-1960's. On average, participants from this group delayed disclosure by 21 years. The graphs above depict this older cohort as delaying disclosure the most, meaning that there are decades between when the CSA occurred and when they disclosed. Participants born between 1940's-1960's first disclosures occurred between 1952-2005. An analysis shows that these disclosures took place primarily throughout the 1980's.

James, born in 1946, was the participant who left the least amount of time between CSA and disclosure, since he experienced CSA in 1950, and subsequently disclosed two years later in 1952 to his parents: "I think back in those days... so, that would have been mid-fifties, [and] the world wasn't aware of abuse then". As James indicates, the 1950's was a difficult time to disclose because in his belief, society was largely unaware of how to respond to CSA. James was not the only participant to

portray UK society of the past as different to how it is currently. For example, Hayley was raped in 1961 at the age of fifteen, but she felt that she was forced to marry her perpetrator by his parents, because she became pregnant. Hayley waited 33 years to tell someone about her experiences since she said that she could not disclose her rape because she perceived society as being an unsafe space to speak out: "It wasn't uncommon that a woman would get killed by her old man if she didn't walk away... in them days us women put up with it because there was nowhere to go". In addition, Hayley stated that in her time of witnessing societal responses to CSA, she believes that CSA has been largely unacknowledged: "I think over the years, a lot of stuff has been put under the carpet, like... push it away, it'll go away. Well, that ain't true, it's still there... it gets covered up, as usual". This statement by Hayley portrays the circumstances individuals born between 1940-1960 may have faced, such as a lack of societal support for disclosure.

Kelsey exemplifies challenges that some survivors may have had to face in the past. For instance, Kelsey first experienced CSA at three years old and disclosed five years later in 1970 but was left vulnerable to repeatedly experiencing CSA after not being adequately responded to after her first disclosure: "I was seen as a prostitute. I weren't a prostitute. I were being abused. It is rape, but that's not how they used to see it". As this quote illuminates, 50 years ago, some CSA survivors were mis-conceptualised as an individual actively engaging in sex work. Therefore, older participants were not always seen as survivors which means they were left unprotected from further CSA perpetration. Kelsey also reflected in her interview on the lack of knowledge on CSA, for instance, she said that she could not remember there being any societal awareness: "I don't think people ever talked about it [CSA] on the television or in the tabloids". Kelsey's statement shows the social norms that she

was raised in, such as a lack of exposure of CSA in the media and negative portrayals of CSA survivors, preventing the issue becoming visible, which may act as a barrier to disclosure, since Kelsey felt this was why she could not be open about her experiences. Raymond was sexually abused at the age of eight years in 1963, but did not disclose until 2005, delaying disclosure by 42 years, although he was the only participant to not provide a motive for disclosure: “We need to show them empathy, something the professionals lack, and something society certainly doesn’t have. Everyone knows but they do nothing”. Raymond’s quote reflects his experiences of growing up in a society where CSA was more or less absent in the public arena, which may act as a deterrent for disclosure. Moreover, Raymond suggests that society is aware of CSA as a social issue, but there has been a lack of public support for survivors. During most of Raymond’s life, society has remained largely ignorant about CSA, and it has not been a visible issue in the UK. Thus, older participants (born between 1940-1960) overall depict negative experiences of disclosing CSA at different stages of the life course, which may be the result of the prevailing societal norms in which they grew up in. Although some suggest that there has been an improvement in how survivors are now treated and responded to.

### 1960-1980’s

This group of participants were born between 1960-1980, and their experiences provide insight into how CSA survivors have been responded to in the past. Participants from this cohort delayed disclosure on average by 15 years, disclosing five years earlier than those born between 1940-1960’s. Steve was born in 1970 and was sexually abused at the age of eight in 1978 and disclosed thirteen years later in 1991. Steve is a partially blind individual who as a child, resided in a residential school for blind children and he asserts that he had witnessed another student being sexually

abused by a teacher. He told this story: “I told my parents, and they didn’t care. Because people just didn’t care. Back then... we told the police, and they thought it was funny. They called their colleagues over. That was in the 70’s and 80’s”. Steve noted in his interview how his lack of vision meant that the police did not believe him and even laughed in response to his eye-witness account of another child being sexually abused. This response from police shows that CSA was not taken seriously 40, 50 years ago, whereas if the same incident occurred today, the police would not respond in the same way.

Similar to participants born between 1940-1960, a lack of awareness surrounding CSA was also prevalent for this cohort of participants born between 1960-1980. For instance, Anthony, experienced CSA by a policeman at the age of 10 but did not disclose until fourteen years later when he told a friend. Whilst Anthony’s disclosure was unplanned, he stated in his interview that he was prompted to disclose as his CSA experiences were often on his mind at least a year before telling his friend. Anthony said this about his experiences about growing up in the 1970’s, “you’re talking about growing up in the 70’s, so there was nothing. There was never anything in the news [about CSA]”. Similarly, Anthony experienced a lack of information about CSA in societal discourse which contributed to Anthony’s delayed disclosure as in his view, he would have spoken out sooner had he known that what he has experienced was wrong. This lack of societal coverage on CSA was similar for Allen, born in 1972. Allen disclosed for the first time at the age of 24 in 1997, after experiencing CSA at 11 years of age: “Probably about twenty I reckon. It was the first time I had ever heard of it because there was no social media then... there was no mobile phones... there was nothing there”. Thus, Allen was in adulthood the first time he heard of CSA, and as a result he had a similar view to that of other participants born between 1960-1980’s:

“None of it [CSA] was ever reported... ever. You know, it was unheard of. We used to hear rumours about the local priest and so on and so forth. It was just swept under the carpet, wasn't it?” Allen affirms that when he was growing up, CSA was ‘swept under the carpet’, meaning that CSA was left deliberately out of the public arena. For many participants in this cohort, they grew up with social norms that did not expose CSA as a social issue or emphasise the importance of disclosing CSA, both of which led to unfavourable responses to survivors when they did disclose. This finding shows the importance of ensuring that society keeps CSA in the public arena because survivors will not disclose if they do not know CSA is an issue that needs to be reported.

Further responses to CSA survivors born between 1960-1980, are exemplified by Catherine, who was born in 1966 and disclosed at the age of nineteen in 1985: “In those days, you have to remember it was back in the 80's, things were done differently. Then they came back to me and the outshot of it was no one else has come forward saying these things”. Therefore, Catherine experienced CSA at four years of age and yet her complaint to social services was not taken seriously because no other reports had been made about her perpetrators, which were all social workers, employed by the very institution to which she was reporting. The above statement from Catherine suggests that often in the 1980's, institutions such as local authorities protected themselves from any culpability and responsibility for CSA that occurred when survivors were under their care. Moreover, Catherine's treatment from institutions demonstrates power dynamics between societal institutions and individuals such as CSA survivors, illustrating how survivors may lack human agency when attempting to disclose within an institutional structure of which they are a part. Catherine goes on to provide further insight into disclosures to institutions such as the police: “They didn't do anything like that [provide support] in those days... no. All it was, was being stuck

in a room, giving a written statement in a cold... like the way you'd interview a thief". Catherine portrays professionals responding to her disclosure as lacking empathy, making her feel like she was being treated as a criminal. Her experiences suggest that during the 1980's there was not as much understanding within institutions such as the police or social services when responding to disclosures of CSA. Catherine went on to say: "This [treatment of survivors] would never happen these days" suggesting that she has observed a change in the social norms and attitudes toward CSA and survivors. Overall, Catherine's experience of disclosing was negative as she was not well responded to, constraining her human agency. Catherine stated her belief that she would not be treated as such had she disclosed in the same way today. Thus, it is the view of some participants that societal views and responses to disclosures have improved in more recent years.

An analysis of the data reveals that the 1980's was a time period that survivors did not feel supported. For instance, participant Julia was sexually abused in 1977 at the age of eight years. She states that she was not educated about sex when she was growing up: "It's much better these days. So, growing up, sex was just anatomy, you know, male and female. It was quite a taboo topic. It wasn't spoken about at school, or at Church." Julia feels that views on CSA have changed throughout her life course, because when she was younger, sex was not something she was exposed to. She attributes this lack of exposure as a reason for why she delayed disclosure by 35 years, telling her colleague for the first time in 2012. This notion of not being able to disclose due to not being aware of sex or sexual abuse was also suggested by Sean, who disclosed thirteen years ago at the age of thirty-nine, to his romantic partner:

I grew up in the 70's and the 80's and you know, no, I don't remember anything like the NSPCC<sup>3</sup> being about. I didn't even know child sex abuse was a thing when I was a young lad you know so I wouldn't have even had the words, I mean obviously 'cause I was older, I knew it was wrong. But then err... yeah, I think I heard about rape when I was about seventeen... eighteen and that's when I had that moment... when I realised what had happened to me was actually rape.

Sean's quote illuminates the importance of ensuring that what constitutes sexual abuse and violence is taught to children because he states that despite being raped at fourteen years of age, he did not comprehend that what had occurred to him was rape, until he was seventeen. The importance of societal awareness surrounding CSA

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<sup>3</sup> National Prevention for Cruelty to Children (NSPCC)

was put also stated by Maxine, who disclosed in 1987 at the age of fifteen and said that she only disclosed because of the historical event of ChildLine being launched:

When ChildLine was launched... like at that time there was a load of publicity around child abuse and so that was the first time I knew what child sexual abuse was and I was a bit like 'oh my god that's what has happened to me'.

Maxine's quote demonstrates how important it is to ensure CSA is taught to children and that they have a platform to disclose. Hence, CSA appears to have been more or less absent from the public arena for both participants. The absence of discourse about CSA in the social domain impacted the ability of these participants to understand their abuse and subsequently make a disclosure.

#### 1980-2000

The average latency between CSA and disclosure for this group of participants was 7 years. Many participants from this generation did not discuss their childhoods in the same way as participants from other generations, which may be because their childhood experiences are more recent and more painful to discuss. Participants from this generation were more focused on discussing their disclosure experiences and their difficulties in adulthood (explored further in Chapter 6). Less latency between time of CSA and initial disclosure may partly be due to shifting attitudes toward CSA in society and increased coverage in the media which may have made participants feel like they would receive more support if they were to disclose. Nonetheless, these participants demonstrate what life was like for them growing up as a CSA survivor. For instance, one participant provides insight into what it was like for a child to be unaware of what grooming was and she therefore could not anticipate what was happening to her. Grooming takes place in many forms, for example, an adult perpetrator seeking



to groom a child may pretend to be a young child themselves; they may buy gifts for their survivors or take them on outings/holidays; give advice or show understanding on an issue that a child may show they need; or they may simply provide attention to the child (NSPCC, 2022).

Elsie disclosed for the first time in 1987 to her mother, after being raped by her older cousin at the age of six, but nothing was done to protect her. She then experienced grooming and CSA by numerous perpetrators. She said this about her experiences of being groomed throughout the early years of her life-course: “[The idea of] grooming didn’t exist back then because it didn’t exist in the vocabulary. As an eight to ten-year-old, I wouldn’t have known what he was doing was grooming”. Further, Elsie points out that even in the early 2000’s, she felt that the attitudes existing at that time would mean she would be perceived to be at fault for her CSA and so she did not disclose her experiences to the authorities: “I am talking about 1999 still, or early 2000’s. So, the attitudes were like ‘well obviously it’s your fault’”. As Elsie explains, in the time period in which was she growing up, she was exposed to attitudes in society that point blame at the survivor, and this contributed to her lack of disclosure to the authorities. Elsie’s account demonstrates that participants born between 1980-2000, were still exposed to negative attitudes toward CSA and had not changed much from the attitudes faced by those from older generations. Although another reason why Elsie did not disclose to the authorities because when she disclosed to her mother nothing was done about it, and this hindered her ability to disclose to a stranger, because the person closest to her did not believe her.

Similar to Elsie, Peggy felt unable to disclose due to feeling that she would be perceived at fault for what occurred to her. Peggy first encountered CSA at the age of six by her father, and she said that her mother knew about it, and it was only when

Peggy attempted suicide that she was placed into care aged twelve. As explored in Chapter 4, Peggy disclosed to ChildLine when it first introduced in 1986 (Harrison 2002), but the call handler put the phone down as they thought that Peggy was a prank caller. This experience of Peggy's indicates that whilst societal institutions were moving in the right direction by sending out the message that CSA was something to be disclosed, they still had a long way to go in providing support for survivors. Peggy's experience of disclosing also shows a disconnect between how CSA should societally be dealt with and how CSA is actually dealt with. It was when she was in care that Peggy then went on to be sexually abused by multiple perpetrators. She said this about her experiences: "In the early 2000's, there was still very much that attitude that girls who were involved in these kinds of things, were making a life-style choice and because they liked the attention, or that they were just sluts". Peggy was a sexually exploited child and as a result of the attitudes she was exposed to in her surrounding environment, for example, by the care workers looking after her, or in public discourse, she was treated as if she were a prostitute rather than a CSA survivor. This finding may be related to historical attitudes as many CSA survivors were treated as liars and as if they were attempting to extort money (Jackson 2013).

Therefore, the experiences of participants born between 1980-2000 are in stark contrast to the participants from older generations because the latter mainly pinpointed a lack of CSA in the public arena. Whereas those from younger generations have grown up with CSA in the public eye due to charities such as the NSPCC and ChildLine and even though changing social norms meant that they were aware that CSA is something to be disclosed, societal attitudes surrounding CSA were slower to change, especially at the individual level, which meant that they often received negative responses when they did disclose. Further research surrounding survivors from

younger generations is needed to see how much society has improved its attitudes surrounding CSA disclosure.

### *2000-2020*

I recruited participants in accordance with when they disclosed across the life-course, rather than by what year they born in. For this reason, why I may have only had one participant born between 2000-2020 was because younger people may have not wanted to speak about the CSA since these experiences may be more recent and thus rawer in comparison to older people. Further research is required on the experiences of survivors from younger generations because we can then determine to which extent social attitudes and policies and laws on CSA have changed in the more recent past.

Sally was sexually abused at the age of thirteen and disclosed five years later in 2016. She offers a positive perspective on disclosure because she has never received a negative response when she has told people about her experiences: “Overall like it [responses] has been positive. People have only been supportive and helpful”. Sally’s statement shows that she personally received a positive response, but in her next statement she asserts that whilst the attitudes surrounding CSA have improved in recent years, there is still a lot of improvement to be done. She says: “In the media I would say that the shift has been positive, but in society I think there is still a lot of taboo around it. So, I think society has a very long way to go.” This quote highlights Sally’s belief that there has been a societal shift in the perceptions and treatment of CSA survivors, but that there is much more to be done on this issue. Further research is required in order to draw out findings for younger CSA survivors.

### *Criminal justice across historical time periods and generations*

This section looks at how participants have experienced disclosing to the police in hope of achieving criminal justice. Criminal justice across time periods may help to show whether there are any similarities and differences between how participants have made decisions in regard to formally disclosing to the authorities and what their underlying motives may be. Decisions made by participants to formally disclose showed three themes as an outcome of disclosure: the first is lack of disclosure to authorities, i.e., choosing **not** to report to the police; second, disclosing to the police but the police or Crime Prosecution Service chose not to prosecute with a No Further Action (NFA) determination; and third, disclosing to the police resulting in prosecution. It is unclear how many of the participant's cases that resulted in a prosecution recommendation from the police actually went to trial in crown court.

#### *Undisclosed: Motives for **not** pursuing criminal justice*

This section examines motives for not disclosing to the police. Just over one third of participants chose *not* to pursue criminal justice. Motives for not disclosing to the police varied. For instance, some survivors felt that they would not be believed by the police, some felt that there was a lack of evidence in their case, and some saw it as not worth reporting due to the death of their perpetrator meaning that no justice could be had.

Participants born at different points in time felt as if they would not be believed by those working within the UK criminal justice system. For example, Hayley was abused 59 years ago at the age of thirteen but did not disclose until she was 46 years of age. Hayley explains that her experiences remained undisclosed to the police for so long because at the time she believed the police would not do anything because she was repeatedly molested by strangers as a young child and eventually raped as an older child by a man ten years older. This same man later became her husband as

she was forced by her family to marry him once she became pregnant from the rape. It is important to note, that prior to the pregnancy, Hayley did not ever have consensual sex with her rapist, and she said this about 'choosing' not to report her CSA experiences to the police: "Oh no, they [police] wouldn't want to know... they'd just say that it's a domestic... they'd just say sort it yourself. There was nobody there for you in them days". This quote illuminates the societal attitudes surrounding CSA at the time Hayley was abused in 1963, and as a result, Hayley felt like she was unable to report her experiences because she felt that the police would have treated the rape as an issue between boyfriend and girlfriend, rather than as a victim-perpetrator relationship. A prominent factor in motives for *not* disclosing to the authorities for participants born from all historical points in time was the fear of not being believed, exemplified by James born in 1946, who was sexually abused at the age of six by his schoolteacher in 1952: "I'd been so let down I thought I'd not be believed. But I guess I just told myself no... I got to get on with it by myself". James reflected in his interview that he felt like he had to solitarily cope with his abuse due to his belief that he would not be believed.

Participants from 1960-1980 also felt like that they would not be believed if they reported their experiences to the police, as illustrated by Lisa, who was born in 1973 and disclosed in 1992 at the age of 19 years: "For me to have disclosed, and I think very strongly that I'd not be believed by the authorities. I honestly think they would not take me seriously". Lisa demonstrates that in the 1990's survivors often did not have much faith in the criminal justice system, which may be a result of the attitudes from preceding years.

Elsie born in 1979, also portrays the police as not believing survivors as a motive for a non-disclosure for criminal justice. Elsie initially disclosed in the 1985 at

the age of six, first to her school friends and then to her mother, and no one responded positively to her disclosure. She then went on to disclose again at the age of fifteen in 1994, when she taken into care, but she felt professionals were more focused on Elsie's access to support than reporting to the police: "It was more of a case of 'oh let's get you help'. I don't ever remember anyone saying that to me 'you should tell the police because it was a crime'". As Elsie points out, when she was a child and was disclosing her experiences repeatedly, she was not asked if she wanted to disclose to the authorities because a crime had been committed against her. Even now, Elsie feels like she cannot disclose to the police due to fear of not being believed:

I already know in my head that there's lack of evidence so it's just pointless. I still don't feel a hundred percent ready to go to the police and say, "this is what happened to me" because parts of me thinks they won't believe me.

Elsie's statements reveal that she struggles with whether or not to go to the police about her CSA experiences, asserting that even today she feels like she would not be believed, which was also what held her back from formally disclosing earlier in life. Another motive for not disclosing CSA was that the perpetrator had died. For example, participant Julia was born in 1968 and had no agency in gaining criminal justice for what occurred to her as a child because the perpetrator was deceased. However, she asserts that even if her perpetrator was alive, she believes she would still not have disclosed to the police: "I don't think I would have done, mainly because a friend of mine went through that process and it's a nasty process. They bring you in, you describe in detail what's happened to you and then they drop you". Julia added that she felt relief after hearing of her perpetrator's death: "In many ways I was relieved... you know there was no chance of bumping into him." As Julia explains, she felt that the criminal justice system would have been difficult to navigate. Hence, she felt relief

from her perpetrators death because she knew that she would not see him again, though he was not prosecuted for his crime against her, and she stated that she did not get the opportunity to confront him which she felt was a misjustice.

Julia was not the only the participant to feel that they lacked agency in obtaining criminal justice because of her perpetrator's death. For instance, Natalie was born in 1983 and when she disclosed, she discovered that her perpetrator had dementia and then died. Natalie said this about her experience of not being able to report to the police: "He died before ... before we got the chance to go to the police or anything... like we already knew we [her and her sister] couldn't go to the police because he had dementia". Thus, for Julia and Natalie, they felt that they could not disclose to the police because either their perpetrator was unwell or dead. Another factor in deciding not to disclose was that participants felt that the criminal justice system was not fit for purpose in so far as there is a general consensus that there is usually a lack of physical evidence that supports the survivors statement of CSA and criminal justice systems are designed to rely heavily on physical evidence of crime. For instance, Darren born in 1983 and first disclosed his experiences in 2000 at the age of seventeen, said this:

If I thought anyone else was in danger, I would say [disclose to police]. So, there's no point. Not from what I can see... Not getting the law involved... I don't believe in that kind of society. It's always about no evidence or word against word. It depends on what you think justice is.

Darren does not believe in a society where the police should be involved which he stated that he has little trust for those in authority and believes in unconventional types of justice, such as through violence. This quote of Darren's also shows that he does not have much faith in the criminal justice system because he stated that he feels that

the lack of evidence to support his experience of CSA means that the criminal justice system will not prosecute his perpetrator. For this reason, survivors may decide that criminal justice is not something that they wish to pursue as the system is often focused on the burden of reasonable doubt (George and Ferguson 2021). Testing for the burden of reasonable doubt means ensuring that there is no alternative explanation that the crime occurred, and often with CSA this is difficult to achieve due to a lack of physical evidence (Cossins 2020).

The decision behind opting not to disclose to the authorities is made more complex by the interplay of families. For example, for many participants the perpetrator was a family member, and they did not want to affect other family members by involving them in the process of criminal justice, or in some cases they simply anticipated a negative response from other family members. For instance, Charlotte, born in 1990 and disclosed in 2008 to her sister after experiencing CSA for years, perpetrated by her father. The response she received from her sister influenced her to not report her CSA to the police: "I didn't [report to the police] because my family was threatening me. My sister was quite intimidating and when she started threatening me, I obviously started regretting saying anything and it just depressed me for years". Charlotte's negative response from her sister may have been because Charlotte's sister did not want to view her own father as a perpetrator which ultimately discouraged Charlotte from disclosing to the authorities. Further, Charlotte, unlike her sister, was placed into foster care at a young age and so did not have as much of a link to her sister growing up. Hence, Charlotte's sister had more of a link with their father, which may be why Charlotte's sister reacted the way that she did. Charlotte demonstrates that there are many, complex reasons why some CSA survivors choose not to disclose



to the police. Similarly, Faye opted not to pursue criminal justice due to pressure from her family. She said:

I always wanted to go to the police, but then [there were] the threats [from my family members] and that became too much. If I were to go to the police now, then everyone in the family would know [what was done to me].

Faye's experience of being sexually abused by her cousin when she was a child, combined with her fear that other family members would find out, was why she decided not to disclose to the police.

Non-disclosure to the authorities was a decision also made by Sean, who was abused by his father: "I didn't want that for the rest of the family, I didn't want them having to go through [a criminal case] either. Like I just didn't want to open that can of worms". Sean's assertion that he did not want to disclose in order to protect the rest of his family suggests that criminal justice is not as important to some survivors as is the family unit. For Sean, disclosing to the authorities also meant addressing these experiences with his family, which he did not feel would be beneficial to him or to them. Thus, some participants in this research did not disclose to the police because of complex, family relations, and this is especially true when the perpetrator was a family member.

Overall, while some participants felt that criminal justice was not an option for them because either their perpetrator had died or family members would know, other participants did not consider prosecution through the criminal justice system as important, hence their experiences remain undisclosed to the police. Moreover, this theme demonstrates that to some adult survivors, justice was not an option because

there is fear that a lack of evidence meant that they would be enduring trauma for no reason, or that they would not be believed by people working in the justice system.

### *Disclosures to the police*

Just over half of participants reported their experiences to the police and the experience of reporting was different depending in which time period the participant disclosed. This section of the findings also looks at how diverse adult survivor's experiences of criminal justice can be due to historical time periods, which can help us assess how CSA has been conceptualised and responded to over time. Figure 5.1 depicts the time periods that participants from different generations disclosed to the police, in order to seek justice through the criminal justice system.

**Figure 5.1: Time period of participants criminal justice disclosures**

Initial Disclosure	Police Disclosure	Justice outcome
1971	1972	Justice
1974	2018	NFA <sup>4</sup>
1979	1995	Justice
1986	1991	NFA
1987	2015	Justice
1988	2015	Justice
1989	1991	NFA
1990	2009	NFA
1991	1999	NFA
1992	2015	NFA
1994	2012	NFA
1997	2018	Justice
2000	2012	NFA
2000	2014	Justice
2006	2007	Justice
2009	2011	Justice
2010	2012	NFA
2016	2016	Justice

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<sup>4</sup> No Further Action (NFA).

For the majority of participants that reported their experiences to the police, there was time between the initial disclosure to the person they first told about the CSA and when they disclosed to the police. In this research, disclosures to the police occurred between the years 1971-2018 and on average, participants took 15 years from their initial disclosure to disclosing to the police. A large proportion of police disclosures took place between 2012-2020, suggesting that the Jimmy Savile case which first became public in early 2012 after his death in 2011 (Dean 2023) had a direct impact on participants willingness to disclose. Half of police disclosures in the sample occurring between 2012-2020 resulted in a criminal justice prosecution, and the other half were told that no further action would be taken. The average amount of time between initial disclosure and disclosure to the police differed between participants from different generations. For example, participants born between 1940-1960 waited on average 15 years, whereas those born between 1960-1980 waited 18 years, and participants born between 1980-2000 waited an average of 12 years. Thus, figure 5.1 shows that the majority of police disclosures occurred in more recent years, and after the media coverage of the Jimmy Savile case.

#### No further action

‘No further action’ accounts for participants who reported their experiences to the police but were told no further action would be taken by the Crown Prosecution Service (CPS). Half of the participants who formally disclosed to the police were told by the CPS that no further action would be taken and that they would not receive criminal justice. Receiving the decision that their perpetrator would not be charged and prosecuted for their offences, meant that these participants felt that their human agency was constrained because they took the time to report the CSA but had no agency in the decision by the authorities to discontinue the criminal justice process. A

couple of the participants born between 1940-1960 who received no further action as an outcome arising from disclosing CSA to the police. The first of these was Jane who was born in 1955 and went to the police for the first time in 2014 and was subsequently told that charges would not be brought against her perpetrator because he was dying:

The police had spoken to him, and [they] said 'no... no, that it's not going to court.' I thought 'well he's not going to go to jail'... you know... I wanted to see him in court... I wanted to face him in court as this little frail old monster... and I'm the strong one that way... I wanted to look at him in the eye... I wanted to have that chance, but I'll never get it because he's dead which is a shame.

As Jane indicates, she could not receive criminal justice because her perpetrator was dying and therefore it was decided by the CPS that it would not be in the public's best interest to prosecute.

Half of participants born between 1960-1980 who reported to the police received a no further action outcome, one of which was Catherine, who was born in 1966, and first disclosed to her foster mother aged 10 in 1976. Catherine did not formally disclose until 1992 and does not consider it a positive experience as she felt that the police officers dealing with her case did not adequately respond:

If you read the statement, it was like no one gave a shite... they didn't ask the right questions... they didn't, err... they didn't understand. There was no, how does that make you feel? There was no... do you know what I mean? There was no elaboration on anything I said... it was like giving a traffic incident report.

Catherine's experience of disclosing to the police was negative since she felt they either did not believe her, did not care about her, or that they were not sufficiently trained in how to respond to a survivor reporting CSA. Catherine's experience shows

how some survivors were treated by the authorities in the 1990's. In contemporary society this type of response from the police would be less likely to occur, as police officers are specifically trained in how to respond to survivors of this type of crime (Mathews and Collin-Vézina 2016). Catherine went on to say that she felt like the criminal justice system revictimized her because of this response from the police: "The legal system, the lawyer's system, the police system, you're revictimized each time. And you have to open yourself up being put back down, each time you come forward again. So... I'm revictimized myself. I shouldn't feel that way". Catherine's police disclosure was a negative experience because of the stress she endured throughout her investigation, as the CPS made a determination of no further action. Moreover, Catherine stated that she felt like there was perhaps too much formality in the police's approach, which provides insight into how police disclosures were dealt with in the 1990's.

A lack of empathy from police when responding to allegations of CSA occurring years prior was also noted by participant Amber, who was born in 1966 and first experienced CSA aged 11. Amber did not disclose to the authorities until 16 years later, in the 1990's. Amber said this about the response she received by the police, "I found them disinterested. It was like... Why [are you reporting this] now?" Amber was abused by her stepfather and the investigation of her case was halted by the police when Amber's sister withdrew her supporting statement, resulting in a decision of "no further action". But as Amber highlights, she felt that the police were disinterested because of the amount of time that had passed since the abuse occurred regardless of her sister's withdrawal of her statement. Amber's disclosure experience demonstrates the complex family dynamics involved in prosecuting CSA because often, the perpetrator is a family member which may create additional barriers for

survivors to obtain criminal justice. Amber's experience also suggests how the criminal justice system was not always concerned with the well-being of the survivor in the 1990's, rather, the focus is on whether the perpetrator can be successfully prosecuted. Whereas in current society, agencies such as Victim Support are now more involved with survivors and can refer them for additional support, a service that was not as readily available in the 1990s (Mawby 2016).

Another participant who received no further action as a result of disclosing to the police was Steve, born in 1970. Steve disclosed to the police in 2014 that he had been sexually abused by his foster brother, 23 years after his initial disclosure to his parents:

I wasn't best pleased. Particularly because they decided not to do anything about it. You know, I'd have... my mum died soon after that. I'd rather she went to her grave not knowing, because they [his parents] found out that for four years, I was being sexually abused... under their roof without them even knowing about it.

Steve's story portrays the complexity surrounding reporting CSA to the police because survivors are not just faced with being interviewed by the police but also worry about their family members finding out and the potential harm it may cause to the people they care about.

Participants born between 1980-2000 and their experiences of receiving a no further action shows that a lack of physical evidence often results in a lack of prosecution. For example, Jodie disclosed to her mother in 2012 who then reported to the police on her behalf: "They took a statement from me and invited him in... erm and he denied the charges. Then they got back to me and said, "Sorry, there's no evidence,

there's nothing we can do." Jodie goes on to demonstrate the negative impact this outcome had on her life: "I think it had a massive effect on me. Err... the denial of it and the injustice of it... I think has been just as damaging as the actual abuse." Jodie's experience of the justice system just over a decade ago was noted as traumatic for her since she had to go into detail about her CSA experiences when providing her statements to the police, only for her efforts to, in her view, amount to nothing.

Jodie was not the only participant born between 1980-2000 to report negative experiences of disclosing CSA to the police as exemplified by Peggy's case. Peggy was sexually abused repeatedly, first by her father and then by strangers when she was in care which she attempted to disclose to the police whilst the abuse was occurring:

I did make reports, but because I have so much sexual abuse history, it was hard to know where to even start... and I gave the police a little bit of information about a couple of things, and they were very much impatient and rushing me and kicked me out before I had finished, and they didn't read my statement back to me and things like that... they were rolling their eyes at each other as I was talking. So that was a very bad experience, and I didn't bother going back.

Thus, Peggy feels her overall experience of disclosing to the police in the 2000's was negative which affected her ability to find justice through the criminal justice system. It is important to note that these findings suggest little improvement over time in how police responded to CSA survivors, with many survivors met with a lack of empathy to their disclosures.

There are often complex reasons why the CPS decides not to prosecute alleged CSA perpetrators. For example, participant Amy was born in 1988. She first disclosed

her CSA experiences to the police in 2011 at the age of 23 and was told that the issue was with the reliability of the witnesses in her case:

They investigated it for like two years before they dropped the case. They said that they didn't have enough to do anything with it. All the evidence they had apart from my statement were from children I think they [the police] were quite embarrassed about it when they rang me. Do you know, they were, like, really nice all through the investigation and then in the end they wanted to get off the phone quite quickly... you know, not really explaining to me why there wasn't enough evidence.

Amy explains that the witnesses in her case were deemed less credible because they were minors and therefore charges were not brought against her perpetrator. One reason many survivors are unable to obtain criminal justice is because perpetrators ensure there are no witnesses to support the survivor's disclosure as the sexual abuse occurs in secret where no one else is around. Hence, it is the perpetrators word against the survivors which leaves the police with no option but to not proceed with the case, demonstrating the complexity of some CSA cases that are given a determination of no further action. The main reason that these participants were told that no further action would be taken with their cases, was that there was a lack of evidence. However, there are differences in how survivors were treated over historical time periods, with those receiving a no further action in more recent years stating that they received more supportive responses than those who disclosed in earlier years.

## Justice

Analysing the experiences of participants born from different historical time periods means that we can see how attitudes may have changed over time. As figure 5.1



shows, half of participants who reported their experiences to the police received criminal justice. Only one participant born between 1940-1960 received justice and that was Raymond, who was born in 1955. Raymond was also the only participant who's perpetrator plead guilty to charges of CSA:

In 1964 my father was arrested for buggary, cause of course that's what they called it back then. It was the fact that this was there, in black and white what he had done to me... and he pleaded guilty to get a lower sentence.

For Raymond, part of receiving justice was being able to receive compensation from the Criminal Injuries Compensation Scheme (CICS). According to the Survivor's Commissioner (2021), survivor's who's abuse occurred before 1979 were refused compensation until the UK government abolished the 'same roof rule' in 2019 (Smith, Daly et al. 2022). The same roof rule meant that for survivors where CSA occurred in the same household as their perpetrators and it occurred before 1979, claim for compensation were not allowed, even if their perpetrator had been found guilty in crown court (Rossetti, Mayes et al. 2017). Thus, this rule affected Raymond as he was not able to apply for compensation until the rule was abolished in 2019:

I got a pay out from the criminal injuries, but I couldn't for years because if you were raped by a brother and they lived under the same roof as you, they wouldn't give you compensation because of the same house rule. And it took me the best part of fifty years to get it erm... it had a major impact on me because I was faced with what happened half a century ago.... And I got a pay-out nowhere near it deserved. But the money was never the point, for the first time it was in black and white.

Raymond's experience here shows that whilst his father was prosecuted in crown court, justice did not just include criminal justice, as he wanted to obtain what other survivors were entitled to and be financially compensated for the difficulties he faced over the years as a result of experiencing CSA. Perhaps, because Raymond's father received a low sentence for the rape of Raymond, Raymond sought other lines of justice, such as receiving compensation. Yet he was prohibited from applying for compensation, ultimately constraining his human agency. His agency remained constrained until the law changed in 2019. The law changed for survivors sexually abused under the same roof as their perpetrator prior to 1979 because a CSA survivor took the CISC to high court, which in turn resulted in the rule being abolished for all survivors, as part of the Victim Strategy (Gov.uk 2019).

Catherine was also prohibited from claiming criminal compensation due to the same roof rule: "well apparently they had a statute of limitations too... it happened under the same roof... it was the law". Catherine was still fighting for criminal compensation at the time of her interview. These stories demonstrate that policies and laws can be pertinent to historical time periods as those from the younger generations were born after 1979 and thus have never had to deal with the same roof rule.

Two thirds of prosecutions occurred between 2010-2020, with the rest of the prosecutions occurring between 1970-2010. This finding shows that the decade preceding 2020 has been significant for adult survivors as most participants disclosed during this time period, which may be linked to the societal emergence of Jimmy Savile's CSA crimes. These findings show that the passing of time between CSA and police disclosure in some cases, has not had an effect on the ability to prosecute. For example, Anthony first disclosed to the police in 1999, which resulted in the decision of no further action: "It [the police investigation] was six months of nothing, it was, err...

their conclusion was that he'd already been convicted previously, and the CPS wasn't going to get him prosecuted [again]". It was not until fifteen years later in 2014, that the police decided to reopen his case due to there being multiple other survivors: "They started to reinvestigate what happened to me in 2014. In 2016 he was convicted again... but then three other people came forward during the time the police were investigating, and he got twenty years". Anthony's quote illustrates how justice is not necessarily a linear process and how some survivors may not have access to criminal justice when they initially report their experiences to the police. However, that does not necessarily mean that they will never have the opportunity for justice through the criminal justice system. Additionally, other survivors coming forward can increase the reliability of evidence and impact whether or not it is in the public's interest to prosecute, which are the two main criteria used by the Crown Prosecution Service to decide whether charges are brought against an alleged perpetrator (Clough 2021). Anthony, born in 1966 and disclosed in 1990 for the first time, states that obtaining criminal justice was life-changing: "It changed totally and absolutely it changed my life, it's gone from strength to strength since". Therefore, for Anthony, justice had a positive impact on his life, which enabled him to be able to begin the healing process. Moreover, Maxine, born in 1971 said this about her experience disclosing to the police in 2015, 39 years after the CSA she experienced: "I went to the police and unfortunately my family weren't able to support me in the way that I wanted them to. He was convicted, but I wasn't happy with the sentencing". As Maxine illuminates, whilst she was content with a guilty verdict, she was less content with the sentencing of her perpetrator because he was only sentenced to four years imprisonment, which Maxine felt was not a long enough sentence given the crime he had committed.

Furthermore, Maxine goes on to say how she also found the process of engaging with the criminal justice system really difficult:

It's [the justice system process] slowed down. Because it is hell going through that and... because my court case...it took two years, it absolutely was hell and I hated it, but I did get a conviction, so I don't regret it. But it was really hard.

Maxine's experience with the criminal justice system shows that even in more recent years, the process can be long and exhausting for the survivor, which Maxine stated in her interview was traumatic. To compensate for this stress, she ensured that she was able to have her perpetrators crimes reported in the media, which gave her more of a sense of justice than gaining criminal justice did, because she ensured everyone would know her perpetrator was a child sex offender. Another participant to gain criminal justice in recent years was Allen, born in 1972. Allen went to the police in 2018, 19 years after his initial disclosure in 1997. Allen said this about his experiences: "I think that I won't be able to fully heal. Him getting thirty-one years... It just doesn't really matter to me. You know, I can't relax or be happy or content until he's actually dead". Allen, like a couple of other participants, asserts that death of his perpetrator is the only thing that will allow him to heal. This reaction to CSA may be linked to the death of the perpetrator meaning that the CSA survivor knows that no further harm can be caused. So, for Allen, a greater sense of justice would have been obtained by his perpetrators death, rather than a prison sentence, suggesting that a prosecution does not always facilitate healing.

Whilst participants born between 1980-2000 agree that current societal views have changed how CSA is perceived and responded to, a few participants still portrayed the criminal justice system as difficult to navigate. For example, Kitty (born

in 1988) went to the police in 2011 and even though she obtained justice, she was not treated in the way she had hoped she would be:

I was treated by the authorities disgustingly. I feel that the authorities... like the police, I feel that they have little training on how to deal with people that have experienced things of a sensitive nature. I don't think that the authorities have a real understanding of the consequential effects of going through something traumatic like that, and how that can actually affect someone's mental health.

Kitty portrays the police as not understanding the trauma an individual endures as a result of experiencing CSA, which resulted in her feeling unsupported, suggesting that although the police have much more awareness and empathy than in the past, they may still need more training on trauma-informed practice. Jackson (born in 1984) was also able to secure criminal justice, when he disclosed in 2014, but he felt that "the sentence was quite short and disappointing". Jackson demonstrates his disappointment with the sentence his perpetrator received for the CSA crimes against him, but he does clarify that he has no regrets as his main motivation for a conviction was to ensure his perpetrator would not revictimize another child: "It was my sister having her first child and we were taking about the fact that he was still out there and potentially likely to still be hurting children". Jackson was able to secure criminal justice since his sister was also sexually abused by the same perpetrator, hence Jackson and his sister were able to support each other throughout the process. Jackson indicates that survivors often consider the potential risk of harm to future generations when deciding whether to disclose to the police since they do not want their perpetrator to continue to victimize children. Likewise, Sally born in 1997 was also motivated by the thought that her perpetrator may target another child:

It wasn't that kind of sense of justice that, whatever he did to me, he is behind bars because of me. It was the sense that okay, this happened by this person and at least it won't happen to someone else.

Thus, Sally felt relief from obtaining criminal justice as she knew her perpetrator more from the reassurance that he could not sexually victimize another child when behind bars than from the justice she gained in her own case. Taken together, the results looking at criminal justice show that CSA survivors born from different historical points in time found the process difficult to navigate, either because of long waiting times for their case to reach trial, or because of police or lawyer responses to their disclosures, although those who disclosed in later generations did not face as many obstacles as those reporting in earlier generations.

This section of the chapter addressed both reasons for opting not to disclose to the authorities and participant's decisions to disclose to the police. Results showed that for those that did not want to disclose to the police, there were various reasons why, such as not feeling that a prosecution was necessary, or not wanting family members to find out about the CSA experiences. This research also showed notable differences between participants born at different historical time periods. One example of this is the way in which older participants were affected by the 'same roof rule', meaning that those from older generations could not apply for criminal compensation for abuse done to them by someone living in their household until the law was eradicated in 2019. These findings have also shown that historical events such as Jimmy Savile have had a direct impact on adult CSA survivor's willingness to disclose.

### Victim-blaming attitudes across generations of participants

An analysis of the interplay of human lives and historical time periods across participants means that we can assess how attitudes towards CSA and CSA survivors have developed across the life-course and how CSA was responded to ten, twenty, thirty, forty and fifty years ago. One main difference that can be seen in the data is the exposure of victim-blaming attitudes to participants born at different times. The analysis showed two emerging themes: general and personal victim-blaming. General victim-blaming refers to participants who spoke about other survivors in society and how they have been publicly blamed, while personal victim-blaming refers to participants personal experiences of being blamed for the CSA by those with whom they interact in their day to day lives.

Figure 5.2: Participants born from different time periods and their experiences of general and personal victim-blaming.

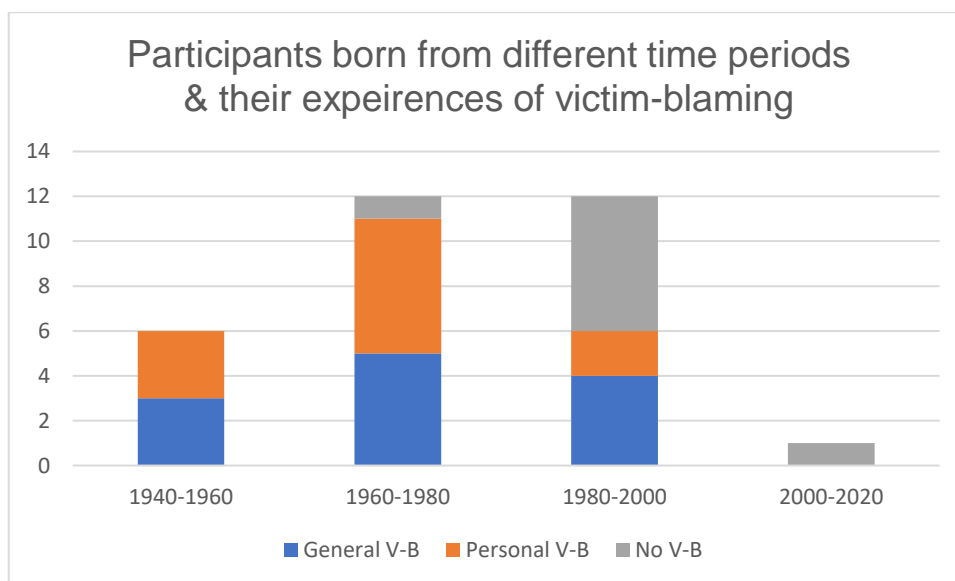


Figure 5.2 illustrates that general victim-blaming attitudes appear to have decreased over time, because younger generations did not experience as much exposure to victim-blaming attitudes in society as older generations. Fifty percent of participants born between 1940-1960 spoke about negative attitudes toward survivors

in the media and society more generally, and 50 percent spoke about personal experiences of victim-blaming, meaning that they were blamed for the CSA they experienced by those around them. As discussed earlier, these older participants delayed disclosure the most, which may partially be explained by their exposure to both general and personal experiences of victim-blaming. These participants were also the eldest cohort of the participants and their experiences of being exposed to victim-blaming attitudes shows how people conceptualised and responded to CSA survivors in that historical time period. For instance, Raymond said this about general victim-blaming, “Like the kind of society we live in likes to somehow find fault with or blame the survivor. I mean, like not believing survivors”. Raymond asserts his belief that society blames survivors, which may be related to his age, exposure to social attitudes in the past, as well as how survivors have historically been treated in different time periods. Likewise, Michelle said this which contextualises the ways in which general victim-blaming occurred more in the past than in recent years:

We tend to focus in on the person who’s been raped or abused in any way. I think that the newspapers need to say that the rapists need to stop raping. But not so much in the younger generation who have got more out there. You have got somewhere to go [for support following abuse], whereas I didn’t have anywhere to go.

Michelle’s assertion that younger survivors have more support than older survivors may be related to the general victim-blaming that older survivors have endured throughout their life-course. Participants born between 1940-1960 also had experiences of personal victim-blaming, as exemplified by Hayley, who was blamed by her own mother for being sexually abused:



When I phoned my mum at home and I said ‘mum, you can’t marry him’. I didn’t call him a paedophile because I didn’t know what that word meant. I said, ‘he’s touched me, and she just turned around and called me a liar. My mum ended up smacking me in the face because I wouldn’t talk to him and then she sent me to his [house] again [perpetrator].

Seventy-two-year-old Hayley provides insight into her life in her earlier years, wherein she was not believed, and instead was blamed, assaulted, and put in a situation where she was likely to be abused again. Hence some CSA survivors may be blamed by individuals close to them, showing personal experiences of victim-blaming. As Figure 5.2 illustrates, ninety percent of participants born between 1960-1980 suffered some degree of victim-blaming throughout their life-course. Quite a few of these participants had personal experiences of victim-blaming. One example from lies with Steve who noted that he felt he experienced victim-blaming by his therapist: “She wasn’t exactly professional. She allowed me to get further traumatised and even [engaged in] survivor-blaming”. Steve did not elaborate the ways in which he felt he was being blamed by his therapist for his CSA experiences, but his statement nonetheless demonstrates how survivors perceived personal experiences of victim-blaming. Additionally, almost half of participants born between 1960-1980 were exposed to general victim-blaming attitudes. One example lies with Sean:

I think the longer you wait to speak out the less likely it is others will believe you. Again... it’s that ‘why did you take so long to speak up?’ It’s victim-blaming. Yeah, I do think it’s harder for an adult because well adults are more likely to be doubted cause I think other people don’t understand why [they waited to disclose].

Sean feels that many survivors are doubted because they did not disclose in childhood and are likely to be blamed for not disclosing sooner. He goes on to say that he does not believe other people understand why CSA survivors delay disclosure into adulthood, which provides insight into how some survivors may generally feel about how they are perceived and responded to by non-survivors. Although, as has been explored in Chapter 4, participants that disclosed in childhood were less likely to be believed than those who disclosed in young or late adulthood, indicating that there may never be an ideal time to disclose.

Another participant born between 1960-1980 to portray general experiences of victim-blaming was Lisa, who said this in her interview: “We [CSA survivors] get blanked everywhere we go. Society remains one that blames women”. Lisa ascertains that feel angry at the way society ignores and puts blame on women for being sexually assaulted and abused, which she stated stems from historical attitudes surrounding CSA survivors.

The notion that societal attitudes have improved is reflected in Figure 5.2, since fifty percent of participants born between 1980-2000 did not mention any exposure to either personal or general victim-blaming attitudes. These participants show further reduction in victim-blaming attitudes suggesting that there has been an improvement in how survivors are treated over historical time periods. Nonetheless, a couple of participants discussed experiences of personal victim-blaming. Peggy said this: “There was not much point in disclosing when I knew that people already knew and were just going to blame me anyway”. Peggy’s perception that she would be blamed stemmed from her experience of being sexually exploited whilst in the care system as she had previously tried speaking out to the authorities and was treated as if she was a prostitute. Therefore, attitudes surrounding CSA may affect how survivors feel about

disclosing to the authorities, such as the police, because if they anticipate they will be blamed, they will not disclose. A few participants born between 1980-2000 were still exposed to general victim-blaming attitudes, for example, Elsie said:

The victim-blaming attitudes like when it's teenagers and like the girls of grooming gangs... [such as Rotherham grooming gangs (Meyer 2015)] they were portrayed not as innocent as they were asking for it. There's still some 'oh you put yourself in these situations.' These attitudes are very much out there. I didn't tell the whole story [about my abuse] in fear of survivor-blaming.

Elsie's statement shows how societal attitudes affect survivors, since she felt that she could not initially disclose due to the fear of victim-blaming. Both Elsie and Peggy had feelings that they would be personally victim-blamed as a result of existing, general victim-blaming attitudes, as they both feared that they would be treated as if they were making lifestyle choices rather than as survivors of sexual exploitation. Moreover, Jackson, also talked about hearing the victim-blaming message in the earlier years of his life-course: "When I was growing up, you'd see a lot of victim-blaming and that erm... you know that you must've done something to deserve it [CSA] or that idea it only happens to weirdo's or somehow people who are damaged". This statement shows the victim-blaming discourse Jackson endured in relation to CSA in society.

Taken together, the testimonies of participants portrayed two different levels of victim-blaming that they have endured at different points of their life-course. The exposure to both general and personal victim-blaming led to further traumatising, influenced the delay of disclosure, prevented protection from further abuse and often left them feeling as if they had not been believed post-disclosure. Whilst some of participants born between 1980-2000 did not mention victim-blaming, that does not

mean to say that they did not experience it at some point in their life-course, although it is possible they may not have, as attitudes toward CSA have improved in recent years.

This chapter demonstrates how adult CSA survivors have differing experiences of disclosing CSA, depending on the generation of participants and the time period when the participant disclosed for the first time. The notion that the awareness of Jimmy Savile influenced participants ability to disclose for the first time or to go to the police about the CSA experiences was an emergent theme within the data. One aspect of the results looked at reasons why adult survivors of different generations decide to report or not report the CSA experiences to the police. The results showed that survivors have various reasons for deciding not to report to the authorities, such as family members finding out about the CSA and being concerned with the impact this may have on their lives; the awareness that there is no physical evidence in their case and so they feel they would not be believed; fear of victim-blaming; and feeling that they can deal with the CSA experiences on their own. This chapter also demonstrated clear differences in how CSA survivors have historically been treated between generations of participants, and the impact this treatment had on them. For example, some of the older participants noted more difficulties in society being a CSA survivor as there was a lack of CSA discourse in public, and thus, these survivors were unaware that CSA was something they should disclose. This research also showed that there was less prevalence of victim-blaming in the testimonies of younger participants, indicating either that they just did not mention experiences they had of victim-blaming, or that they actually experienced less victim-blaming due to an improvement in how CSA survivors are societally perceived and responded to. This improvement may be related to historical events, such as the news of Jimmy Savile in

the UK, since participants in this research related his crimes to a change in how survivors are societally approached. A key finding in this chapter is that older participants were just as likely to receive justice than younger participants, however, there was more of a time lapse between CSA, initial disclosure, and disclosure to the police for participants born in older generations, although this could be a result of shifting public attitudes wherein there is a decrease in victim-blaming attitudes over time. Although, it's important to note that many participants have experienced and still do experience victim-blaming. This chapter also shows how disclosure as a process is not linear in nature since disclosing to the police and experiencing the waiting time for either their perpetrator to be charged or waiting for their trial can influence the survivor to have to re-process their experiences, which was deemed to have a significant effect on their life.

## 6. Timing of lives: The impact of disclosing child sexual abuse on life-course transitions

This chapter examines how making disclosures at different stages of the life-course, such as childhood (0-19 years), young adulthood (18-35 years) and late adulthood (36+ years), impacted participants' lived experiences. Drawing upon experiences of disclosures made at different stages enabled an analysis of how the transitions of CSA survivors, such as from school/college, to university, or becoming a parent for the first time impacted their life course trajectories. It is important to provide an analysis of transitions as CSA is known to affect some of these transitions (Estes 2023), although how disclosures made at various stages of the life-course such as in childhood, young adulthood, or late adulthood, may differentially impact life course trajectories and the related transitions has not been previously addressed. The findings in this chapter will demonstrate the differences between participants who disclosed in childhood, adulthood and late adulthood and the ways in which their age at disclosure has impacted their progression along typical life-course trajectories.

### CSA as disrupting the life-course.

This section of the chapter looks at how participants felt that they were unable to have positive experiences in their childhood as a result of the CSA experiences. A lack of positive experiences in childhood led participants to state that they felt as if their life-course was disrupted to the point they did not get a childhood, or that they were 'missing out' in comparison to minors who did not experience CSA. For example, Natalie, who disclosed to her grandmother when she was nine years old and received a negative response, said this about her experiences, "I do go through periods of time where erm... you know I feel hard done by... I feel like I missed out on my childhood

when I hear my friend's lives". Natalie shows how she has made comparisons between her and her friend's life-course which exacerbated feelings that she was living outside of societal norms and ideals, since she was unable to enjoy periods of time in her childhood that her peers did. Another participant that noted a disruption to their life-course was Jane who disclosed at eighteen to her mother: "I mean it's hard enough as a child having your childhood stolen." The fact that the reaction to her disclosure was positive, unlike for Natalie who received a negative reaction, did not make a difference in her feelings about missing out on parts of all of her childhood. Natalie's quote suggests that CSA has the power to disrupt the life course and to make survivors feel as if they are living outside of social norms and experiencing off time transitions regardless of any reactions to disclosure the survivor may experience. How CSA effects an individual was also pondered by Amber, who disclosed in childhood and like Natalie was negatively responded to. She said, "Like I do wonder, does it [CSA] damage you for life? I think it does". Amber believes that both her CSA and disclosure has had an impact across her life-course, which she illustrates later in the chapter when describing the various ways in which her life has been affected as a result of using drugs as a method to cope with her CSA experiences and negative response to her disclosure.

Further, Catherine who disclosed in young adulthood at the age of 18 and received a negative response, portrayed her life trajectory as being affected by CSA: "I'm never going to be who I should have been. I'm never going to get that back. You know, I'm a real survivor that way." As Catherine was sexually abused by her foster brother after being placed in foster care at a young age, her feelings about the disruption of her life may have been magnified as she was let down by the system that was supposed to protect her. Moreover, Catherine's CSA experiences have prevented

her from transitioning with her education and employment which is explored later in this chapter.

## CSA and school transitions

This section explores the educational trajectories of participants and whether transitions were affected as a result of either the CSA, and/or disclosure of CSA. The findings reveal that many of the participants noted a disruption to their education as a result of experiencing CSA, but the extent to which their educational trajectories were disrupted differed depending on whether participants disclosed in childhood or later. For instance, a large proportion of participants who disclosed in childhood stated that their school life was disrupted, either due to the CSA itself, or due to the responses they received to their disclosures.

How CSA can affect transitions from school to university was exemplified by Darren, who disclosed for the first time at the age of seventeen to his mother and was negatively responded to. He said this: “we could have been high achievers, but our childhood’s got in the way.” Darren’s felt that his educational trajectory was affected as his CSA experiences led him to use alcohol and drugs from a young age as a means of coping. Darren did attempt to correct his educational trajectory by returning to university: “It’s been five years since I started uni... I thought that I’ll learn psychology and I loved it. It’s been a massive change in my life, and I’ve learnt so much”. Whilst Darren acknowledges that his educational trajectory was disrupted by his CSA experiences, he has worked to correct this and successfully transitioned to university, albeit off time according to the expected socially normative transition timeline.

Another participant to address their educational trajectory was Sean, who disclosed in late adulthood when he was 39: “Before that [CSA] I was a good student.



I had always worked hard. I wanted to join the Royal Navy, right, and then [I could not] because I didn't leave school with many grades." So, in Sean's case, his life plans and life trajectory were impacted directly by CSA as he felt that prior to his CSA experiences, he was able to learn efficiently. Whereas after experiencing CSA, Sean felt that he could not learn and consequently, he did not achieve enough qualifications to enter into his desired area of employment. Similarly, Raymond, who also disclosed in late adulthood, said that if someone had intervened to stop the abuse he feels his life-course would have been different:

I honestly think that if I had that intervention, I'd have gone to university. I mean I did go to a grammar school, but I just wanted to get out of there... I'd have done archaeology because I just love history. Yeah, I'm sure that's the route I'd have gone down if all that [CSA] hadn't of happened to me.

This quote illustrates Raymond's perception that his life would have turned out differently had he not experienced CSA, as it was his belief that he would have been able to obtain a better education. Raymond's perception shows that it is often the case that CSA survivors may perceive that they missed opportunities with their education as they were too preoccupied with the CSA they were experiencing. A key finding is how participants felt childhood experiences directly shaped their life-course, which included additional factors such as an unstable family life. For example, Elsie first disclosed to her alcoholic mother when she was six and was negatively responded to. Although Elsie stated in her interview that she now knows that her mother was often inviting different perpetrators into their home and sexually abusing Elsie so that her mother could fund her alcohol addiction. Elsie's experience of disclosing CSA left her unprotected from further abuse throughout her childhood. Elsie stated in her interview that she believed she moved home a lot as a child because her mother was concerned

of the involvement of social services after Elsie's disclosure and because she was afraid that she would get caught inviting sexual perpetrators into their family home:

Whenever we got settled, she'd move us away from people. It was a constant pattern throughout my life. Yeah... I met lots and lots of teachers, but I never had a teacher for longer than a year.

Hence it was the CSA that Elsie experienced that had an impact on her ability to attend school and have stability in her childhood. Further, Elsie stated in her interview that her moving house and areas as a result of disclosing was perceived as a punishment, and this was why she opted not to disclose again to her mother since she craved some stability. Elsie did not disclose again until she was fifteen years of age when she was in a care home and out of her mother's care. This quote of Elsie's indicates the significance of disclosure and how responses can influence survivors to not re-disclose as they may have internalised beliefs that they will not be believed and may even be punished as a result of disclosing.

From an alternative perspective, Natalie shows how CSA disrupts transitions as she said that her attendance was affected when she had sex education in school, and this was when she realised what was occurring to her: "that's when the abuse started affecting me more, like I wasn't going to school as much". Natalie spoke of how her perception changed once she learnt about the social norms surrounding sex such as having consensual sex after the age of sixteen which in turn changed her behaviour in and out of school. This change in behaviour could be seen as a response to Natalie suddenly realising that she is a CSA survivor, and this may have had been the catalyst for her change in trauma symptoms and school attendance. Natalie's story demonstrates how educational trajectories are affected by CSA since understanding

that she had sexual experiences off-time was what prevented her from transitioning from school with qualifications. Similar to Raymond, Natalie went on to study in young adulthood, and now that she is in late adulthood, she is completing a postgraduate degree, demonstrating that survivors can transition, though often off-time, due to the disruption to their life-course from experiencing CSA.

Another example of transitioning from school can be affected by CSA and disclosure lies with Amber, who used drugs as a means of coping: “She [Amber’s mother] brought out this photograph and she said to my daughter, this is where all the trouble started. In the picture of me at high school err... in the first year I’d been glue sniffing.” Amber received a negative response to her disclosure at the age of eleven to her GP as her GP did not believe her since he knew her stepfather [perpetrator] well. Amber believes that her drugtaking was partly due to the response she received to her disclosure from her GP. These stories show that experiences of CSA had a direct impact on participant’s school attendance, which in turn impacted participants educational trajectory.

These stories demonstrate that there are many reasons why participants educational trajectories were affected, not just because of having CSA experiences, but also because they were negatively responded to when they disclosed in childhood. For many participants, an initial negative reaction to their childhood disclosure, meant that they had to re-disclose, indicating that disclosure is often, an ongoing, lifelong process. What is more, having to focus on disclosing means further disruption to a survivors life as they are unable to focus on the same transitions as their peers. A select few participants disclosing in childhood ran away from home or school, in response to experiencing CSA, which highlights how CSA functioned as a negative

turning point for participants. A turning point is defined as a disruption to the direction of a life trajectory (Wheaton and Gotlib 1997).

A number of participants reflected on how they constantly ran away from school which then interrupted their educational trajectories. James, who was sexually abused by his school chaplain, told his parents at the age of eight years about the abuse, but was not met with a supportive response. James said that he constantly ran away from his home and school life in order to get away from the CSA and demonstrate to his parents that he was unhappy: "I ran away... I ran away from home, I ran away from school, I did all of the things which were classic signs." James put across in his interview that in hindsight, he demonstrated many signs that he was being sexually abused through bad behaviour at school and at home, which in his view contributed to his inability to sufficiently gain an education. Leaving school with no qualifications, James instead, ended up working as a salesman which he felt he could have more in life in terms of achievements.

Jackson was another participant to exemplify how having experiences of an off-time involuntary sexual initiation can have consequences on survivor's ability to complete school and transition to university on-time: "dropping out of school and living rough". Jackson experienced a negative turning point in his life at a critical period in his education as he was about to sit his exams when he disclosed at school, and he felt to ashamed to return to school when he was negatively responded to by his headteacher and his parents. For this reason, Jackson views the later years of his childhood as mostly negative due to the CSA he experienced and then the negative response to his disclosure when he was fifteen years of age, which in turn led him to taking drugs as a means of coping. However, Jackson did return to university in his early twenties, albeit off-time, illustrating that although CSA survivors life-course

trajectories can be disrupted, many survivors may choose to correct their education trajectory at a later time than when is socially expected.

Some participants disclosing in young or late adulthood, rather than childhood, also expressed having had difficulties with attending school, or trouble with being attentive whilst at school, although this figure was much lower than participants that disclosed in childhood. The cohort of participants who disclosed at an older age had more successful transitions and trajectories. For instance, most of the participants disclosing in young adulthood completed school as a child, indicating that there was less disruption to transitions in childhood. For example, only a couple participants who disclosed in young adulthood mentioned a disrupted school life. First, was Charlotte, who disclosed to her sister for the first time at the age of eighteen: "I never went to school as my mum just kept me off school for years and my dad was like don't bother with school". Charlotte stated in her interview that she was only able to attend school once she went into foster care as an older child and that she believed her parents did not want her to attend school in case she disclosed to someone outside of the family, as her perpetrator was her father. Charlotte also details a failed transition from college as a result of the reaction she received to her disclosure as it had a significant impact on her mental health: "I couldn't do my college course [after disclosing to her sister]. I failed that." From this perspective, the point of disclosure can also influence expected educational trajectories in later life, as Charlotte was unable to attend university as a result of failing her college course. Both Jackson and Charlotte's quotes indicate that it is not just CSA that has the power to disrupt the life-course because disclosure as a process can also disturb survivor's life-course trajectories, particularly when they are negatively responded to.

A couple of participants that disclosed in late adulthood also pinpointed difficulties with their school lives because of the CSA they experienced, illustrating how survivors' life chances are affected by negative turning points, such as CSA. One example lies with Hayley as for her, school was not so much about learning, but rather, a safe place where she could escape being sexually abused:

I was never at school a lot of the time, so, I was spud-bashing, pea-picking... it was rough in them days, really rough. I had nothing going for me. If I weren't picking the cotton on the fields, cause I only went to school to get away [from CSA] and that's why I got a job as well.

Hayley's inability to transition from secondary school to college is linked to her CSA experiences since she stated she only partially attended secondary school so she could escape CSA. Instead of attending school, Hayley opted to go to work in cotton fields at only fourteen years old as she could not focus on school and began saving her wages so that she could leave her family home and start a new life for herself. These examples illustrate a myriad of reasons why CSA survivors have difficulties transitioning from secondary school, college, or university. Thus, CSA survivors' life-chances are affected as they are not able to learn or focus on their education in the same way as non-survivors because of both the CSA and disclosure experiences.

This research also shows that whilst educational trajectories were affected for the majority of participants, it was the participants who disclosed in childhood that faced more difficulties transitioning from secondary school to university. These participants' educational trajectories were particularly affected when they were not believed or were told to keep quiet, leaving them unable to do well in school because

of feeling hurt and fearful and also because they were left unprotected from further CSA. Another finding to have emerged was that despite educational trajectories being disrupted by CSA, many participants sought to recorrect their transition to education by returning to college and university later on in life.

### CSA and romantic relationships

A comparison of how participants relationships may be affected by the CSA or disclosure is important because this came up as a natural, emergent theme within the data, across cohorts. First, I draw upon CSA as a negative turning point and the way this relates to the testimonies of participants, for instance, how participants spoke about their sexual relationships in adulthood. Then, I look at how romantic relationships in general may have been affected by participants CSA experiences.

A selection of participants had their sexual relationships in adulthood affected by their childhood sexual abuse, illustrating how early childhood experiences can affect individuals throughout the life-course. This research considers CSA as a negative turning point due to the fact that survivors were forced to engage in sex earlier than sixteen-years-of-age, which through no fault of their own, violates societal norms surrounding sex. The violation of societal norms can be problematic for individuals because when off-time life events occur, stress occurs which can bring about negative consequences, such as disruption to life transitions (Widmer and Spini 2017). As a consequence of experiencing a negative sexual relationship, and before the expected age, as well as the violation of trust that occurs as the perpetrator is usually a trusted adult, participants in this research who disclosed in childhood demonstrated issues with sex, such as sexual abstinence or promiscuity. Although difficulties with sex was noted in a couple of participants who disclosed in adulthood, the analysis found that

these issues mainly occur in those that disclosed in childhood. For example, Kelsey, who disclosed at eight years of age to her mother and received a negative response, was one participant whose experiences demonstrate how relationship trajectories can be impacted by experiencing sex off-time. Kelsey discussed abstaining from sex with her romantic partner. For instance, she said: “I was having problems with intimacy and my muscles used to just close up... vaginosis. I was sent to psychosexual counselling”. At this time in Kelsey’s life, she was being visited by her father who was also her perpetrator, and she notes this as a factor that contributed to her inability to engage in a sexual relationship as she was constantly being reminded of her CSA experiences. Chloe was another participant who showed difficulties transitioning to healthy sexual relationships in adulthood as a result of CSA: “That [sex] is something I have really struggled with, so for me it was very much a physical act, not emotion and connecting and stuff”. Chloe details in her interview that she believes these difficulties with sex stemmed from being sexually abused as an older child, and even though the CSA only occurred once, this had a profound negative effect on her ability to transition to healthy romantic relationships in adulthood. Thus, for Kelsey and Chloe, experiencing CSA was a negative turning point since they both felt it had a detrimental effect on their sexual health and activity later in life.

On the opposite end of the spectrum, some participants disclosing in childhood portrayed difficulties with sexual promiscuity as a result of experiencing CSA. For example, Ebony was sexually abused by her older brother, father, and next-door neighbour throughout the course of her childhood. Ebony consistently attempted to transition to a disclosure, but her mother did not respond in a manner that protected Ebony from her perpetrators. Ebony said: “It [CSA] obviously makes you more sexually active. Most people on that street though... I think all the kids were sexually active with



each other. I do remember being really young and my mum didn't try discouraging it [sexual activity]". Ebony relates her CSA experiences to being sexually promiscuous as a fourteen-year-old adolescent which she feels should have been discouraged by her mother since it is against the law in the UK to have any sexual relations under sixteen years of age. Ebony went on to state that by the time she was fifteen years of age, she was having sex with adult men which is another example of how Ebony was repeatedly sexually abused and was not advised or protected from this harm by her mother. Ebony's experiences illustrate how transitions to romantic relationships can be disrupted as a result of having repeated experiences with sex off-time, preventing her from adhering to societal norms surrounding sex, i.e., sex for the first time at the age of the sixteen. Although it is important to note that expected behaviour as outlined in predominant social norms and in laws does not always match up with behaviours occurring in everyday lives. Sexual promiscuity in response to having sexual experiences off-time was also discussed by Elsie, who said this:

My mum always said that... I don't even know what age... I was probably like eleven and she was talking about sex. She was always very open about sex. She thought that from the age of twelve like you should be able to consent to sex. She agreed with bringing the law down [for sexual consent], that was her belief, like... and she wasn't alone in her beliefs, back in the eighties, erm that was her belief that you can have sex when you're twelve. I think I was in primary school when she first said that. 'Cause I remember telling my friends that I wanna have sex when I'm twelve and they must have told their parents cause they stopped hanging around with me. Like I was gonna intoxicate everyone.

Elsie stated in her interview that she believed her mother was facilitating her sexual abuse from strangers so that her mother would be paid with alcohol, which in

turn had an influence on Elsie's beliefs surrounding sex. Elsie illustrates how her mother provided her with a different set of social norms than those that her peers learned. Consequently, she was isolated because when her friends parents became aware that Elsie had sexual experiences off-time and they did not want her to negatively influence their children and so restricted her access to them leaving Elsie with few, if any, friends. Additionally, the historical time period (1980's) in which Elsie experienced this with her friends meant that this would not necessarily happen today as parents are taught to report to local authorities, such as social services when CSA is suspected or disclosed. Thus, Elsie's experience shows how CSA affected her ability to understand what the social norms surrounding sex were. This lack of connection to dominant social norms about sexuality also affected Elsie's ability to transition to healthy sexual relationships in adulthood, since she had sex with people when she did not want to:

Most men have enough respect for you like to pretend that they had some sort of feelings for you just before sex, during sex and just after sex. Some didn't, some would fuck you then call you a slag and then make you feel like a slag. Then you realise, oh okay... but most of them had enough respect to play the game. They'd exchange love for sex, and you'd exchange sex for love. That's just the way it was throughout my teens and my twenties. I was with people just to have the feeling of love, so I'd have sex when I didn't want to. I'd not be able to say no. Like yeah all I wanted was love.

Elsie's statement shows that she often equated sex with love which she believes is a result of experiencing CSA as a child by numerous perpetrators. Elsie married her now-husband which she stated has provided her with that feeling of security that she was missing in her younger years:

He's [her husband] given me that secure relationship. I've been able to grow and be vulnerable because that was a big thing was not being able to be vulnerable because everyone's out to abuse you. You know, he's allowed me to be vulnerable in my own home.

Elsie stated that she did not feel she could be vulnerable and therefore feel safe in her own home until she met her current romantic partner, and he helped her feel secure as he has been a non-abusive, consistent role in her life. Thus, Elsie was able to later transition to have a healthy, secure relationship, though not all participants were able to do so. Another participant who disclosed in childhood and who expressed issues with sex was Maxine, who disclosed at the age of fifteen to her school friends. She said this about her difficulties in transitioning to healthy sexual relationships in adulthood:

That bothers me, my sex life. Cause there was a time, I mean I didn't really become promiscuous until I was in my thirties, but before that I had normal relationships and then in my thirties, I started really enjoying one-night stands and that's not because I enjoyed sex, that's obviously because I'm a survivor of child sexual abuse and I was looking for love not sex. I've had sex once where I think I didn't think about it [CSA], whereas all of the other times I've thought about it [CSA]. I mean I'm talking nearly forty-five years ago it happened [CSA] so erm... I wouldn't say it's ruined my sex life, but I'd definitely say it's had a negative impact on it.

From Maxine's perspective, she has struggled to transition to healthy relationships as a result of experiencing sex off-time, she incurred profound changes in her life. Another factor that may have influenced Maxine's sexual relationships in

adulthood is how she did not report her CSA experiences to the police until she was in her forties, and she may not have had the closure she needed when she was being promiscuous in her thirties. The reason that Maxine may have developed issues with sexual promiscuity in her thirties rather than her teen years or twenties, is that she spent a considerable amount of time in her thirties processing her CSA experiences and deciding whether she wanted to go to the police. Once she had been to the police and her perpetrator had been sentenced, Maxine had issues with sex on the opposite end of the spectrum such as not being able to have sex with anyone due to the memories of CSA which she had previously suppressed. An additional participant to have disclosed in childhood and who also expressed issues with transitioning to healthy sexual relationships was Amber, who said:

I've never had a proper relationship. My relationships... what I've looked for in men has got progressively worse, so behaviour that was unacceptable just became acceptable. Anyone would do, rather than nobody.

Amber felt that rather than be alone, she would have sex with any man because her early experiences with sex were not linked to positive emotions such as love, and so she struggled to make meaningful connections with romantic partners throughout her life-course. At the time of the interview, Amber was focusing on being single for the first time in her life, so that she could concentrate on her mental well-being. Amber demonstrates how off-time sexual experiences have the potential to disrupt romantic relationship trajectories in adulthood because her first encounter with sex was negative. This may have led Amber to have a different outlook on sex and how sex should occur in romantic relationships, for instance, without feelings of love. In stark contrast, only a couple of participants who disclosed in young adulthood, rather than

childhood, expressed difficulties with the transition to healthy sexual relationships.

First, Archie said this:

When I was eight-years old, my father sort of sexually abused me like I was just doing things like erm... I was cottaging<sup>5</sup> and that. You know, it was almost like having drugs really, but erm... and you know, once I'd had my... you know I don't want to be too graphic, but once I'd had sex, or [experienced] sexual abuse, you know once I'd had that experience it was like the sensation was fantastic. I'm a gay man and I mean... I was highly sexualised, and I still am really... not as bad... but I still am highly sexualised. I was going into these kind of like seedy areas, you know, dark rooms and sort of bath houses and that's how I entered the gay scene. I just became very hooked on that you know; I didn't have a lot of emotional attachments to the people I was having sex with.

This statement of Archie's shows that often CSA survivors are unable to emotionally connect to the people they have sex with which often results in either promiscuity or abstinence. Archie went on to state that in his view, being highly sexualised was a result of being a CSA survivor and that he was taking risks with his safety by having sex with multiple, much older men. Archie stated in his interview that this behaviour may have been because he was attempting to reenact parts of his CSA. For instance, he was constantly seeking to please other men through oral sex which Archie thought was normalised behaviour. Archie's quote shows how CSA is conceptualised as a negative turning point by participants since the CSA affected participant's ability to transition to healthy sexual relationships. Archie also received a

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<sup>5</sup> Cottaging is defined as having casual, gay sex in public toilets Ellis, M. L. (2021). "Challenging identities; lesbians, gay men, and psychoanalysis." *Psychodynamic Practice* 27(3): 241-258.

negative response to his disclosure, which was similar to the other participants who disclosed in childhood.

A couple of participants disclosing in late adulthood also detailed difficulties with sexual relationships. Unlike participants that disclosed in childhood and young adulthood, both of these participants received positive responses to their disclosures. Julia disclosed at fifty-two years of age to her friend who responded supportively, and she highlighted how complex the disruption to sexual relationships in adulthood can be after experiencing sexual initiation off-time:

Julia: I think up until I discussed it with my friend. Like I said... I was like head in the clouds up until that point. If you'd have asked me when I was in my twenties.... Or even my thirties... I wouldn't have spoken about it, and I wouldn't have ever thought it has affected me. But now I can see how it has obviously.

Researcher: hmm... in what way do you think it may have affected you?

Julia: erm.... Well like I always seem to... well just ask my husband. He'll tell you. It has affected my relationship with my husband. I just can't have sex... it causes me to panic, to not breathe. I get flashbacks the err... the feelings that come after it. I mean we have tried loads of times, but he gets fed up if I can't go all the way through with it. So now, he knows not to try, because it'll just end up in tears. Now I think he accepts it because he knows, but before that, it used to result in us arguing and then I found out that he cheated. Obviously if you don't give a man sex, he'll cheat... he probably still does it I just don't look for it anymore. I'd rather not know about it.

Julia indicates that the CSA was a negative turning point for her since it marred her ability to have healthy sexual relationships in later life which then impacted the

health of her marriage. At the time of Julia's interview, she was still with her husband but detailed her issues with trust, and she still could not engage in sex. Julia may have received a positive response from her friend at the point of initial disclosure, but her husband did not find out until after twenty years of marriage. Her reason for not disclosing to her husband sooner was because she had suppressed her CSA experiences for most of her life the best she could, as she did not want to deal with it. Therefore, Julia's difficulties with her sexuality may have arisen from a lack of disclosure and not being able to connect her off-time experiences with sex with her sexual abstinence.

Romantic relationships more generally were also impacted by experiences of CSA. For example, whilst many participants did not demonstrate sexual difficulties in relationships, they did show difficulties maintaining healthy relationships with their partners. One participant to illustrate such difficulties in relationships was Allen, who faced issues in his first marriage, which eventually led to divorce.

The only reason I even married her, and this is going to sound so cold and callous but... I used to live in Newcastle and my dad was a football coach there and when he died, he died all of a sudden and I just had to get away from there because I couldn't handle it, so I got married to the nearest person and she lived in Manchester and that was it really, I just couldn't deal with it. I went down a slippery road for taking drugs, going out womanising and drinking, all that sort of stuff really... so obviously that was when I was at my lowest ebb.

At the point of his first disclosure, Allen was married to his first wife. However, prior to his disclosure, he was adulterous and had an addiction to alcohol and drugs, which may have been a factor for his negative response from his first wife when he

did disclose his CSA to her. Eventually, Allen divorced his wife and later remarried. Thus, Allen was able to retransition to what he feels is a healthy romantic relationship, and he no longer has any addiction issues. Likewise, Hayley, who was at the age of 72 years at the time of her interview, discussed difficulties within marriage which ultimately led to divorce:

He didn't love me, but he tried to convince me that he did. I married him and then within a month, I knew that I'd done a wrongen... because all the times I look back, he just raped me constantly. I went through many years like that because I had nowhere to turn to... because I was still a kid.

Hayley's first marriage occurred at the age of sixteen after she fell pregnant with her first child at fifteen and was forced by her and her perpetrators family to marry her rapist, leaving her unprotected from further abuse such as domestic violence and marital rape. She eventually divorced her husband and later remarried in her forties, though her second husband died of cancer after fifteen years of marriage. Hayley was not alone in experiencing relationship difficulties. Pippa also reported issues with partners:

I took up with a new partner and he managed to tap me in to... like motions of shame. Unbelievable quantities of shame. As I tried to share my story with him, it wasn't so much shame about what had happened to me, the actual act of sexual abuse, but the person it had made me into was a person that wasn't a decent, worthwhile person... who... who erm... he managed to reduce my sense of worth to zero. I don't think it's very unusual for somebody who has been abused to end up in such a destructive relationship with somebody so



narcissistic and somebody so self-centred and needing somebody weak so that they can feel strong to bully.

Pippa disclosed in late adulthood at age fifty to her mother and she explicitly states that she believes that her CSA experiences made her vulnerable to abusive romantic relationships as an adult. Pippa's statement encompasses the disruption of life-course relationship trajectories for CSA survivors. Thus, for these participants, CSA was a negative turning point which later affected transitions in romantic relationships, particularly with sex which may have been a trigger, or as a way to seek feelings of love which they felt they were lacking.

### Disruptions to the transition to employment

Being in employment is considered to be a normal part of a life-course trajectory since there is a societal expectation that individuals transition to work in adulthood. This section analyses the extent to which participants may have been affected by disclosure, and CSA as having a negative effect on their future employment. Among participants who disclosed in childhood only a couple were in employment at the time of the interview, which was for various reasons, some of which included being a stay-at-home mother and suffering from issues such as addiction. Many participants noted difficulties being able to work as a result of experiencing the negative effects of CSA, highlighting how a turning point in early life has the potential to effect employment and other transitions in later life. For example, Amber was first sexually abused at the age of eleven, which was when she first started using drugs as a response to the abuse. When asked what, if any, long-term consequences had arisen for her, she noted her use of alcohol and drugs as a coping mechanism in response to being sexually abused

in childhood by her stepfather. Amber felt that this was the reason she struggled to remain in employment throughout adulthood:

When booze really became a problem for me - other people knew I had a problem with booze long before I realised, I did - all kinds of stuff happened to me. You know just kind of waking up in places that you got no idea how you got there, where you are, and you know I'd sort of stay there for two or three days. Go into a crack house, go get on it. I've always struggled with life as well. I would say I have always found life very painful.

Amber's difficulties with entering and remaining in employment could be seen as a combination of both experiencing CSA and receiving a negative reaction to her disclosure. This lack of ability to transition into employment can be linked to external factors related to experiencing CSA such as drug-taking. Another participant to have disclosed in childhood and then struggled with employment in adulthood, is Peggy, who disclosed to ChildLine at the age of nine. Peggy was negatively responded to as the ChildLine call handler hung up on her, which Peggy thought in hindsight was because the call handler assumed it was a prank call. Peggy went on to be repeatedly sexually abused by multiple men and she said that the only way she could cope with this was to use drugs, which was why her employment trajectory was affected: "Aged sixteen to twenty-five erm... I wasn't very well mentally and physically so I had to get myself clean off the drugs". Evidently, Peggy struggled to work due to drug addiction issues which she believed stemmed from her experiences CSA as a child and in her teen years, since she was not protected from further abuse when she did disclose. Issues with addiction were prevalent in a number of the interviews with participants, for instance, Darren said this:

It was during those times [that he should have been in employment] I was getting off my nut... [on drugs] like when I was getting off my nut [on cocaine], I never thought of any of the bad shit. Like when I was off my nut I wouldn't even wanna think about any of it. I was invincible... like a different person. I've struggled with things.

Darren's transition to employment was hindered by his addiction to alcohol and drugs, which he believed stemmed from his CSA, as using drugs helped him not to think about his experiences. Thus, a main finding in this research is that participants who mentioned difficulties with addition to alcohol and/or drugs, all disclosed in childhood and received negative responses. This finding suggests that those who receive negative responses to CSA disclosures may be more likely to face issues with addiction than survivors who receive positive responses, illustrating how important responses to disclosure are to the life course of a survivor. One reason for this finding may be because negative disclosures in childhood has a profound effect on the developing mind as the child seeks non-traditional ways to cope such as the use of illicit drugs. In addition, those that received negative responses in childhood were more likely to have their attachments to their mothers effected which may be a prominent factor in opting to use drugs to help numb negative emotions. Using drugs to numb negative emotions is a finding established in CSA research (Alaggia 2004).

It is not just on-time transitions that can be affected by CSA and disclosure. For some participants already accomplished life course trajectories were also impacted. For example, Maxine disclosed at the age of fifteen to her school friends who responded unsupportively, which had a lasting impact on Maxine as she did not disclose again for a number of years. When Maxine did disclose again, this time to the police in late adulthood, she felt she could no longer remain in employment,

highlighting that it is not just CSA, but disclosure that can majorly impact a survivors life-course. For example, she said this:

Also, my job... I was working at the time of my court case, and I just found that too difficult and I gave up my job. Erm... basically... like one big thing they had moved my desk to the centre of the... basically there was no open windows in that room and so there was no daylight and that really impacted me. I just absolutely hated it. It was just this unnatural light, and I just couldn't work in those circumstances. The stress of it all. I began to hate the noises, like people typing. The noise used to really annoy me, and I'd just go and hide in the toilets, just to get away from it sometimes. 'Cause I used to get told off for putting my earphones in and listening to music. Err with hindsight I wish I'd just took the time to explain myself because at the time, the office was okay and I think they'd probably have understood cause they knew about my court case, but at the time I didn't really put two and two together. So, I left my job, so that was a time of my life that erm... that really did change.

Maxine went on to describe how she was diagnosed with depression after leaving her job and she had not returned to employment at the time of her interview, meaning she has financially suffered as a result of experiencing and disclosing CSA. Maxine explained that she felt overwhelmed at work, which she did not feel prior to disclosing to the police. Hence, Maxine's employment trajectory was affected by the turning point of disclosure, in her case, to the authorities. This finding illustrates that some survivors may have no issues transitioning to employment, but a turning point such as a police disclosure can still impact their employment trajectory at a later date. Hence, survivors' transitions in and out of employment may be complex since the CSA affects them throughout the life-course.

A few participants disclosing in late adulthood were retired at the time of the interview, and all three had successfully transitioned from employment to retirement. Hayley was aged 72 years at the time of interview and had previously spent a number of years working as an auxiliary nurse. She disclosed to her husband and received a positive response. These findings show that some CSA survivors employment trajectories can be successful despite having CSA experiences, as many participants in this research had successful careers. These findings show that survivors may require additional support when entering employment following experiences of CSA. This type of assistance may be particularly critical for those who have already disclosed and received a negative response.

Participants who received positive responses were more likely to be successful in transitioning from secondary school, college, and university to employment. This finding shows that receiving positive responses to disclosures can help survivors linked lives as they have relationships with peers in the education system and workplace. This finding also demonstrates that CSA in itself may not be the only precursor for poorer outcomes across the life-course. Rather, responses to disclosure may be of great significance in understanding why some survivors appear to be more affected by the CSA experiences than others. However, this research also found that disclosure can impact employment trajectories, which was demonstrated by one participant who disclosed in later life, as their status changed from employed to unemployed, suggesting that disclosing CSA may affect an individual's ability to work, and not just transitions into employment. Further research is required in order to understand what can be done to support survivors who's employment circumstances are affected or change as a result of disclosure.

## Having children as a life-course transition

This research addresses the transition that individuals make from non-parenthood to parenthood, and whether experiencing CSA as a negative turning point affected participants ability to make the transition to parenthood. This section of the chapter considers the timing of transitions, and having children 'off-time' i.e., before the age considered to be normative by society. For example, Ebony, who disclosed in childhood had her first child outside of marriage whilst she was still a child herself: "I had my daughter... uhm I was ... say ten years ago, so I was about seventeen, I reckon". As Ebony shows, she had her first child 'off-time' as it is generally considered that individuals will have their first child, ideally in their twenties, rather than in adolescence or later life (James-Hawkins and Sennott 2015). Ebony's quote shows that she also had her first child 'off-time', as she was raising her daughter whilst her peers were entering college, university, or employment. Likewise, Hayley, who disclosed in late adulthood after being raped at age fifteen by her now ex-husband, who was considerably older than she was, had this to say: "I got engaged because I was pregnant. I wasn't even sixteen until Jimmy [eldest son] was one year and one month because I gave birth in 1964". As Hayley illustrates, she got married because she had fallen pregnant whilst she was still in adolescence, illustrating that individuals often try to correct their trajectories, for example, getting married so that the baby was not born outside of marriage. Whilst there is less stigma to having children outside of marriage in contemporary times than is the case historically, when Hayley was an adolescent, her family had strong societal ideals surrounding sex before marriage. Thus, Hayley's forced transition in a way that is socially accepted which left her in a vulnerable position and meant she was subjected to further abuse.

### *Pregnancy and childbirth.*

The women I interviewed made some references to experiences of pregnancy and giving birth and how these experiences may have been affected by the CSA experiences. For instance, some of these women noted feelings of trauma from the CSA experiences and that pregnancy and giving birth evoked the feelings of vulnerability they associated with the CSA experiences. In turn, this feeling of vulnerability triggered them to feel similar feelings of trauma as they did when they were abused. This traumatising was a factor that made the transition to parenthood more difficult for them. One example lies with Kelsey who stated that she developed complications with her health which arose as a result of the severity of the CSA, which led her to develop scar tissue resulting in numerous operations over the years to try and resolve her health issues. For this reason, Kelsey had no human agency in how she gave birth because of her CSA experiences:

At different times of my life, I've had to have operations because of the abuse which is something that people don't talk about. Even when I had my children... I had three children I had to have a c-section because scar tissue doesn't stretch the same.

As this quote shows, Kelsey was prohibited from ever giving birth vaginally, which she stated in her interview served as a reminder of her CSA experiences which in her view, contributed to negative birth experiences. Although for Kelsey, it was having a daughter that triggered her to be more affected by her CSA experiences. For instance, she said this:

I think having my daughter really sort of... I think that's sort of what made me have a breakdown. I've never thought of myself as a survivor. I don't know why, but erm... I think being pregnant and having children is a big trigger anyway.

In Kelsey's statement, she specifically mentions that having a daughter, after having two sons, contributed to her breakdown, which may be connected to Kelsey feeling triggered since having a daughter may have created concerns that she would also be sexually abused, or that having a daughter reminded her of her own CSA. Moreover, Ebony first disclosed as a child but did not receive a positive response from her mother, and so she disclosed again to her partner when she was pregnant for the first time. She feels this disclosure had more of an impact on her than when she disclosed in childhood:

I was mid pregnancy when I told him about it all. But... yeah... the changes all come after I split up with Bob [partner at the time and father of the child she was pregnant with]. Probably seeing like... I don't know... obviously so... going through all that when I was a child, I don't think it really affected me, but as an adult, I feel like it has.

Ebony separated from her partner shortly after the birth, which she did not state why, but believes that her life experiences has had more of an effect on her in adulthood than in childhood which may be due to the fact she was cognitively unable to process her CSA experiences. This inability to cognitively process the CSA is a finding that has been put forward in Clancy's (2011) book that children appear to be more unaffected than adults due to not having the cognitive capacity to understand what has occurred to them (Clancy 2011). Ebony's secondary disclosure occurred when she was pregnant at sixteen years of age and received a positive response, a



stark difference in comparison to her when her childhood disclosure, when she received a negative response. Ebony's secondary disclosure may mean that she was able to start to cognitively process what had happened to her, which enabled her to protect her baby as she was able to move out of the home she shared with her perpetrator.

Having a child for the first time was not the only difficulty for participants in this research as for some, it was having a child of the same sex that created feelings of trauma as a result of experiencing CSA. For instance, Natalie said this: "I got posttraumatic stress disorder after the birth [of my daughter]. My therapist said to me having a girl in itself would have been triggering". Natalie had two sons from a previous relationship, and she said that she felt she was not affected by their birth in the same way she was as her daughter, which could be because girls are generally seen as vulnerable and more likely to be sexually abused than boys, as is reflected in the current literature (Gewirtz-Meydan and Finkelhor 2020, Roberts 2020). Natalie goes on to say that there is not enough support for pregnant women with CSA histories:

That's what I mean, so if this is a thing... you know an ongoing issue for pregnant women why isn't there that support? You know, no one asks you about your history, other than like genetic disorders and stuff, they don't ask about traumatic experiences or childhood traumas and that.

Natalie's experiences highlight the need for NHS maternity services to be more proactive in assessing pregnant women for histories of CSA and work with them to reduce potential CSA related trauma that pregnancy and childbirth may cause. An additional participant to report issues with giving birth as a result of experiencing CSA

was Faye, who disclosed in late adulthood at the age of 37, after giving birth to her first child:

I did struggle giving birth and I knew them [midwives] giving me sweeps or checking how dilated I am, I knew then that I felt triggered by it, so even when I was giving birth, I was getting flashbacks of the abuse, but then at the same time you beat them to the back of your head cause you know it's meant to be a good day bringing your own baby into the world.

This statement from Faye shows how she was triggered by her labour to getting flashbacks when she had to receive medical treatment, indicating that some female CSA adult survivors may require additional support when giving birth and that possible history of CSA should be explored by medical professionals during pregnancy.

### *Parenthood*

A select few women expressed issues with transitioning into parenthood as an adult because of their sexual abuse experiences as a child. Such as issues ranged from feeling a lack of attachment to their children, to feeling over-protective of their children. Hayley provides an example of how parenthood trajectories can be disrupted as a result of having children off-time. As discussed, this research demonstrates that CSA survivors may be more likely to have children off-time due to engaging in non-consensual sexual relations as a minor. Hayley's story is especially poignant, Hayley found herself with child outside of marriage as the result of a rape. Pregnancy when unmarried, went against her family's and societal ideals at the time, i.e., the 1960's, and she was 'forced' to marry her perpetrator when she discovered she was pregnant. After her fourth child, she decided to leave her marriage which resulted in her leaving

her children with her husband as he had manipulated them to not want to be with their mother:

I packed a suitcase, I got the kids the following morning, I waited until he went to work, and I left. I hitched a lift over to Dagenham and that was the start of something else... cause my sons didn't want to be with me, they wanted to be with their father. 'Cause sometimes he was good, sometimes he was bad. If it weren't football, it was fishing. If it weren't fishing it'd be bird nesting. But the worst one was my eldest son. Jimmy was just so much like his father. He'd [the father] get him [the son] to kick me, swear at me, hurt me, you name it, he'd do it if his father told him to. They'd both stand there laughing at me. He was only five years old... by the time he was seven, he was the image of his father. Yeah... even now I still don't really know what he's like cause I've only met him a few times.

Hayley demonstrates that family lives are often complex, and she blames her husband, who was one of her CSA perpetrators, for the lack of relationship she has with her children. Furthermore, having children off-time may have been a contributory factor in Hayley's ability to parent since she was an adolescent herself when her first child was born. Although Hayley's circumstances were unique, she highlights how some CSA survivors may have strained, or non-existent relationships with their children due to the disruption that survivors faced to their life-course in their early years. Another participant to illustrate how they struggled with their parental trajectory was Amber, who had children after marriage, but was negatively responded to when she disclosed in childhood aged eleven. She stated in her interview that she struggles now with being a parent, despite her children now being in adulthood:

You know I still struggle now like with my children, I honestly... I had my children for a fix. To have little children, to have these things to love me unconditionally and I could love them back and erm that didn't work out too well for me because I erm... I don't even know if I love my children today. I have my children and I... I don't know what love is.

This statement from Amber demonstrates how she has struggled with being a mother which she felt was the result of having a non-protective mother as her perpetrator was her stepfather. Amber went on to detail that she has a fragile relationship with her two children which she emotionally struggled with because in her view, she has not met the societal ideals of what constitutes a good mother, partly due to her addiction with class A drugs, such as cocaine and heroin. Her lack of ability to parent was seen by Amber as a direct of consequence of being sexually abused as a child and not being able to cope with the resulting trauma. On the opposite end of the spectrum, Kesley spoke about her need to overprotect her children in the past as a result of not wanting them to become CSA survivors like she did:

Parenting... erm... I was so... well, overprotective of them because I decided, my husband and I both decided, my husband both decided we would do everything completely the opposite to what our parents did. You know we went on parenting courses and playgroup courses and all sorts... until we finally learnt to be a good parent. In therapy, I learnt to not overprotect because if you overprotect your children, you can damage them just as much because you end up scaring them. I used therapy a lot really, to help me balance that out.

Kelsey's interview shows how parenthood was difficult for her and she relied on other methods, such as therapy and parenting courses to ensure she provided a

secure childhood to her own children. Kelsey's motivation for attending parenting courses and therapy was so that she could ensure that her children would not be sexually abused, showing that some CSA survivors actively seek advice and education in order to maintain healthy relationships as they create their own families with the aim of preventing CSA from happening to their children.

These findings suggest that CSA survivors may have difficulties in their parenthood trajectories as a result of having CSA experiences. These difficulties take many forms, such as not feeling an attachment to their children, feeling overprotective of their children, or not having a relationship with their children. Although it is important to note that the majority of participants did not mention any difficulties with parenthood, and most stated that they have actively ensured their children are kept safe and protected from abuse.

This research has shown that participants who disclosed in childhood were more likely to face interruptions in their life-course trajectories around education, employment, romantic relationships, and becoming parents. More specifically, it appears that responses to disclosures in childhood are an integral aspect of understanding the difficulties that CSA survivors endure across the life-course, because those that received positive responses in childhood had more positive outcomes in later life. Whereas those that disclosed in young or late adulthood noted more disruption to their life-course at the point of disclosure. This finding suggests that more needs to be done to ensure children can disclose and that they are supported and believed, as children who disclose and receive a positive and supportive response have better outcomes across the life-course. This finding also suggests that there has to be support in place for disclosing adults to try and minimise the disruption to their life-course, such as employment or parental trajectories. Additional support for

survivors could include ensuring they have understanding from services such as within the Jobcentre and from maternity and health visitors. Further research is required to determine if unpacking responses to disclosure in therapeutic settings may increase the life-chances of CSA survivors since a positive response may help the survivor feel believed. Also, unpacking negative responses may assist the survivor in understanding why they may have been responded to in that way. The findings from the chapter may have implications for health care and governmental systems since CSA survivors may require more support when entering the employment market or having children, than non-survivors.

These results indicate that CSA survivors life course trajectories are affected by the CSA experiences as they do not have equal opportunities to learn due to the way CSA affects their ability to learn and progress with education. Moreover, this research also analysed romantic relationships. The results indicate that participants who disclosed in childhood, in particular had issues with maintaining healthy sexual relationships. For example, many demonstrated difficulties with sexual promiscuity or abstinence as a direct consequence of experiencing CSA. Therefore, whilst the message in society is that children should disclose as and when the CSA occurs, the findings in this research showed that participants that disclosed in childhood often received a negative response which limited the utility of disclosing in the first place. In contrast, participants who disclosed in adulthood overall received more positive responses and also reported less of a disruption to their life-course trajectories. For example, they reported more successful relationships, education, and employment transitions.

These results suggest that life course transitions may be more impacted when disclosure occurs in childhood because participants are more likely to be perceived as

violating social norms, whereas those disclosing in adulthood may not be perceived in the same way. Hence, participants disclosing in childhood were more likely to receive a negative response in comparison to other cohorts. This finding suggests that more work must be done to ensure that those disclosing in childhood feel supported and believed so that they are able to successfully transition throughout their life-course and complete expected trajectories on time.

The findings also revealed that experiencing CSA affected transitions into parenthood. This was exemplified by participant's testimonies that they were triggered by childbirth or having a child of the same sex or age as they were when the CSA occurred. These findings suggest that further research must be conducted to understand the implications of experiencing CSA and how this affects those in pregnancy, childbirth, and parenthood and what more can be done to support women. One participant put forward that there should be a screening for histories of CSA in NHS maternity services. Such screening may help to improve the experiences of mothers which in turn may ease the transition into parenthood. Taken together, the findings in this chapter overall illustrated that there are implications from experiencing CSA which varied, depending on when participants disclosed and the response they received if they disclosed in childhood.

## 7. Framing adult survivors of CSA: Historical Sexual Abuse and Non-Recent Sexual Abuse

The purpose of this chapter is to explore CSA survivors perceptions of how they are framed, which is important because little research has explored the potential implications that may arise for survivors when they are framed in a particular way. There are two main terms under exploration. First, I explore the term “Historical Sexual Abuse” (HSA), defined by the National Society for Prevention of Cruelty to Children (NSPCC, 2019a) as sexual abuse occurring to an individual in childhood, but is now aged eighteen years and over. Second, I examine the term “Non-Recent Sexual Abuse” (NRSA), which is defined by the NSPCC (2019) in the same way as HSA and used interchangeably. I draw upon these terms to gain an in-depth understanding of the ways in which CSA survivors feel about the terminology used to frame them and whether they feel these terms affect how they are responded to when they disclose.

After discussing participant’s views on the framing of adult survivors, I focus on the long-term consequences arising from experiencing CSA to show that survivors are often affected throughout the life course suggesting that how they are framed has lifelong consequences for survivors health and wellbeing. This chapter is important for research since the findings may have implications for researchers and for health care practitioners looking to improve trauma-informed practice.

### Framing

Participants agreed that the way adult CSA survivors are labelled matters. One example of how labelling was deemed to matter by participants lies with Kitty, who was



discussing her preference for the label 'survivor', instead of survivor. She suggested that "terminology actually has a societal effect". Kitty's statement illuminates the importance of labels in society in general because what term is used to describe people can have an effect for both individuals and more general perceptions of groups of people within society. Whilst Kitty's statement was in the context of survivor versus survivor labels, she shows that how survivors are framed using particular terminology surrounding CSA is deemed important. Some of the participants were explicitly asked if they believed that how a survivor of CSA is labelled is important, and many agreed that it was. Another participant to address the importance of labels was Elsie, who said, "Yeah course, how you frame somebody [matters]". Elsie said in her interview that in her belief there can be implications from how a survivor is framed, such as survivors being disbelieved. Amy was another participant that put forward the importance of labelling in framing:

Yeah definitely because of what people say about you; the words they use affect how people think don't they? It's a common theme but people don't talk about it very much, so that you might run across a lot of people who have never had a proper conversation with someone whose had this experience. So, all they can go on is what they read about it. It matters the way people write about survivors. I don't think these labels like nonrecent are really relevant to us, are they? They might be to like, police officers but that doesn't mean that they have to start using them in conversation with the person.

Amy makes an important point that base their perceptions on the labels they read, which may not accurately represent the experiences of actual CSA adult survivors. Thus, some survivors conceptualise the current framing as unimportant i.e., HSA or NRSA is not deemed to be relevant to adult survivor's experiences. For Julia,

it is important to ensure that the trauma survivors endure is reflected in the framing of survivors, which in her view cannot really be represented using a simple label at all. She said, “yeah, course it [framing] matters. If you fit into that criterion, then I think you’ll think it [framing] matters, and you can’t condense all trauma into some label”. Julia illustrates her belief that survivor’s trauma is not recognised by the current framing and that the way that society groups people into labels that may affect how they are identified, perceived, and treated is not usually helpful to the survivors.

In contrast, a couple of the participants believed that the labelling or framing of adult CSA survivors does not matter. Interestingly, both of these participants were men. Jackson said, “I think there’s more important things to be talking about than what words we use.” Jackson asserts that the labels used to define CSA survivors matters less than other things, showing that while the majority of survivors feel that framing is important, not all do. Anthony feels that the framing of CSA should be more explicit so that the public are aware that a rape has occurred because in his view, the word ‘abuse’ downplays the significance of the crime committed, “I’m more worried about reporting the truth and the context, so using words like ‘child rape’ [feels more appropriate]”. Anthony feels that it is vital to include context and be direct in the way we frame CSA, indicating that how language is perceived is deemed as important to survivors. Furthermore, Anthony was a participant that felt strongly about the framing of CSA survivors to the extent that he felt the word ‘rape’ would be more impactful to audiences than the word ‘abuse’, although, his view may be based on his experience of rape, since not all sexually abused children experienced penetrative sexual abuse which would be legally classified as rape.

Overall, participants demonstrated that they care about the way they are labelled, with many pointing out that how they are framed has the potential to influence

how they and other survivors are perceived. From this perspective, how survivors are perceived may have an influence on how they are treated. The next section of the chapter looks at how participants conceptualised the terms historical and non-recent sexual abuse and whether there are perceptions that these terms may influence how they, or other survivors are treated.

### *Historical sexual abuse*

In order to gain an in-depth understanding of how participants conceptualise the labels used to frame adult CSA survivors, I asked participants: “how do you feel/what do you think about the term historical sexual abuse?” and participants responded in a number of different ways. Two main themes were identified in the data, for instance, those that did not like the term HSA, and those that said that they did not mind the term (see table 1). Most participants said they did not like the term HSA, and different reasons why were provided. For example, some felt that “historical” means long ago, some felt that HSA implies their experiences are less important than current cases of children’s sexual abuse, and others thought that HSA means that adult survivors should ‘get over it’ and move on from their experience of CSA.

Table 1: Participants feelings about by life-course disclosure timing

	<b>Timing of Disclosure</b>			
<b>HAS</b>	<b>Childhood</b>	<b>Young adulthood</b>	<b>Late adulthood</b>	<b>Total</b>
Does not like HSA	91.7%	75%	71.4%	25
Does not mind HSA	8.3%	25%	28.6%	6
<b>Total</b>	100%	100%	100%	31

These findings related to who did not like HSA, and who did not mind HSA, may be related to the historical time period (see chapter five) in which the participant was born from. Whilst most participants stated that they did not agree with an historical

framing, the rate of those who stated they did not mind HSA as a term increased across life-course stages, meaning the older the participant, the more likely they would agree that HSA does not bother them.

One main finding is that some participants said that they had no qualms with the term HSA as they feel there needs to be some indication as to when the CSA occurred. For example, Steve said this: “if you didn’t have that as a caveat, people would think it happened yesterday.” Steve asserts that the term HSA allows the audience to know that the CSA did not occur in recent years, although it could be argued that the audience would be aware that an adult identifying as a CSA survivor means that the abuse occurred in the past when the individual was a child. However, these participants who claimed that they did not mind the term HSA, also said that they did not have an alternative way to frame past CSA experiences and so relied on HSA as the only term available to them. For example, Anthony said: “I don’t necessarily agree with it [the term HSA], but I don’t see much of a replacement to be honest.” Anthony explains that he does not know another way to frame his past CSA experiences, which provides insight into how survivors use the available labels in public discourse, even if they are unhappy with how they are framed. Therefore, HSA can be seen as a label that is widely used to describe adult survivors, and the following sections of this chapter explores the perspectives of participants that believe there are implications from this framing.

### Historical means long ago

Many participants noted that the term HSA insinuates that their experiences are no longer of current concern due to the emphasis placed on time by the word “historical”. For instance, one response to being asked about their feelings toward HSA, was that

it is a term that should *only* be used in reference to history by which they meant events occurring before their lifetimes. Pippa, who disclosed in late adulthood, provides an example of why connotations attached to the word historical may be considered semantically complex when describing adult CSA survivors. Pippa put it this way, “I think that the semantics of the word ‘historical’ don’t do us any service. For a start, history to me is sort of Tudors and Henry VIII... it just sounds so far away from my life.” Pippa’s quote indicates how the word historical may be conceptualised by some survivors as unfavourable for how CSA survivors perceived and skews people’s views of the relevancy of the abuse to someone’s current life. This perspective obfuscates the fact that the survivor is still alive and continually affected by the CSA they experienced. Peggy, who disclosed in childhood, also noted this: “I feel like it is inappropriate to label my experiences with the same word we use to describe Henry VIII. Historical sounds like everyone that was involved is dead and gone.” Thus, using the term HSA may indirectly suggest that historical sexual abuse survivors are from past time periods and thus are not currently in need of support in their adult lives. Similarly, Natalie, who also disclosed in childhood said this about the term HSA and what historical means to her: “When you say historical, do you know what instantly comes into mind? The Victorian times... you know them standing there in their old clothes, like the traditional clothes”. From this perspective because the term HSA includes the word “historical” it may not acknowledge the current trauma experienced by adult survivors, leaving participants with the feeling that they are perceived by the public to not be worth current concern. Hence ‘historical’ is seen by some participants as not accurately representing the CSA experiences.

Lisa stated that she has never used the term HSA in reference to her own experiences: “I’ve never used the term historical because I don’t believe there’s

anything historical about it [my CSA experiences]”. As Lisa explains, her own experiences do not resonate with the idea that abuse is historical because her CSA experiences are part of her present life and still impact her day-to-day even though the abuse occurred over 40 years ago. These findings show that regardless of when participants disclosed, the use of the term HSA was often deemed an inappropriate way to frame adult survivors due to the connotations attached to the word ‘historical’ and the survivors clear present experiences of the trauma associated with the CSA.

#### Historical means it's not important.

The idea that using the term historical means that the events themselves were unimportant due to the passage of time which was mentioned by more than one participant. Maxine said this: “Basically it [the term HSA] minimalizes what we went through. It's done and dusted and therefore it doesn't count as much.” Maxine's response to being asked what she thought of the term HSA exemplifies how some participants in this research believed that the HSA label frames their experiences as not being important in society due to the way the term downplays survivor's trauma. Maxine's statement illustrates that adult CSA survivors may believe that the public does not care about the CSA experiences because as adults they are perceived as no longer experiencing harm related to the CSA they experienced.

The idea that CSA is no longer harmful to them was disputed by all participants as they detailed the long-term life course impact of the CSA they experienced. In fact, all participants in this research stated that their experience of CSA continued to impact them in their day to day lives, even when the abuse occurred decades earlier, which may be why a selection of participants felt that using a historical framing minimized the importance of their experiences. For example, Steve said: “[The term] historical

somehow implies that it's [his CSA experiences] not significant." These statements highlight how survivors conceptualise the term HSA and how this kind of framing suggests that the CSA experiences the participants had are not important, especially when compared to current CSA cases. Although, it's important to note that the findings in my research have shown that children are more likely to be disbelieved than adults, indicating that whilst current child cases may take precedent over adults disclosures, there appears to be a disconnect between the message we put out in society, i.e., children that disclose will be believed, and what actually occurs, survivors are more likely to be disbelieved when disclosing as children. Overall, because the term historical is seen as representing something that occurred a long time ago, participants felt that using HSA to describe the CSA experiences misrepresented their lived reality.

#### CSA survivors should just "get over it".

The notion that survivors should get "over" the CSA experiences because time has passed, was also present in participants narratives. Raymond stated: "It [historical framing] somehow lessens it [CSA experiences] ... makes it seem like... well it happened in the past, so get over it, it's done." Raymond's quote shows that there appears to be a societal expectation that survivors who are adults should no longer be affected by CSA experiences because the CSA occurred so long ago. Similarly, Elsie also spoke about her conceptualisation of the term HSA and how this kind of framing may have a detrimental impact on adult survivors. She said this:

It [the term HSA] isn't needed. Like the fact you have an adult survivor of abuse, already implies it [CSA] happened in the past. It [HSA] makes us feel less sorry

for the survivor, perhaps, or less angry with the perpetrator because of the passage of time. Or you should have 'got over it' by now.

Elsie makes an important point that it is obvious that an adult reporting CSA was victimized as a child, and that using HSA as a way of framing survivors distracts attention away from the perpetrator, or that the survivor should not be effected by their experiences. Elsie's statement suggests that the perpetrator is not considered in HSA and maybe seen as no longer a risk to children in current society. Perhaps one reason that HSA downplays the culpability of the perpetrator is that CSA is a societal issue that makes people feel uncomfortable due to socio-historical taboos surrounding sex and children. Thus, the emphasis placed on time since the CSA, minimises the risk of harm to children in current society. Although, it is important to note that perpetrators who are not caught often target more than one survivor throughout their life-course of offending (Elliott, Browne et al. 1995, Dalsklev, Cunningham et al. 2021). Elsie also stated that she believes the labelling of adult survivors as historical means that people would be less empathetic with survivors because the survivor presents as an adult and that the current framing may suggest that the survivor should not be impacted by the CSA experiences as an adult.

This section of the chapter addressed how some participants in this research responded to HSA with the belief that it suggests that adult survivors are not affected by the CSA experiences in their adult lives. Therefore, the use of the term HSA in wider society may have implications for adult survivors as they may feel that they are inaccurately framed and subsequently that the CSA related struggles are wrongly perceived and not adequately supported. With all participants displaying at least two or more long-term consequences of experiencing CSA, framing their experiences as historic does not adequately represent the experiences of adult survivors. Thus, an



alternative framing may help survivors feel that their experiences do matter and that they are able to be supported as and when they require it.

### Historical Framing and the disclosure process

The impact of framing adult CSA survivors experiences as historical was noted by some participants as something that impacted their disclosure process. For example, Sally said: “It [HSA] does come in the way of disclosing it [CSA experiences] ... It doesn’t exactly inspire confidence for people to disclose.” Thus, HSA frames survivors CSA experiences in a way that may actually dissuade them from disclosing which is pointed out by Sally due to the way this terminology focuses on the past, downplaying the significance of the harm caused. Alternatively, Ebony’s reasoning for why HSA discourages disclosure is because it creates feelings of doubt from the public, “Especially when it’s [CSA] many years ago, people question why they [the survivors] have come forward after so long.” This quote of Ebony’s shows that a historic framing may cause others to think that survivors have other motives to disclose in adulthood, which is problematic when considering that messages about CSA within general society place importance on disclosure and suggest that all survivors will be believed regardless of when in the life-course they disclose.

Similarly, Maxine stated that she did not like the term HSA since it focuses on time since the CSA occurred: “It’s like placing an emphasis on why we took so long to disclose [rather than on the CSA itself].” Maxine shows that she interpreted HSA in the same way as Ebony because they both felt that there is emphasis on *why* survivors disclose in adulthood rather than earlier in the life course. In other words, participants feel the term HSA suggests that participants should have disclosed earlier in the life

course and closer to the time when the CSA occurred. HSA as a term potentially affecting the disclosure process was also acknowledged by Kitty: “A lot of people may not want to disclose because they [the survivors] don’t want to be labelled [as an HSA survivor]”. We can see from these quotes that the likelihood of disclosure itself can be impacted by how the CSA experiences of adult survivors are framed. All of these reasons for participants’ dislike of the term historical are related to the participant’s perceptions that HSA minimises the CSA experiences and does not acknowledge the long-term harm imposed by the abuse.

A select few participants likened HSA to murders that took place in the past, pointing out that people do not say ‘historical murders’. These participants noted that framing murders as historic would be problematic since people are assumed to be affected by murders long after the murder occurs. Maxine described it this way: “No [HSA] definitely needs to go ...we don’t say historical murders.” Maxine pinpoints HSA as different to other crimes because no other crimes are contextualised as historic, such as murder, which she believes is important because with murder the survivor is dead and gone, whereas with a CSA survivor, they are very much alive and living with the trauma and long term-consequences that arise as a result of experiencing CSA. The notion that other crimes, including crimes such as robberies or murder are not contextualised as historical is important since this kind of framing appears to be linked to sex crimes. The ways in which UK culture refers to and deals with sexual crimes maybe linked to societal ideals surrounding beliefs that there is a level of participation from both parties when it comes to sex. Although, sexual crimes surrounding children such as CSA may challenge this belief since existing societal ideals perpetuate the belief that children are innocent and should not be involved in sex. Yet if the crime is framed as historical then this may reinstate the belief that the survivor willingly

participated in sex since there is no indication that the survivor was once a child when the crime occurred.

This point that other crimes are not framed as historic was also put across by Archie, who said: “Perhaps we should just call it child [sexual] abuse. It is child [sexual] abuse that has been reported later, you know you don’t call them historic murder cases, do you?” This quote from Archie shows that a historical framing is used only for sexual crimes against children which many participants did not understand why. Moreover, the current framing as historic is exclusively used for adults reporting sexual crimes against them when they were children, again, suggesting that ideals and norms are very much linked to how we frame issues in broader society. Likewise, Amber stated: “with a murder, they don’t say oh it’s historical, do they?” Amber’s assertion that murders are not framed as historic is an important point since it is a crime that is perceived to affect people’s lives no matter how long ago it occurred. These statements provide insight into the framing of UK crimes because unlike murder survivors, the survivor is alive and very much able to report the crime. Therefore, in participant’s views, adult CSA survivors experiences are framed in a way that may cast doubt on their believability, which is unlike any other crime framed in the UK. Why this particular societal issue is framed in this way may be related to socio-cultural, historical norms because throughout history, CSA survivors have been disbelieved due to concepts of innocence as there has been this conception that younger children are innocent (Jackson 2013). Thus, the belief that young children would not be engaged with or forced into sex, and that older children are have lost their innocence and are lying in order for monetary gain (Jackson 2013, Delap 2018).

Framing theory is of relevance here since how a societal issue is framed influences how people think and respond (McDonald 2019), which can be seen in the

views of participants since they stated that a historical framing may influence others to think that their experiences no longer matter which may be problematic since it may prevent survivors from disclosing, or from accessing support for trauma. These findings suggest that adults who were survivors of CSA find the historical framing to be problematic, particularly due to the ways that connotations attached to historic may downplay the trauma of survivors or make survivors feel that their experiences do not matter as much as current cases. The next section of the chapter looks at participants understanding of the term 'Non-Recent Sexual Abuse' (NRSA) which has been used as an alternative to HSA when referring to adult survivors of CSA.

### *Nonrecent sexual abuse*

Participants were also asked what they thought about the term Nonrecent Sexual Abuse (NRSA). Almost a third of participants agreed that the term NRSA was a better label than HSA. This difference was suggested by Amy who said:

Yeah [NRSA is] probably better [than HSA]. I'd say something like "oh this happened to me when I was a child". I don't think I would ever call it historical or nonrecent because it's not... in my thinking of what happened, like was it a long time ago or not [doesn't matter].

Amy's quote highlights that she believes NRSA is a better way to frame survivors than HSA, although she states that she would not ever identify herself using either of these terms. The notion that NRSA is better than HSA was a view also shared by Catherine: "I like that... I probably like that one [NRSA] more than historical [HSA]". Catherine preferred NRSA over HSA. However, Catherine was unaware of the term NRSA until her interview, and while she thought it sounded better than a historic framing, she has not been subject to use of that term in reference to her own experiences. A large

proportion of participants took issue with NRSA, as it was perceived to frame adult survivors in the same way as HSA. Some participants said that NRSA was better than HSA but still not representative of their experiences. For example, Raymond stated that in his view, while NRSA is a better framing, he also felt it was not a *good enough* term: "It's [NRSA] better than historical, but we do need something better than that... Maybe we need something for professionals to understand that it's [effects are] not just in the past." This quote portrays Raymond's point that framing CSA as historic or nonrecent may not help others, such as family and friends, or professionals, to understand how survivors are impacted by their experiences throughout their life course, and not just at the time of the abuse or at the time of disclosure. The interpretation of NRSA as framing adult survivors in the same way as HSA was consistent across participants. The reason why participants viewed these terms similarly was because of the way they felt both terms disregard the ongoing trauma experienced by adult survivors, even decades after the abuse was experienced. When the interviewer asked how the term nonrecent represented their experiences, Amber had this to say:

Non-recent it's not really... [it suggests] it [CSA] doesn't affect that person today.

So, it's almost like because it's not recent it's almost like you know it's not had a massive, significant impact on that person.

This extract taken from Amber's interview illustrates that some adult survivors may interpret NRSA as meaning that the survivor is not affected by their childhood sexual abuse experiences, which contradicts the views of all participants who discussed long-term consequences on things such as their health and relationships with others. Other participants also felt that the term NRSA had a similar effect to the term HSA. For instance, Elsie said this when asked what she thought of the term NRSA:

[It means] that it didn't happen recently.... That it happened a long time ago. Again, it's not very specific, so it can be left to the imagination. It's in the past still. It's not affecting the person. Maybe it has no bearing anymore because it's not recent. Recent implies something needs to be dealt with, as well.

From Elsie's perspective, a nonrecent framing may influence *how* people conceptualise adult survivor's experiences of CSA and therefore how they react to that person and how they deal with the long-term consequences the survivor may be experiencing. For example, people may not know exactly when the abuse occurred as it could have happened at any point in the disclosing individual's lifetime. For Elsie, people's inability to pinpoint when CSA has happened due to a nonrecent framing means that her current trauma is unrecognised because there is little to no acknowledgement that the effects of CSA can persist throughout the life course. For some participants then, the term NRSA places emphasis on the passing of time as much as HSA does and it feels as dismissive of their experiences. Peggy said it this way: "It still always feels like... that it [framing as nonrecent] dismisses it [CSA] somehow because it's talking about the fact that time has passed. It's child sexual abuse". NRSA is therefore deemed by Peggy to be an inaccurate representation of her CSA experiences because of the emphasis placed on the passing of time and she believes that it is important to reference 'child' in the label used to frame adult survivors, as they were children when the sexual abuse occurred. The significance of the term 'child' in CSA labels may be related to societal ideals of what constitutes an 'ideal survivor', as existing research suggests that when the survivor presents as a child, there is understanding that the survivor was not able to consent and that they require support (Ricciardelli, Spencer et al. 2021).

From this perspective, the terms HSA and NRSA go against what is considered an ideal survivor and as a consequence, survivors may not be believed and well responded to. Therefore, it is of importance to ensure adult survivors of CSA are framed within the remits of what constitutes an 'ideal survivor' by including the label 'child' in place of historical or non-recent, to ensure that survivors feel they can disclose and be supported throughout the process.

Although it is important to note that HSA and NRSA are sometimes referred to as Historical Child Sexual Abuse and Non-Recent Child Sexual Abuse. I did not ask participants about this term specifically. It is clear that the inclusion of the word 'child' was important to those interviewed as they felt that it portrayed their innocence and inability to consent to any sexual activity. However, whilst the term 'child' was deemed important to include, participants took issue with the inclusion of terms such as 'historical' and 'non-recent' elements of all labels currently used to frame adult CSA survivors. Therefore, it seems likely that these terms would still be seen as inappropriate. Further research around these terms may be warranted.

This section explored participants viewpoints of the term NRSA. The findings revealed that many participants believed that NRSA was a better way to frame adult CSA survivors when compared to HSA. Although whilst it was agreed NRSA was better, most participants felt that NRSA is not fundamentally different to HSA and that neither term appropriately acknowledges the trauma that adult survivors are left to endure years after the abuse ceased.

#### *Identifying as an HSA/NRSA survivor*

Participants were asked if they would identify as a 'historical' or 'nonrecent' sexual abuse survivor. A large proportion of participants said that they would not identify their

experiences as historical or nonrecent. These findings illustrate that there may be a disconnect between how adult survivors perceive themselves and how society views them, given the terms used to represent their experiences. Many participants said that they did not mind the term NRSA and that it is better than HSA, but participants still emphasised that they would not talk about themselves as a NRSA survivor as they felt the 'nonrecent' element was unnecessary and also misrepresentative of their lived experience. For example, Julia assertively states she would not identify as an HSA survivor, "No, I wouldn't. I guess others might call me that if they knew what had happened to me but... yeah why would you introduce yourself that way? You just wouldn't". Julia states that it would be unnecessary for her to identify as a historical abuse survivor, which illustrates that an HSA framing could be deemed inaccurate if adult survivors do not identify the same way that they are framed. Refuting both HSA and NRSA as a legitimate way to frame adult survivors was also prevalent in Lisa's interview: "I'm a survivor/survivor of childhood sexual abuse. When you look at me, you don't see a child. There is no need for these terms [HSA/NRSA]". In Lisa's view, a reframing should depict the innocence and vulnerability of the survivor at the time of the sexual abuse, which is why she feels it is important to ensure the word 'childhood' is included in the label that is used to frame adult CSA survivors. Therefore, for Lisa, the lack of inclusion of 'childhood' in sexual abuse labels suggests that her experiences are irrelevant and unimportant as her lack of power at the time, is not reflected in the current framing. Lisa's quote also puts forward that the concept of 'childhood sexual abuse' also contextualises adult survivors experiences as occurring in the past but not in a way that suggests their experiences as unimportant, like HSA/NRSA. Lisa was not the only participant to put forward the idea of using



“childhood sexual abuse” without the historical or nonrecent label as an alternative way to frame adult CSA survivors, as Darren said this:

I would go for... well yeah childhood sex abuse... cause that's what it was and anyone with a logical mind would say the same... I'm only... well the other two [HSA/NRSA] seem to be masking a little bit.

Darren's assertion that HSA and NRSA are labels that mask the severity of trauma that a survivor endures over their life, and for this reason, he deems the current framing as misrepresentative of adult survivor's experiences. The findings show that numerous participants in this research were unsatisfied with a historic or nonrecent framing due to the way it disregards any current, ongoing issues the survivor may face. For instance, Raymond said: “Maybe we just need something for professionals to understand that [CSA experiences are] not just [something that happened] in the past”. From this quote, Raymond asserts that the available terminology for adult survivors may not accurately represent his experiences as this framing does not suggest that he may be negatively impacted by his CSA experiences in his current adult life. For Raymond, the terms HSA and NRSA suggest that his experiences are no longer currently affecting him, which is not the case. On the other hand, Amy clarifies her understanding of NRSA and states that she believes the terms focuses on how long ago the abuse occurred, “I'd say something like oh this happened to me when I was a child, I don't think I would ever call it historical or nonrecent because it's not.”

As a result of asking participants if they would identify as a HSA or NRSA survivor, many put forward an alternative framing: childhood sexual abuse, the earliest stage of the life-course. Therefore, it may be helpful to reframe adult survivors' experiences in a way that demonstrates that the survivor was once an innocent child

when they were sexually abused and acknowledges that they are likely to have difficulties in adulthood making the abuse feel *recent* regardless of when in time and in their life course it occurred. This is important as participants in this research said that they felt both of the terms HSA and NRSA are dismissive of their experiences and that the terms diminish any current traumas they endure as a result of experiencing CSA.

### *CSA as recent to adult survivors*

This section assesses the long-term consequences participants reported as either the result of experiencing CSA, or as a result of the disclosure process. One main finding is that every single participant noted at least two or more long-term consequences of experiencing CSA. These consequences ranged from mental health issues such as hair plucking, eating disorders, depression, and anxiety, to struggling with everyday life, such as trouble with visiting the dentist, celebrating Christmas, or even leaving the house. Moreover, a running theme throughout the interviews was difficulties with addiction to drugs and alcohol. Here, I explore when and why these various difficulties emerged in participants lives, such as pre-disclosure and during disclosure, and how the difficulties were exacerbated by the way in which their abuse was framed by the use of these terms. Importantly, all participants noted that they did not feel that the CSA experiences should be framed as historic or non-recent because their abuse does not *feel* historic or nonrecent to them at any point in their life-course, even years after experiencing the CSA, or disclosing the CSA to someone else.

One example lies with how the event(s) of CSA and the disclosure process have the power to evoke strong emotional responses in survivors. For example, the findings showed that each time participants disclosed their experiences of CSA it provoked a

range of emotions, such as shame, guilt, relief, and anger, regardless of how many times they had previously disclosed their abuse. In particular, guilt and shame were consistent emotions that occurred for survivors both prior and subsequent to disclosure. Forty-year-old Elsie, who was six years old when she first disclosed, said, “I realised, oh [CSA is] something you’re meant to feel guilt and shame for. Cause it was disgusting what happened to me. And that’s my fault like that guilt... that shame like that’s mine”. As Elsie explained, she experienced guilt and shame in response to feeling at fault for what happened to her, and she has carried these feelings into adulthood. Elsie’s experience demonstrates how survivors are often emotionally reactive to their experiences because of a lack of agency in not being able to stop the CSA from occurring. The notion that Elsie has carried these feelings into adulthood adds to the argument that CSA does not feel nonrecent or historic to survivors, and Elsie specifically states that she continues to feel the lack of agency she experienced as a child, despite the increased agency that comes with adulthood.

One common emotion to arise for participants as a consequence of the CSA experiences was anger. This emotion was noted by participants as occurring before, during and often after their initial disclosure. For example, Sally, and others like her, spoke of feeling anger because she struggled to cope with keeping the abuse a secret: “There’s obviously a lot of underlying anger which gets misplaced, so you know, you’ll snap at something else. It did lead to anger issues so... in silence there was, like, a lot of suffering.” This statement from Sally shows how she felt heightened levels of anger in response to her CSA experiences, demonstrating that secret keeping can lead to issues with managing emotions which highlights how CSA can affect an individual long after the abuse occurred.

The emotional effect of CSA on survivors was present regardless of the age at which participants first disclosed the abuse. Even those participants who first disclosed their experiences in late adulthood (36+), decades after the abuse occurred, talked about how their experiences affected them emotionally. Jane, who disclosed at 18 and was 65 at the time of the interview, discussed the emotions her CSA experiences generate in her decades later, making the abuse feel recent despite the passing of time: "...and all the emotion and everything I felt at that time [is there] ... so I'll never forget it. It'll always stay with me. " Even though Jane's abuse occurred 55 years in the past, she still strongly emotionally reacts to the abuse when recounting her experiences, suggesting that CSA is not something that survivors just get over, since it often effects them, in different ways for life [explored further in this chapter]. The feeling of recency attached to CSA experiences, regardless of how long ago the abuse and the first disclosure occurred, illustrates how CSA disclosure does not necessarily mean that the CSA ceases to be an issue for the survivor. Instead, participants framed their experiences of CSA as presenting an ongoing emotional burden, that has stayed with them throughout their lives. From this perspective, whilst disclosure may facilitate healing, survivors still endure negative emotions and other mental, physical, and behavioural consequences related to the CSA years after first disclosure. The following section looks at the various mental health issues that participants in this research noted throughout their interviews.

### Mental health

Mental health was a natural, emergent theme in the data. For example, just under a quarter of participants said that they experienced a mental breakdown in response to either experiencing CSA or to disclosing. Amber developed mental health symptoms after the onset of the CSA at eleven years old, which she disclosed to her GP when it

occurred. Unfortunately, Amber's GP responded by telling her to stop being an attention-seeker which had a devastating effect on Amber's well-being. For example, she said:

At that point I started, erm... they said I had alopecia, but I started pulling my hair out. I pulled out my eyebrows, my eyelashes, and when I started getting pubic hair. I pulled that out too, and that was diagnosed as alopecia. And I wasn't washing myself properly and so I've learnt throughout my life that... it's anything to change the way I feel, anything, rather than just sit with me. To just sit... I used to find just sitting with myself really painful.

Amber stated in her interview that she felt that her difficulties were related not only to the CSA she experienced, but also to the reaction she received to her initial disclosure to her GP, highlighting the importance of the role of professionals in CSA disclosures. Amber's story also illustrates the necessity for a trauma-informed approach for professionals when CSA is disclosed because children may respond to negative reactions by neglecting their health or even self-harming. What is more, Amber's issues may also be due to the fact that she was not believed which in turn prevented her from accessing support or from getting help in stopping the CSA from occurring, as her abuse continued for three years after her initial disclosure. As an adult, Amber has continued to struggle with maintaining good health which she puts down to the difficulties she experienced as a child related to her CSA experiences and the negative reaction she received on disclosure. When considering the framing of adult CSA survivors, a historical and/or non-recent framing may not recognise the issues that many survivors endure throughout their life-course and why, for example, dysfunctional behaviours in childhood may have been normalised to an extent that they continue into adulthood. Amber stated in her interview that had she been

adequately responded to in her initial disclosure, she believes her life-course pathway would have been more positive and that she would not have adopted such dysfunctional behaviours in the first place.

These types of detrimental behaviours were displayed by numerous participants. For instance, Elsie said, “I had gotten myself into a nice little pattern of drinking alcohol and listening to sad music and self-harming, or like alcohol in itself is self-harming because you’d drink alcohol until the point you’re throwing up”. Elsie mainly had issues with alcohol and self-harm in adolescence and throughout young adulthood which depicts how mental health and self-destructive behaviours can allow some survivors who are struggling to cope with the CSA experiences. The issues that participants noted in this research adds to the argument that CSA does not feel historic or nonrecent to survivors because of how they endure symptoms of trauma from CSA throughout adulthood. Self-harm was a prevalent theme within the data, showing how many survivors may opt to cope with their abuse experiences at the time, such was the case for Peggy, who stated:

I was self-harming quite a bit, having a lot of nightmares and genuinely, it was very clear that I was mentally unwell. I was struggling to eat at the time as well, I wasn’t anorexic, but I had... I was sick all of the time, from mostly anxiety.

Peggy’s experience of coping with her CSA experiences meant that she developed mental health symptoms, such as anxiety and nightmares which persisted throughout adulthood. This finding that a high number of participants have been emotionally impacted by the CSA throughout their life course shows how CSA can disrupt emotional regulation in adulthood which helps us to understand the recency of survivors CSA experiences regardless of time passed since the abuse occurred.

Additionally, many participants provided insight as to why they had difficulties with their emotions, with the disclosure process being one of them:

I had to sign off work for six weeks cause of depression [after I disclosed]. I just couldn't get up and go to work... suddenly my body got tired, and I just done nothing. Not a good place to be... I don't think I had ever been like that before.

This quote from Julia shows how the disclosure process took an emotional toll on her to the point she was unable to work for a period of time, which in turn created financial difficulties. Julia noted that struggling financially as a result of emotional stress from disclosing caused her to become depressed and struggle with her everyday life activities, something she had not experienced before. Julia's account of experiencing depression portrays her feelings post-disclosure, as it was telling someone for the first time that triggered her to struggle, whereas she said that she felt that she was fine prior to disclosing. Although Julia noted that she had issues with being able to have a sexual relationship with her romantic partner because it triggered her. Whilst Julia stated that she was unaffected prior to disclosure, this was clearly not the case when she was having issues such as in her romantic relationship as a result of the CSA she experienced, highlighting a contradiction in her account. Moreover, Julia's emotional reaction to disclosing may be related to the notion that as she was now an adult, she was able to cognitively process what she had been through. Thus, CSA and the disclosure process can create strong emotional reactions for survivors across the life-course. Julia was not alone since numerous participants stated that they had anxiety depression in adulthood as a result of experiencing and disclosing CSA in adulthood. Kitty was another participant to disclose in adulthood and to demonstrate that she was more affected than she was pre-disclosure:

The flashbacks and the nightmares and stuff, but erm, but I suppose they [flashbacks & nightmares] sort of came later on after it [CSA] had all kind of stopped. Actually, if I look back, they were probably more prevalent after I spoke out.

Kitty stated in her interview that she still had difficulties prior to disclosure, but that she was unaware why she had these issues, whereas after disclosure, she was able to pinpoint what issues she had, and why. In addition, Kitty disclosed to the authorities, and she went to say that talking about the CSA in the level of detail that the police needed caused her to think more about her experiences and how they affected her, demonstrating why she may have been more effected post-disclosure.

These stories from participants show how disclosure is not a linear process and that disclosure itself is a life-event that has the potential to have a detrimental effect on the mental well-being of survivors at different times throughout the life course. This point is exemplified further by participant's accounts of having Post-Traumatic Stress Disorder (PTSD) as a result of the CSA experiences, highlighting the ways in which CSA manifests in adulthood. Natalie directly linked her PTSD to triggers that took her emotionally back to the time at which she was experiencing CSA, for example, a bad dream: "PTSD and you know that doesn't feel nonrecent [...] You know you feel like you're a child again, you, err, yeah you don't feel like it's historical when you... say get a bad dream or get a trigger." Hence, PTSD symptoms emerged for Natalie when a dream or other situation recreated similar feelings as to those she experienced when she was sexually abused. Natalie also noted feeling like a child again because of CSA, which was a comment made by three participants. For example, Raymond, also experienced nightmares because of CSA:



My wife tells me about what goes on when I'm sound asleep cause I shout out obscenities and that. They really scare me and of course I do lash out because I feel like I'm a little child again. I'm a big bloke and can take care of myself, but I'm not this little five- or six-year-old anymore with head face first in a pillow. Like I wish I could go into my nightmares as I am now.

Raymond's story illustrates that CSA survivors often relive their experiences and that it can impact their adult mental health, and potentially their romantic and other relationships. In Raymond's case, night-terrors in which he relived his CSA made the CSA feel as if it had just happened, and that he was like "a little child again". Raymond was not alone, as Jane said: "When I think about it [her CSA experiences]... I'm not a sixty-five-year-old woman [anymore]... I'm that ten-year-old child again". This excerpt from Jane's interview demonstrates just how CSA has the potential to evoke feelings of being taken back to being an abused child regardless of how old one is. From a similar perspective, Joan asserts that CSA survivors are affected by their experiences for life: "Cause in a person's mindset that's actually gone through [CSA], who is still living the effects of it years later... we are living the life sentences." Joan's reference to CSA as a 'life sentence', affirms that she believes survivors endure long-term consequences across the life-course, contextualising how experiencing CSA manifests in ways that creates feelings of trauma. For instance, participants mentioned flashbacks and nightmares, supporting the idea that CSA can feel very immediate to survivors, regardless of the passing of time since the abuse occurred.

An example of how serious mental health issues can be for CSA survivors, are stories of participants attempting suicide. For instance, Kelsey said this, attributing her struggles to her CSA experiences:

I got to the point where it was like something had to change, so I got to the stage where something changed, or it was below my bottom line... and... well, I wanted to die, that were it. And you know, I... I have worked hard I think in therapy. I have made some very serious suicide attempts with the intention of just leaving this earth.

Kelsey's quote demonstrates how much she struggled with her mental health, to the point she made attempts to end her life, which she attributes directly to difficulties in dealing with the long-term consequences of CSA for her mental health. Catherine was another participant that spoke of suicide attempts that she felt were a direct result of experiencing CSA:

So distressed, you know. I've had over fifty attempts on my life. You know, suicidal attempts... over... you know, life's not worth living for me, it's not. I have to try and find a reason and I can't anymore. I'm at the end of my tether.

Catherine still feels suicidal at times because of experiencing CSA, showing how survivors may require mental health support and treatment as a result of feeling distressed throughout their life course and not just as children, or at the time of disclosure. These findings give us insight into reasons why CSA survivors feel that labels such as historical and non-recent are not correct. Rather, CSA survivors experience a myriad of difficulties in childhood and into adulthood, such as suicide attempts, self-harm, PTSD, depression, and anxiety, resulting in the abuse being ever present in their lives and feeling every day as if it happened yesterday. The quotes provided by participants also illustrate the complex ways that mental health can manifest for CSA survivors in different stages of the life-course, which offers understanding into how survivors are affected in adult life. Most importantly,

participants in this research have shown that they feel it is important that mental health issues be recognised as symptoms of trauma that stem from them experiencing CSA. Taken together, these findings support the idea that many adult survivors feel that how something is framed is important, and that framing in a way that recognises the trauma experienced, such as the damage the CSA has done to their mental health and well-being.

### Family lives

Another long-term consequence to arise for some participants is related specifically to disclosing CSA. The fourth chapter in this thesis, linked lives, covers responses from family to CSA disclosure, whereas this section of the chapter looks at the consequences of not having close links to family members as a result of being negatively responded to, and disbelieved. Numerous participants noted the negative impact that the response to their disclosure had on their family lives. A few of these participants who noted a negative consequence in their family lives as a result of disclosure said that after they disclosed, they were the 'black sheep' of the family. For example, Anthony said this: "You then become the black sheep of the family. It's something I can never talk about with them... because I went out public with it as well". Anthony's quote demonstrates how a disclosure can impact the family lives of some CSA survivors in a way where the survivor is positioned as different to everyone else in the family.

Kitty provides one example of how adult survivors face complex issues post-disclosure, such as not being believed or being disowned by family members. She said this about what happened after she revealed that she was sexually abused by her father to members of her family: "My mum believed me, but many family members

didn't. So yeah, there's always gonna be, well now I can say I have a broken family, yeah". In Kitty's case, while her mother was supportive when she disclosed, the lack of willingness on the part of other family led to the breakdown of her relationships with those family members. Because she was close to her siblings and they did not believe that she had been abused, the disclosure of the CSA meant that she lost important relationships, thereby lessening her support system just at a time when she most needed support. Kitty called this having a 'broken family' and demonstrates the ways in which CSA can have the power to destroy familial relationships, particularly when the perpetrator is within the family unit. The impact of negative familial responses support the argument that CSA feel very recent to survivors regardless of the time that has passed since the abuse occurred. This may be the case at the point of disclosure because this is when significant, often negative changes can occur in a survivor's life, which can contribute to the feeling that the CSA does not feel non-recent. Charlotte was another participant to be sexually abused by her father and she also was not believed by family members which had a detrimental effect on her :

People in my family who I've told, because before that, I was close to them and everything [but we weren't close after]... But... I was depressed I mean like at the time I was eighteen I was still like really affected by it... by my family not believing me.

Charlotte also stated that she still is affected by her family not believing her, but because she has a young child, she tries to put on a brave face for him. The lack of belief on the part of Charlotte's family illustrates the complex nature of disclosure. While there was some positive response to disclosure, having some close family members do not believe that she had been abused affected her mental health to the point she developed depression. Losing close family relationships may be a

contributory factor in the CSA feeling recent, as survivors may not have their trauma acknowledged by people they are close to means that there is ongoing re-traumatisation when she interacts with these previously close family members. Likewise, James states that when he disclosed to his parents, they did not believe him and as a consequence, he developed a stammer:

I explained it to my parents. basically... they didn't believe me and... that was the hard part. And I had a very bad stammer as a consequence of it. Then after about eighteen months you begin to realise this... this isn't right, and you can't talk to your parents and so there's no use there.

James's assertion that there's "no use there", suggests that disbelief can affect the survivor not only at the time, but also make them less likely to disclose in the future. One reason that James was disbelieved may be because his parents were the ones who sent James to the school where he was abused by his chaplain and the feeling of guilt was too much for them. Another reason may lie with the fact that James's parents were very religious, and they could not believe that someone who worked for God could commit such an act. James's statement demonstrates how some adult survivors may develop unusual consequences, such as a stammer, as a result of experiencing a negative CSA disclosure. This consequence continued for James until he reached his forties, where he worked with a professional to help reduce the severity of his stammer. At the time of his interview, James still had a stammer at times which he believed arose as a direct consequence of experiencing CSA: "Even today if I meet someone, I always say my name is Jones... James but I couldn't just say James or... or... or... or... in my head I could say it, but it was the darn stammer". This quote from James illuminates the various ways in which survivors are effected by CSA, even effecting speech.

Taken together, these quotes illustrate that CSA disclosures and the consequences of receiving a negative response can affect the life-course in unprecedented ways, regardless of how long ago the CSA occurred. Experiencing these consequences show that survivors can endure sometimes life-long issues which may directly or indirectly remind them of the CSA experiences and contribute to the CSA feeling recent. If participants note so many different reasons why the CSA feels recent to them, then it could be considered that the labelling of CSA should be reframed to reflect the ongoing trauma that a survivor can endure, which the labels of historical and non-recent do not achieve. This reframing is critically important because many survivors are disclosing in adulthood and late adulthood, and even years after the abuse survivors are impacted by disclosures and how also by how that disclosure is responded to. It is clear, then, that a historic or non-recent framing is likely to be misrepresentative of survivors experiences.

### Life events

This section explores the consequences that CSA adult survivors endure when trying to cope with everyday events throughout their life course which provides insight into why they may feel their experiences feel recent to them. Showing participants accounts of why the CSA experiences feel recent to them, contributes to the argument that adult survivors should not be framed as historic or non-recent. For instance, Elsie explored the notion that some survivors re-experience elements of their abuse years later through external triggers in their lives:

I have a physical stress-response, and I feel like I'm reliving it. Every time you bring it up, it can feel like it's happened all over again. Depends on... sometimes you can just be triggered, and it feels like it just happened... by a song... a topic

that's come up in a psychology class or a documentary that you didn't realise was gonna go in this direction.

Elsie illustrates just how some survivors can be affected by the CSA experiences because she said that when she hears of CSA or rape, she instantly feels the guilt and shame that she felt when she was a child. She went on to say that thinking about her experiences can cause her to think intensely about disclosing to the police, since she had not disclosed to the authorities due to not wanting to re-experience her CSA by giving her statement. Elsie was not the only participant to explain that triggers in their environment can contribute to the CSA experiences feeling recent, since Steve was triggered by Christmas every year due to being told by his perpetrator that Santa Claus would not come if he disclosed the abuse he was experiencing to anyone: "I'd start feeling [trauma] at around Christmas, cause my abuser used to say, "Father Christmas won't come if you don't do what I want you to". So yeah, he'd threaten whatever... so... Christmas makes me uncomfortable". Hence, Christmas and the threat of Santa Claus skipping his house, were used by his abuser as methods to groom and silence him, leaving him with persistent PTSD symptoms during the holiday season. A few participants mentioned difficulties with celebrating Christmas. Natalie struggled because she believed that most people spend Christmas with their families which to her, was a reminder that she was unable to do so due to not having links to her family members:

It's things like Christmas that I struggle with cause you know you can't... when it's times like Christmas it's all about family isn't it? and I know I have my own little family... but you know what... what I think it is... is not having a mum.

This quote from Natalie shows how specific events may increase the feelings of recency some CSA survivors experience because those events are connected to their childhood CSA experiences. Life events can therefore be difficult for the adult CSA survivor as they may evoke feelings associated with the childhood trauma, making their experiences feel recent, rather than historic, or non-recent. Another example of how life events can be disrupted as a result of experiencing or disclosing CSA lies with Pippa's account of going to the dentist:

He [her dentist] just sort of said erm... "oh gosh... this gagging honestly, honestly, what on earth is this gagging, why is it so bad", or something like that and I just sort of said, "it's from when I was a child. I was sexually abused as a child and people putting things in my mouth just gives me massive problems".

Pippa's statement illustrates the complex ways in which a survivor may be affected by experiencing sexual abuse in childhood later on in life, such as her struggles with visits to the dentist. Pippa was not alone in feeling as if one's current life can be marred by past CSA experiences. For instance, Kelsey was triggered when she had to have tests and treatments for breast cancer. She talks about her experience within the National Health Service (NHS):

There's a lot of emotional triggers but I went into this room and this woman says, "oh get undressed and lay down" and there was no screen there and there was nothing to cover me. Because emotionally, you do go back [to when you were abused]. And that was an overlap in my abuse really... people watch you get undressed, like there was literally people in the room watching me, get undressed and go and lay down. I swear they told me it was like a grade three aggressive cancer and it just like... it triggered major post-traumatic stress



because I'd have to get undressed as a child and walk across the room knowing that I was going to be raped. So, you know, it was awful. And there were lots and lots of times like they were so insensitive.

Kelsey explains how experiencing breast cancer and the treatment she received triggered feelings related to the CSA which made her feel vulnerable, due to the nature of the tests and treatment she had to endure to go into remission. Kelsey's experience from the NHS indicates that there is a lack of trauma-informed training and practice, whereby medical professionals should be aware of their patients history, such as issues that may cause their patients stress throughout particular procedures. Pippa's and Kelsey's quotes indicate the importance of a trauma-informed approach within the NHS and other related settings and that adult CSA survivors are often triggered by the CSA in a number of different and sometimes unexpected ways.

Participants were directly asked if the CSA experiences *felt* non-recent or historical to them either at the time of disclosure or at the time of the interview. Charlotte was one participant to connect her issue with framing adult CSA survivors as historical to her current feelings about her CSA: "I don't think it [CSA] is historical cause... cause when I've been at my poorly worst, it doesn't feel historical it feels like it's here and now". As Charlotte indicates, she feels that she is affected in her current life by the CSA she experienced and for this reason, she stresses that CSA experiences do not *feel* historical or nonrecent, therefore making any such label non-representative of her lived experience. Charlotte was not the only participant to address how adult CSA survivors may feel that their experiences are recent regardless of how long ago the CSA occurred. Steve said this: "That's the thing, you carry around this sort of thing forever... cause you can't forget about it, it'll always be a big part of you... you've just got to accommodate." Steve's quote highlights how some survivors

feel that CSA affects survivors throughout their life course, and it is this that majorly contributes to CSA *feeling* recent to the survivor. Joan was another participant to describe her CSA experiences as feeling recent to her, as if the abuse was still happening: “So to us, [the CSA is] an everyday occurrence.” Joan and others interviewed stressed that to them the CSA they experienced could have happened yesterday or years ago – the resulting feeling for them were the same and the CSA was essentially relived each day and so part of their daily lived experience. This section of the chapter has addressed how many of the individuals that took part in this study did not believe that their experiences felt historical or nonrecent and the main reason why is that they endure consequences, such as on their emotions, health, and relationships. The findings from chapter six also explores how CSA survivors life-course trajectories are disrupted as a result of experiences of CSA or disclosure which may be used to support the argument that framing should reflect the ongoing trauma and difficulties that survivors face across the life-course.

The notion that CSA does not feel historic or nonrecent was the case regardless of how long ago the CSA was, or when the disclosure took place. These findings illustrate how CSA can have life-long implications for some survivors which many participants feel should be reflected in the language used to describe those experiences.

This chapter has shown that participants in this research overall do not agree that HSA is an accurate way to frame adult CSA survivors. There were various reasons provided by participants as to why HSA was an erroneous way to frame individuals with CSA experiences. The first theme to emerge demonstrated that some participants took issue with the connotations attached to historic, whereby historical figures and time periods were mentioned, meaning that they participants believed that others

would think their experiences occurred long ago that the perpetrator would also be dead, which was not the case for these participants. Another theme to emerge was the insinuation that adult survivor's experiences are unimportant, as HSA suggests adult survivors experiences occurred so long ago that their feelings do not matter and not worthy of current concern in society as focus should only be put on children's protection. Likewise, another theme to arise in response to HSA was that participants believed that there is a general consensus in society that adult CSA survivor's should 'get over it', as they should not be currently affected by the CSA. These three themes show how some CSA survivors may take issue with a historical framing as survivors may feel unsupported due to the way HSA suggests their experiences are unimportant, or not worth current concern. NRSA was deemed to be no different than HSA, with the main reason being that there is an emphasis on adult CSA experiences not being recent, which to the participants in this research, was not the case. As a result, the majority of participants stated that they would not identify as HSA or NRSA survivor which illustrates that these terms may be considered an inaccurate way to frame adult survivors. Further, this kind of framing may be considered to be unfavourable for adult survivors since experiencing CSA and disclosing CSA is shown in this chapter to be detrimental to the well-being of participants. Therefore, the long-term consequences that adult survivors often endure means that the CSA does not feel historic or nonrecent to them. For instance, this chapter showed that many participants struggled with everyday life events, such as visiting the dentist, receiving treatment from the NHS, and celebrating Christmas. Further research conducted with the both the public (non-survivors) and professionals is required in order to determine how HSA and NRSA is widely perceived and to see whether this level of framing influences responses to adult survivors. Further research will enable us to see if an alternative

framing can influence survivors to disclose and if there is an improvement in positive responses. More research is required to understand the impact of disclosure on the mental health of survivors and whether an alternative framing would help to recognise the long-lasting impact of CSA. Last, the framing of NRSA may compromise the goals of trauma-informed care as older survivors may not be viewed as vulnerable or traumatised by CSA. From this perspective, a nonrecent framing may also discourage disclosures as survivors may feel their experiences will not be fully understood or that they will be met with less urgency. Thus, from a trauma-informed perspective, it may be helpful to draw upon language that is trauma-informed, for instance, drawing upon adult survivors viewpoints to identify which labels recognise the impact of the lifetime of trauma endured as a result of experiencing CSA. For this reason, it may be necessary to frame living adult CSA survivors as 'childhood sexual abuse' survivors, eliminating the emphasis on the passing of time and redirecting it to the abuse the survivors have experienced. Thus, an alternative framing may be beneficial to how survivors are addressed, which in turn may help survivors feel their trauma is recognised and not dismissed by insinuating that their experiences do not matter because time has passed.

## 8. Discussion

This research project sought to answer four research questions:

- What are the facilitators and barriers to CSA disclosure across the life-course?
- What impact does the timing of disclosure have on adult survivors?
- How does disclosing CSA feel as a process? For example, pre-disclosure, midst-disclosure, and post-disclosure?
- What issues arise for adult survivors when framing CSA as non-recent?

First, I underscored both barriers and facilitators to disclosure, by drawing upon different themes of the life-course, such as linked lives, historical events, and time periods. I also utilised framing theory to show how there are sociological barriers and facilitators to disclosure, such as the language used to frame survivors, for instance, Historical Sexual Abuse (HSA) and Non-Recent Sexual Abuse (NRSA). This is a novel aspect of research as no qualitative studies to date, have addressed how survivors understand the terms used to frame them. My findings showed that the current framing is deemed unfit by survivors and as potentially dissuading survivors from disclosing the CSA experiences. An assessment of differences in survivor's experiences depending on when survivors disclosed, i.e., in childhood, young or late adulthood, showed that those disclosing in childhood have significantly different experiences to those disclosing in adulthood. A comparison of disclosures at different stages of the life-course is important as according to Alaggia, Collin-Vézina et al. (2019), this has sparsely been addressed in research.

My findings in relation to the timing of disclosure also showed that those disclosing in childhood have different motivations for disclosing than those in

adulthood and that they are much more likely to receive negative responses. The responses that participants received was a main finding, showing that responses are related to how survivors are able to link to others in their lives and how survivors experience their life-course trajectories. I also looked at the timing of disclosure from analysing generations of participants disclosure experiences.

My findings revealed that there are stark differences in experiences of disclosure, mainly due to societal expectations and ideologies surrounding CSA survivors. The use of linked lives meant I was able to look at disclosure as a process, i.e., pre-disclosure, midst-disclosure, and post disclosure, and how relationships were effected by CSA and before and after disclosure taking place. Post-disclosure looked at the impact of CSA and disclosure on relationships. Last, this chapter makes recommendations for further research and also reflects on the limitations of this study.

## Facilitators and Barriers to CSA Disclosure

This research underlined numerous different barriers and facilitators to disclosure, meaning that there were various factors that influenced or hindered participants ability to tell someone about the CSA.

### *Barriers to disclosure*

One main finding to emerge when assessing barriers to disclosure was participants accounts of feeling shame. Feelings of shame stemmed from factors such as participant's feeling that they had partaken in their own CSA. This finding is consistent with existing research, as a qualitative study that took place in 2013 showed that 76% of participants noted shame was the factor that prevented them from disclosing (Taylor and Norma 2013, MacGinley, Breckenridge et al. 2019). Another reason outlined by

some participants for not being able to link to others in order to disclose was the concern that their experiences would be perceived by others as an incestual relationship, rather than as abuse since their perpetrator was a family member. The fear that the CSA experiences may have been seen as incest added an additional layer of shame for the participants, since they were afraid that if they disclosed, they would be conceptualised as having partaken in their own CSA. Whilst it is clear that these participants as children being sexually abused could not have consented, their concern should be recognised as a valid reason for a non-disclosure. This finding that shame acts as a significant barrier to disclosure may be related to the notion that disclosures are often delayed, which is consistent with previous research into delayed disclosures (Latiff, Fang et al. 2024). My findings showed that feelings of shame occurred regardless of whether disclosure is delayed, although, the extent to which shame was experienced differed depending on whether participants received a negative response.

A large number of participants in this research were sexually abused by a family member, such as fathers, stepfathers and brothers which is consistent with existing literature (Shaw, Lewis et al. 2000, Butler 2013, Pérez-Fuentes, Olfson et al. 2013, Murray, Nguyen et al. 2014). My findings in chapter four showed that participants had difficulties linking to others in order for a disclosure to take place when they are sexually abused by someone within the family home, likely due to the close proximity of the perpetrator, since the survivor was frequently groomed and threatened. Additionally, participants were afraid of disclosing due to the threat to the family unit, such as losing relationships or not being able to live at the family home.

The majority of participants were sexually abused by someone closely linked to them in their family, which may explain why feelings of shame were noted so much.

One reason for this finding may be related to current research as CSA that is conceptualised as incestual is particularly damaging for survivors psychologically in comparison to survivors sexually abused by someone who is not a close family member (Lawson and Akay-Sullivan 2020). My finding showed that survivors are often closely linked to their perpetrator, which may mean that my sample faced more barriers to disclosure than those who were not living with their perpetrator.

Some of the participants felt at fault for 'allowing' the CSA to occur for so long, demonstrating that the longevity of the CSA may exacerbate feelings of shame because they were unable to stop themselves from being abused. Therefore, shame often prevents survivors from linking to other people to disclose. Research has found that repeated incidents of CSA are associated with a delayed disclosure (Hershkowitz, Lanes et al. 2007). Further work must be conducted to determine how survivors internalise a lack of disclosure and what message needs to be sent out in society for children to feel believed regardless of how many incidents have occurred. In my data, a fear of not being believed was a prominent reason for delaying disclosure. Participant's suggest that their lack of disclosure was connected to their fear of being disbelieved. This finding suggests that whilst there is a current societal message that survivors disclosing will be believed, survivors do not understand or do not believe this message, with survivors displaying a fear of being disbelieved and most citing this as a reason for delaying disclosure. Though research has shown that whilst the message that survivors will be believed is strongly portrayed in contemporary society, at the same time, people may not believe disclosures made to them because they do not want to believe that the prevalence of CSA is as high as it is (Cromer and Goldsmith 2010).



Another finding related to survivor believability is the notion of what makes an ideal survivor. For example, more than one participant said that they were concerned about being believed because they felt they did not appear 'survivor enough', meaning that they appeared to handle the CSA experiences. In their view, if someone does not appear to be traumatised enough, then they lose the right to make the claim that they were a survivor. This feeling may be at least in part linked to the notion that traumatisation often begins in adulthood when survivors become adults and thus have the cognitive ability to process the CSA experiences (Clancy 2011). However, it was not just the fear of being disbelieved that motivated delayed disclosures since there were fears surrounding what would happen if their disclosure was acted upon. For example, one participant felt he could not disclose as he would be stopped from playing football for a high-profile team since his perpetrator was his football coach. the fear he would not be able to pursue his dream career was the reason he did not disclose until he reached his early thirties, indicating that sometimes, the fear of what may happen post-disclosure such as a change in their potential life trajectory may in itself be a barrier to disclosure. This finding may also be related to historical time periods as CSA was more taboo in society when this participant was a child, than in recent times (Peter 2009).

A key finding to understanding barriers to disclosure was the idea that many participants expressed about not having the words to describe their experiences when they were children. Having difficulty describing and explaining their experiences was mentioned by many participants who said that as children they struggled to be able to depict their experiences, with some saying they just innately knew and felt that the CSA was 'wrong'. These participants struggled to put the CSA experiences into words due to a lack of education on what sexual abuse was, which is something that often

developed later on with sex education at school or learning about sex from their peers. Older participants said that they could not remember ever having sex education at school which also acted as a barrier to disclosure as they did not understand the concept of consent or of CSA. The reason for this finding may be related to a lack of implementation of sex education in schools which did not happen until 1978 (Pilcher 2005, Feeney 2015). Hence, those born between 1960-1980's were the first cohort to be educated about sexual health within the school setting. However, my findings showed that for these participants the sex education they got was more focused on biology, such as the anatomy of people, rather than consent or CSA (see chapter five). Participants born between 1980's-2000's stated they learnt more about consent, but this did not prevent feelings of shame acting as a barrier to disclosure. Although those managed as a child to find the words to disclose, were often met with negative responses (see chapter four), indicating that adults in society need further education around CSA and disclosure so that children can be better supported when they do disclose.

The concept of linked lives considers how life-courses are interlinked with others through shared relationships (Hagestad 2018). Another barrier to disclosure was a lack of trust of others in their lives (see chapter four). Having a lack of trust for people meant that participants had difficulties forming strong links to others, such as to family or friends, in the same way that their peers did. Trust was shown to be important for understanding disclosures since participants sought someone they could trust, which demonstrated how disclosure is a process which begins before telling someone about the CSA experiences. What is more, participants who experienced 'broken trust', such as CSA occurring in the family home and perpetrated by someone

they were told they could and should trust, often translated to trust issues in adulthood and even more difficulty in connecting with others.

A main finding from this research was that the current framing of CSA survivors can also act as a barrier to disclosure (see chapter seven). Almost all participants discussed feeling that the CSA claims would not be taken seriously because their experiences occurred 'long ago', in line with current framing of CSA as historical or non-recent. My findings that survivor's fear that their experiences will not be taken seriously (see chapter four), and my findings in chapter seven suggest that the terminology used within the legal system and in broader society may be a major contributing factor to this fear. Further, my findings showed that participants felt that framing adult CSA experiences as historical was incongruent with their personal identities because the term reminded them of historical time periods or figures, such as the Victorian era or Henry VIII. Participants explained the use of the word "historical" suggests that their experiences are not worthy of current concern. This finding corresponds with the viewpoints of legal scholars who draw upon HSA to address adult CSA survivors on a regular basis. For instance, Ring, Gleeson et al. (2022) said that HSA "wrongly implies the abuse occurred at some distant point in the past, and is of historical, not contemporary relevance" (pp.5). Therefore, my findings, coupled with the viewpoints of legal scholars show that HSA is not an accurate way to frame adult survivors due to situating living survivors experiences as not affecting them currently.

No other studies to date have shown how survivors conceptualise the framing used to describe them and any implications this may have for them. My findings demonstrated that HSA and NRSA hinders disclosure, and that framing a societal issue such as CSA has real-world implications such as preventing a survivor from accessing support or justice. According to researchers, negative labelling of CSA

survivors can act as a barrier to disclosure for survivors (Alaggia, Collin-Vézina et al. 2019, ERSOY, ÇETİNTAŞ et al. 2022), and HSA and NRSA were overall perceived as negative by participants in this research.

My findings also suggest that social norms are closely linked to how CSA is framed. Participant's discussed the notion that the etymology of other crimes, such as murder, are not focused on time since the crime occurred. In fact, the historical framing of crimes appears to be uniquely linked to CSA. For instance, sexual crimes against adults, and any other crimes against children, such as physical abuse, are not framed as historical or nonrecent. Numerous participants mentioned that murder is not framed as historical, despite the notion that the murder may have occurred many years ago and the fact that the survivor of a murder is no longer alive, while the CSA survivor is. This finding surrounding the construction of labels used to frame survivors of crime suggests that society plays a significant role in the framing of adult CSA survivors. The participants in this research also focused on the semantic meaning of NRSA, which they argued is too similar to HSA as there is still a focus on time, which for survivors, carries with it the strong suggestion that they should no longer be affected by their "past" experiences. Therefore, HSA can be seen as a negative term as it was perceived by participants as a deterrent to linking to others, which must happen in order for a disclosure to take place.

Another potential barrier to disclosure evident in the findings was how a lack of inclusivity, such as for men, or typical, rather than attractive looking survivors led to participants feeling excluded in societal movements or discourses. Also, whilst participant's learning of Jimmy Savile's crimes (see chapter five) acted as a facilitator, others acted as a barrier due to the popularity of the perpetrator, as was the case with Michael Jackson. Both Michael Jackson and Jimmy Savile were not found guilty in a

court of law, and survivors disclosed after their deaths, and yet there were differential discourses surrounding their survivors. For instance, participants perceived the uncovering of Michael Jackson's crimes as being harmful to survivors because there was a discourse that these survivors wanted money and that was the motivator for their disclosure. One participant made reference to survivors attempting to extort money when discussing Jimmy Savile's CSA crimes. A discourse that CSA survivors disclose for monetary gain may be harmful as it may discourage disclosures in the real-world. These findings show that whilst it is important that CSA is in the public eye, there are sociological implications from societal discourses surrounding CSA.

### *Facilitators to disclosure*

Factors that facilitate disclosure have been extensively researched (Alaggia, Collin-Vézina et al. 2019, Latiff, Fang et al. 2024). One recent study found that there are numerous variables at play when considering what facilitates CSA disclosures, suggesting that the disclosure process is often complex (Latiff, Fang et al. 2024). A novel finding was that it was the belief of participants that learning about consent and sex would encourage survivors to disclose earlier (see chapter five). For the majority of this sample, participants were not provided with information around sex, consent, and abuse until they were adolescents, leaving them unaware that what had occurred to them was abuse. Although some stated that they innately knew it was wrong. A new finding was that historical time periods are relative to survivor's access to societal information surrounding sex since for older participants, they were not given any information on sex or abuse at all in childhood. When sex education was introduced in the UK, it was only implemented in secondary schools (Wight 2011). Thus, the majority of my sample apart from a select few older participants had sex education between the ages of 13-15 years. However, now, sex education begins in primary

schools, since the National Society for Prevention against Cruelty to Children (NSPCC) often go to schools and provide assemblies to teach children about sex in an age appropriate way (Barter, Batool et al. 2024). The earlier provision of sex education and teaching about consent illustrates how social norms can govern the behaviour of children and adolescents, which in turn may encourage links to others as learning about sex can encourage disclosures. Many younger survivors outlined sex education as a time period which was key to them understanding that their first sexual experiences should be considered an abuse of power. It was this moment in time they realised that they were a survivor of CSA.

For some participants, this knowledge motivated disclosure since they understood that they could not have consented. However, other participants stated learning about sex was a time period in their lives that meant they felt shame as they realised they were different from their peers and had experienced something that others had not. Current research found that there was not an association between sex education and disclosure (Rudolph, Zimmer-Gembeck et al. 2022), although my findings show that survivors *believed* earlier education may encourage earlier disclosure. Further research is required to see if sex education programmes, such as those provided by the NSPCC do indeed encourage earlier disclosures. These findings indicate that what may be a facilitator for one survivor, may be a barrier for another survivor.

Another facilitator to disclosure mentioned by a few participants was the need to disclose in order to protect other children from experiencing CSA by the same perpetrator who abused them. This findings is consistent with the existing literature (Tener and Murphy 2015). However, my research extends this finding, because this desire to protect children from their perpetrator only arose in participants disclosing in

adulthood and late adulthood, whereby those disclosing as children mainly disclosed in order to prevent the CSA occurring to them again (see chapter six). This finding emphasizes the utility of using a life course framing for studying CSA disclosure and suggest that there are facilitators that are age specific as well as generationally specific, or specific to cultural narratives in specific historical time periods.

My findings also showed that perceived trust acted as a facilitator to disclosure, which was the case for many participants that disclosed, regardless of the response they received (see chapter four). These findings show that those that spoke about deliberately delaying disclosure often said that a lack of trust in others and specifically in those linked to them was why they felt they could not disclose. Therefore, we can conclude that perceived trust must be present for a disclosure to take place. Linked lives then is important for understanding disclosures across the life-course since survivors cannot link to others without a foundation of trust, suggesting the importance of building a rapport with suspected CSA survivors so that a disclosure can occur. Though it is an under researched phenomenon in the CSA literature, the notion of trust has been previously explored in encouraging children to disclose (Brennan and McElvaney 2020). My findings show that trust is important for disclosure to occur, not just for children, but for adults too.

Another key finding of my research is the extent to which the Jimmy Savile scandal acted as a facilitator to disclosure (see chapter five), which is consistent with statistics since there was a 60% increase in reports to the police and an 81% increase in calls to the NSPCC (Boyle 2018). This increase of disclosures due to the cultural learning of Savile's campaign of CSA was penned 'the Savile effect' by researchers (Greer and McLaughlin 2015). My research also indicated that participants born from different generations were influenced by this 'Savile effect', although no research has

explored how survivors in general were affected by learning of his crimes. The way that the media reported Savile's sex crimes meant that participants in this research felt they could go to the police, which was true even for participants born from older generations.

Another potential facilitator to disclosure is a reframing of the terms describing adult CSA survivors, which may encourage them to link to others (see Chapter seven). Many participants noted that the existing framing acts as a deterrent to disclosure and some participants put forward an alternative term which they felt framed adult survivors more favourably. For example, 'childhood sexual abuse' without a time element such as historical or non-recent, was felt to better depict their experiences. Participants felt that the use of CSA communicated the fact they were sexually abused in childhood without placing emphasis on when those experiences occurred. Thus, a reframing may enable survivors to feel that society supports them regardless of when the CSA occurred, or when they felt able to disclose the CSA experiences. A reframing is of importance if it can influence disclosures rather than act as a barrier. It was the belief of participants that an alternative framing would be more reflective of the long-term consequences and trauma that adult survivors endure throughout their life-course, as well as acting to facilitate disclosure of those experiences, enabling more people to get the treatment they need for the trauma they experienced.

### Impact of the timing of disclosure

Little research has addressed the impact that the timing of disclosure may have on individuals (Alaggia, Collin-Vézina et al. 2019). This research project is one of the first to compare disclosures made at different stages of the life-course in one single qualitative study. My findings showed that disclosure appears to disrupt trajectories in



the life-course depending on *when* disclosure took place (see chapter six). For example, some participants could not work when they were disclosing for the first time or when they disclosed to the police. These findings demonstrate the ways in which the process of disclosure has the potential to disrupt life course trajectories.

### *Childhood disclosures*

One main finding of this research was that participants disclosing in childhood received more negative responses than participants disclosing in young or late adulthood (see chapter four). Half of participants that disclosed in childhood, disclosed to their mothers and the majority received negative responses (see chapter four). The concept of linked lives is useful here since the majority of mothers disclosed to by participants were linked to the perpetrator of the CSA, i.e., husbands or sons, further illustrating that the disclosure process may not be clear-cut. One factor that may explain negative responses from mothers for participants that disclosed in childhood is the degree to which CSA goes against societal ideals because children are innocent and thus should not engage in sexual activity. This societal ideal surrounding children and sex means that these mothers may have been more likely to respond negatively as the idea that their child had sex, regardless of the context of that sexual activity, is something that they as mothers should feel ashamed of. Another factor takes into account the experiences of these mothers, is that they do not want to believe that their spouse, or child could be a sexual perpetrator. My findings also revealed that participants disclosing to mothers in adulthood or late adulthood were more likely to receive a supportive response as compared to those who disclosed to their mother in childhood. According to Wamser-Nanney (2017), mother and child relationships often change post-disclosure in comparison to their relationship pre-disclosure, thus, CSA disclosure has the ability to alter relationship trajectories. More research is required to

see if historical time periods are important to responses by mothers to CSA disclosures and whether they have improved in recent years.

Another main finding in this research was that those disclosing in childhood face greater disruption to their life-course trajectories than those disclosing in young or late adulthood, regardless of the age at which the CSA occurred. For instance, participants disclosing in their school years faced much more disruption to their learning and ability to transition from school to university (see chapter six). This was the case because some participants who disclosed in childhood were not encouraged to attend school by their primary caregivers, which one participant theorised was because her parents did not want the school to find out about the CSA that was occurring. Current research suggests that the longer disclosure is delayed, the greater the consequences survivors face across the life-course (Alaggia, Collin-Vézina et al. 2019, Allard-Gaudreau, Poirier et al. 2024). The findings from my study suggest that greater consequences are linked both to the timing of disclosure (see chapter six) *and* to the responses survivors receive (see chapter four). Participants that disclosed in childhood said they were negatively affected by the response they received which in turn created inner issues which caused them to truant or misbehave, which in turn meant they were unable to learn and successfully transition from school. Those disclosing in young or late adulthood still faced difficulties in school as a result of experiencing CSA, but most managed to transition from school into university or to enter employment. This finding suggests that disclosing in childhood and being negatively responded to, may be a risk factor for an incomplete education as survivors felt disbelieved which may have a greater impact on their ability to complete schooling than hiding the CSA abuse they experience.

It was not just school transitions that were interrupted, but also transitions related to university. Many participants noted that they felt that they were unable to handle attending university, which mean that they were also unable to meet their true potential, due to their experience of CSA. This finding is in line with developmental risk and protection as a theme of the life-course which states that negative childhood experiences create long-term consequences in adulthood (Hutchison 2010). Although, as adults, some participants did exhibit human agency, and re-transitioned into education in later years, suggesting that CSA survivors may eventually experience typical life transitions, they may be more likely to do so off-time.

Another finding to emerge was how those that disclosed in childhood demonstrated issues with sex later in life, such as promiscuity or abstinence (see Chapter 4). Some participants attempted to resolve these issues with therapy and for a few participants, disclosure alleviated these difficulties. Researchers note that promiscuity is a risk factor for teenage pregnancy due to early sexual experiences (Widom and Kuhns 1996). My findings support this concept as a couple of participants who noted being promiscuous in their younger years also had their first child off-time, significantly earlier than is culturally ideal. Participants who disclosed in childhood also received more negative responses, which may have affected how they internalised ideas about relationships and sex.

A few survivors disclosing in childhood abstained from sex and the reason for this was that they were triggered during the act, which caused them to avoid sex altogether. This finding shows the importance of developmental risk and protection from the life-course perspective since negative sexual experiences in childhood caused sexual dysfunction in adulthood. The analysis showed that sexual abstinence occurred because sex reminded survivors of the CSA experiences and so they

avoided sex, with subsequent effects on their romantic relationships. Likewise, those that did not have a partner were prevented from linking to potential partners because of their fear of having sex (see chapter six). A lack of attachment to mothers has also been linked to sexual dysfunction in adulthood (Ciocca, Limoncin et al. 2015). Participants who demonstrated difficulties with sex and disclosed in childhood also had absent or fractured relationships with their mothers throughout their adult lives. These participants were promiscuous as a result of disconnecting emotions from sex, which they saw to be a consequence of having had experiences with sex earlier than their peers. A life-course perspective suggests that these difficulties with having normalised sexual relationships is related to having their initial sexual experiences 'off-time' (Hutchison 2010). These 'off-time' sexual experiences may be one reason why mothers responded negatively to their children disclosing CSA since it goes against societal norms of children as innocent and non-sexual. Negative responses to their children's disclosure may be a catalyst for a lack of attachment between mother and child after disclosure, which in turn affected the survivor's ability to transition into healthy romantic relationships in adulthood. These findings show that when individuals disclose as children their life-chances are substantially negatively impacted if they receive a negative response to that disclosure, which strongly suggests that more needs to be done to ensure there is a safe space for children to feel believed when they disclose.

### *Adulthood Disclosures*

Disclosing CSA for the first time in adulthood is common due to high rates of delayal (McElvaney, Greene et al. 2012, Easton 2013, Alaggia, Collin-Vézina et al. 2019). As discussed, my analysis showed that those who disclosed in young and late adulthood generally received more positive responses than those who disclosed in childhood

(see chapter four). One reason for higher positive responses for adulthood disclosures is that adults have greater human agency than children to select how and to whom they wish to disclose. Whereas participants disclosing in childhood noted a lack of words to describe the CSA to someone else and limited people available to whom they could disclose (see chapter four).

My research showed that those disclosing in childhood mainly disclosed to a family member in comparison to those disclosing in young or late adulthood who were more likely to disclose to someone outside of the family. Hence those disclosing in childhood may experience more complex disclosures as often the person they are disclosing to, the perpetrator, and survivor are all living under the same roof. In contrast, those disclosing in young or late adulthood mostly opted to disclose to a non-family member such as their partner or friend. One explanation for the finding that those who disclosed as adults received supportive responses in comparison to those who disclosed in childhood, is that survivors in adulthood are able to seek an individual that they anticipate will supportively respond to their disclosure, while children who are disclosing do not necessarily have the same ability to predict how they may be responded to or do not have access to an adult outside their family to whom they can disclose at the time.

One finding showed that participants who disclosed in adulthood were more significantly affected at the point of disclosure, which had the potential to disrupt trajectories where they were not previously disrupted. For instance, those working were sometimes no longer able to remain in employment. These participants noted feeling too depressed to work which may be due to them processing the CSA experiences for the first time. My findings show that while many survivors may already be at a disadvantage if disclosing in childhood, other survivors, though able to maintain

a career up until the point of disclosure, may experience significant disadvantage once disclosure has occurred. These findings indicate that support must be provided to those disclosing in young or late adulthood at the point of disclosure and that a survivor may need to take time off work in order to deal with the CSA experiences. To date, no research has addressed the employment trajectories of CSA survivors from a life-course perspective, suggesting that future research in this area is required. Thus, CSA disclosure can be considered to be a prominent life-event for survivors regardless of when the disclosure occurs, as disclosure had a profound effect on their lives whenever disclosure occurred.

It was not just employment trajectories that were disrupted as a result of CSA and disclosure since participants disclosing in young and late adulthood also discussed difficulties with romantic relationships, but to a much lesser extent than for those disclosing in childhood (see chapter six). This finding may be due to responses to disclosures, since as shown in chapter four, those who disclosed in later life received more positive responses. There are a myriad of reasons why participants disclosing in later life received more positive responses, such as the cultural encouragement to disclose CSA following the news of Jimmy Saville's crimes as shown in chapter five (Greer and McLaughlin 2013).

Whilst most participants who disclosed in childhood displayed sexual dysfunction as adults, a couple of participants disclosing in later life, also experienced sexual dysfunction and were unable to engage in sex with their partners in adulthood. Current research suggests that this finding of sexual dysfunction may be due to feelings of shame related to CSA (Pulverman and Meston 2020). From a life-course perspective, these findings demonstrate that the consequences from experiencing

CSA can be significant, to the point where relationship trajectories and linked lives are affected.

The findings across this thesis revealed that the passing of time since the CSA occurred was not a precursor for healing post-abuse. In other words, it did not seem to matter how much time had passed since the CSA or disclosure, every participant noted at least one long-term consequence arising as a result from experiencing and disclosing CSA (see chapters six and seven). The impacts of CSA across the life-course has been explored in a rapid evidence review as part of the Independent Inquiry into Child Sexual Abuse (Fisher, Goldsmith et al. 2017). The findings from this review support the findings reported in chapter six, whereby survivors had adverse outcomes across the life-course, such as difficulties with childbirth, intimacy and parent-child relationships, lower economic status, and reporting having engaged in risky sexual behaviours (Fisher, Goldsmith et al. 2017). However, this study went one step further by linking the timing of disclosure to adverse outcomes in trajectories across the life-course, such as at school, in the workplace or in relationships. That does not mean to say that survivors in this research did not have difficulties prior to disclosure, but rather that any difficulties they were experiencing were exacerbated by disclosing for the first time to either a friend, family member, or to the police in pursuit of criminal justice (see chapter five).

My findings also suggest that it is not always CSA itself that leads to poorer outcomes across the life-course because participants who received supportive responses to their disclosures in childhood had greater positive outcomes in later life, such as in school, university, and employment. From this perspective, the timing of disclosure is critically important for understanding how CSA impacts outcomes across the life-course. These results also have implications for support services. For example,

an individual who received a negative response may require greater institutional support to help them remain in school or employment, as compared to a survivor who received a positive response. Further research must be done in order to understand how CSA survivors are impacted by the responses they receive when disclosing for the first time and how those responses may impact their life course trajectories and outcomes.

### Generational differences in disclosures

Little to no research has addressed CSA disclosures across historical time periods and how survivors experiences differ depending on when they were born and the societal norms with which they were raised. According to the life-course perspective, it is important to consider historical time periods in relation to the life experiences of individuals because there is diversity in different generations of people (Bengtson, Elder Jr et al. 2012). Chapter five provided an analysis of different generations of participants who disclosed at different historical time points. From this viewpoint, participants born and sexually abused in one generation, may disclose in a completely different time period from the one in which the abuse occurred, as many participants delayed disclosure by a number of years. The interplay of human lives and historical time periods is best explained as the comparison of cohorts born in different generations which interrelate with each other; for instance, families that are made up of different generations (Alaggia, Ramone & Colin-Vezina, 2019).

Assessing participants experiences of the prevailing social norms surrounding CSA from the time period in which participants were growing up and how these experiences may differ from one generation to another (Gerow 2018) provides some insight into how both CSA experiences and the disclosure process impacts life course



trajectories. Social norms influence how people think and respond to social issues and are specific to the culture and historical time period from which they derive (Klika, Haboush-Deloye et al. 2019). For instance, the parents of older people were raised in a time where divorce was not considered normative in society, whereas younger generations were raised with divorce being more widely accepted (Fingerman, Pillemer et al. 2012).

My findings showed how participants born from different generations experienced CSA disclosure based upon the social norms and ideals that they grew up with *combined with* the time period in which they chose to disclose. Older participants noted how CSA was largely absent from public arena in which they grew up, which in turn prevented the issue from being prevalent in social discourse. This lack of societal awareness about CSA resulted in older participants feeling discouraged from disclosing the CSA they experienced. Thus, participants from older generations arguably had a more difficult time in trying to disclose CSA experiences due to perceived societal constraints. For instance, older participants spoke about a lack of space in society to disclose, which had a profound impact on their ability to tell someone for the first time. Older participants also spoke about their lack of ability to form close relationships with to other people as a result of being raised in a historical time period that did not provide a platform for CSA to be disclosed. My findings revealed that half of participants born from 1940-1960 disclosed to the authorities, with only one securing criminal justice, whereas participants born from 1960-1980's were just as likely to receive justice as participants from a younger generation.

This finding coincides with other research which found that CSA was not taken as seriously back in the 1960's and early 1970's as it is in current times, because there was a lack of funding in the criminal justice system for such cases (Delap 2018). In

this research, a lack of societal support for CSA survivors was noted by older participants as a reason for not disclosing sooner. Whilst there was a resurgence of public interest into CSA and violence against women in the 1970's (Fergusson and Mullen 1999), this was not referred to in the data by older participants. This finding illustrates that the societal messages being sent out during the 1970's did not correspond with the experiences of older generations in this sample.

One third of participants had not disclosed the CSA experiences to the police at the time of the interview. That does not mean to say that they will not disclose at some point in the future because some participants were contemplating disclosing to the police at a later date. However, these participants revealed that they were concerned about not being believed, not having the evidence to gain a conviction, or fear that their family members would find out, and potentially be questioned. These concerns highlight why disclosures to the police may occur many years after their initial disclosure or in some cases not at all. A large proportion of participants born between 1980's-2000's did not disclose to the police, indicating that the route of criminal justice was not deemed as important – or was not seen as an achievable goal for people who grew up in that time period. However, it may be that some of these survivors will disclose to the police in later life.

The findings also showed generational differences in societal policies, such as, the 'same roof rule' (see chapter five). This rule impacted older generations applying for compensation, but not younger generations, since the rule was in place for individuals sexually abused prior to 1979. Participants affected by this rule were later able to apply for compensation as the rule was abolished in 2019 (Gov.uk, 2019), showing how society has changed for CSA survivors from older generations. The findings presented here demonstrate that CSA disclosure is a process that may extend

into the latter half of a survivor's life-course because whilst participants may have initially disclosed years earlier, disclosing to the police years later had a profound effect on those participants who did so. For instance, both long waiting times for their case to reach trial, and inadequate sentencing of the perpetrator, were cited as significant sources of stress.

My analysis also showed that attitudes toward CSA survivors have improved over time, which may be an important reason why older generations have disclosed either to an individual, or to the police in pursuit of criminal justice many years after the abuse occurred. Changes in attitudes may be the result of the media providing a level of exposure of CSA to the public, which may have enabled survivors to feel more confident in their ability to disclose and be met with a supportive response or opportunity to access criminal justice. Some participants waited to disclose to the police, despite disclosing to another individual years before (see chapter five). This finding that participant's 'wait' to disclose to the authorities must be understood by professionals within the criminal justice sector. Further research needs to be conducted with different generations of CSA survivors to better understand these dynamics.

The findings of this study also revealed that there may be socio-historical attitudes that affect the treatment of survivors, which includes responses to disclosure as well as discourses and attitudes expressed about survivors. Participants interviewed from different generations may have been subjected to more or less survivor-blaming attitudes. This finding also may help to explain why older generations may have waited longer to disclose their experiences to the police than did younger generations. For example, participants born between 1940-1960's and the 1960-1980's, either referred to personal experiences or general experiences of victim-

blaming. Personal victim-blaming accounts for how participants have been blamed for the CSA experiences by another individual, whereas general victim-blaming accounts for attitudes in society that have been generally unfavourable to CSA survivors. Thus, over time, attitudes in society toward CSA survivors have improved, which in turn has enabled some survivors to come forward and disclose. This improvement of attitudes towards CSA may be related to the uncovering of Jimmy Savile's crimes because as I have shown in chapter five, this historical event acted as a facilitator to disclosure as a result of the media reporting more CSA. From this perspective, whilst participants' degree of human agency has remained the same over time, changing attitudes may have helped survivors realise that they have agency in disclosing the CSA experiences.

### CSA disclosure as a process

Findings across all chapters showed that disclosure is a process which supports findings from past research (Alaggia, Collin-Vézina et al. 2019). My findings showed that disclosure takes place through three different stages. This first stage is pre-disclosure, which lends insight into participants' mindset before they decide whether to tell someone about the CSA experiences. My findings show that this first stage incorporated the concepts of silence and secrecy (see chapter four). The second stage is midst-disclosure and illustrated how participants felt whilst disclosing and what it felt like for them to no longer be in a state of secrecy and silence. The third stage of post-disclosure demonstrated that disclosure does not always facilitate healing and that survivors continue to experience long-term consequences as they age throughout the life-course, with disclosure for some people being a triggering event (see chapters six and seven). Overall, the findings in this research demonstrated that CSA disclosure is

a non-linear process. For some participants, it was receiving a negative response to their disclosure that re-silenced them, meaning that they then had to focus on progressing to a disclosure again. From this viewpoint, a disclosure does not mean that the participant transitioned from silence to disclosure as they often sought to re-disclose until they received the desired response. Hence, a survivor may repeatedly disclose throughout their life-course and go through these stages in a non-linear manner. In addition, each disclosure may retraumatise survivors and have new and negative impacts on their life course trajectories.

### *Pre-Disclosure*

The disclosure process began pre-disclosure. All participants illustrated what their lives looked like pre-disclosure, which mainly involved secret-keeping and being silent about the CSA experiences, lending insight into how isolated some survivors feel before they felt like they could disclose. Whilst the concept of silence has been well researched within the CSA literature (Bona 2006, McElvaney 2008), the findings reported in chapter four suggests that silence was motivated by the anticipation of unfavourable responses. This anticipation was either due to societal norms and ideals at the point of disclosure, or because survivors did not have an individual to trust. My findings showed that participants were often isolated pre-disclosure as they were unable to link to others in ways that they wanted to. Many participants noted a desire to tell someone before they felt they could. This dilemma in wanting to tell someone whilst also not wanting anyone to know is what researchers have called “the pressure cooker effect”, due to the feeling of internal conflict (McElvaney, Greene et al. 2012, Tener 2018, Alaggia, Collin-Vézina et al. 2019). Additionally, many participants said that because they did not disclose after the first incident of CSA was experiences, they were concerned that they would be blamed or disbelieved as if they had ‘allowed’ the

CSA to happen. Whilst it is clear that these participants could not have prevented the CSA as they were innocent, defenceless children, this finding provides insight into how some survivors may internalise the CSA experiences and may feel that both the CSA they experienced and their inability to disclose those experiences were somehow their fault.

One important finding that emerged in this research was that participants felt like they were not given the same opportunity to enjoy their childhoods as their peers, for instance, there were many statements made that indicated that they felt they 'missed out' on being a child (see chapter six). This is a novel finding as to my knowledge no other research has found that CSA survivors conceptualise the CSA experiences as depriving them of their childhood. This finding could be because survivors cannot focus on normative life events and transitions (see chapter six) due to, albeit through no fault of their own, engaging in sexual activity off-time (Warner and Warner 2019, Turanovic 2023). Off-time sexual experiences go against societal norms (James-Hawkins 2019) as it is socially expected that minors do not engage in sexual activity until 16 years of age, or older (Waites 2004). The findings in my research demonstrate that participants had disorganised transitions across the life-course which may be a consequence of going against societal norms and expectations surrounding sexual initiation. The reason that many participants life-course trajectories are so affected is because they realised, often in sex education, that the CSA experiences have been off-time and that they are different to their peers. Whilst these off-time sexual experiences are no fault of their own, when internalised, participants reported feeling shame, and this shame may be a driver for poorer outcomes across the life-course.

## *Midst Disclosure*

Midst disclosure provides insight into what it was like for participants to experience telling someone for the first time and how this made them feel. There was, more often than not, already an established relationship with the person that the participants chose to disclose to, demonstrating the importance of linked lives in understanding CSA disclosures (see chapter four). For example, participants disclosed to their mothers, sisters, grandparent, and friends, and people with authority, such as GP's or social services. Thus, the concept of linked lives is important due to how intertwined and complex families can be, particularly when attempting to understand CSA disclosures since family members are often who survivors choose to disclose to. The complexity of linked lives and CSA disclosure lies with the notion that it is often the case that the person to whom the survivor discloses has to choose whether to believe the survivor or perpetrator. For instance, one participant disclosed to her sister and her perpetrator was her father, and her sister took her father's side and responded negatively which caused a breakdown of relationships within her family, illustrating the complexity of understanding the influence of linked lives on CSA and CSA disclosure. The loss of relationships from the perspective of linked lives has been termed by Settersten, Hollstein et al. (2024) as *unlinked lives* to demonstrate how social relationships come to an end. This concept of unlinked lives can be applied to CSA, since disclosures have the potential to disrupt linked lives, disconnecting the survivor from those they were linked to prior to disclosure.

The findings reported here showed that responses to disclosure varied, with both supportive and unsupportive reactions reported by participants. Those that said they were supportively responded to reported fewer issues in relationships throughout their life-course post-disclosure (as shown in chapter six). Supportive responses (see

chapter four) included feeling that they were believed and listened to, as well as words of encouragement to tell parents or report to the police, which is line with previous findings (Brennan and McElvaney 2020). There were many responses that were perceived as negative, such as not feeling believed, not being protected from further abuse, being called dishonest, or a lack of response at all. All of which had a profound effect on the survivor, regardless of when they disclosed. For instance, many participants resorted to alcohol or drugs following a negative response to their disclosure, even for those disclosing in childhood, which then led to addiction issues in later life. These addiction issues also led to an inability to link to others and a disruption of on-time life-course transitions, such as survivors experiencing difficulty in transitioning from school to university or remaining in employment long-term.

Some negative responses came from people that the participants were not linked to prior to disclosure. For example, one participant phoned ChildLine after seeing an advertisement on television, and she was negatively responded to because the call handler assumed it was a prank call. This disclosure to ChildLine took place in the early nineties, when there was a societal message telling children to disclose, however, the majority of childhood disclosures were negatively responded to. The findings also lend insight into the past attitudes surrounding CSA disclosure for adults. For instance, one participant who disclosed in early adulthood in the nineties to her social worker, said that her disclosure was similar to the taking of a traffic incident reporting incident since she was responded to with a lack of empathy. It appears then, that whilst the nineties was a time period in which society was aware and pro-active about CSA, this was not always reflected in the behaviour and reactions of professionals working for institutions. Thus, historical time periods are also important when looking at responses to disclosure.



Moreover, a couple of participants disclosed to their General Practitioners (GP) and received negative, unsupportive responses. One of these disclosures occurred in the late 2000's showing the prevailing attitudes at the time, as one participant was told that she seemed to be successful and that she should go home to her sons and husband. This participant's disclosure experience shows how survivors are were institutionally responded to in the past, which may have been influenced by societal ideals around survivors, e.g., CSA survivors as unsuccessful people. How survivors are responded to influenced how the survivor felt midst-disclosure. For example, those who received supportive, positive responses described the disclosure process as relieving. Whereas those that were met with a negative response, felt upset, and had a sense of mistrust and feeling of being silenced. Hence, these participants then did not disclose again for a number of years or sought someone else they could link to for a disclosure to take place.

### *Post-Disclosure*

An analysis of survivors experiences post-disclosure meant looking at the difficulties survivors faced after disclosure took place. Moreover, post-disclosure also encompassed secondary disclosures. Since my findings show that CSA disclosure often occurs non-linearly as a survivor can disclose and be silenced by the response they receive, and later feel the need to re-disclose. Participants provided insight into how they felt post-disclosure about the CSA, and it emerged that their experiences *feel* recent to them, regardless of how long ago the CSA and disclosure occurred (for example, see chapter seven). Some participants used expressions such as “we are living life sentences”, to show that they feel they are affected by the CSA experiences across their life-course which was one reason a non-recent framing was deemed an

inaccurate way to portray survivors like them. The feeling that CSA experiences feel recent to survivors is supported by existing research on memory and trauma (DeMonte 2000, Fivush and Edwards 2004). For instance, neuroscientific research has shown that recalling memories activates the right hemisphere of the brain causing the body to release the same physiological response as when the trauma was experienced (Van der Kolk 2014). This finding contributes to the idea that the CSA does not feel non-recent or historic at any point of the life-course.

The long-term consequences discussed by participants in chapter seven showed that they have valid reasons why the CSA experiences feel recent post-disclosure. Many different aspects of participants lives were impacted by their experiences, with most participants indicating that the CSA impacted their mental health, resulting in depression and anxiety. These states of anxiety prevented some participants from living a typical life. For example, one participant became reclusive in fear of bumping into one of her perpetrators, and some participants were so depressed they stated that they had considered suicide. Feelings of depression and anxiety are common in CSA survivors (Maniglio 2010, Maniglio 2013, Hailes, Yu et al. 2019). Most participants referred to having Post-Traumatic Stress Disorder (PTSD). All of these long-term consequences add to the argument that CSA does not feel non-recent or historical, even when going through the aging process. For example, older participants made statements that memories and negative feelings surrounding their abuse had not diminished over time. This was found in participants disclosing in childhood, late and young adulthood, and across cohorts of generations.

Long-term consequences post-disclosure across the life-course was not just limited to mental health, but also to early or delayed transitioning between key life events, disrupted life trajectories and difficulties with every-day life activities and

responsibilities (see chapter six). One reason why adult survivors may feel that the CSA experiences feel recent to them is that children show fewer signs of trauma because they do not have the cognitive capacity to process the CSA experiences, whereas adults may be more affected as they can better understand what occurred to them (Clancy 2011). From this perspective, adulthood can be a difficult time for survivors since this may be the stage of the life-course in which they process the CSA experiences, supporting the idea that the framing of adult survivors should be reflective of the ongoing trauma they endure.

My findings revealed that disclosure does not alleviate trauma particularly when survivors struggle with normative life-events. Post-disclosure, survivors faced disrupted life-course trajectories, such as parenthood, since many participants expressed difficulties with either pregnancy, childbirth, or parenting as a result of CSA. A few participants stated that they felt childbirth was traumatic, due to the nature of the tests and treatment it involves, such as checking for cervical dilation. Current research suggests that this finding may be related to feelings of powerlessness, as survivors would have felt powerless at the time of the CSA and a similar feeling is evoked when a woman is in labour due to not being able to prevent what is happening (Garratt 2018). Although, a traumatic birth was not necessarily experienced with the mothers first birth or with every birth. For example, one participant already had two sons, but when she gave birth to her daughter, she was triggered by her CSA. This finding suggests that a female survivor may struggle particularly when having a daughter as they deem them more vulnerable to CSA than their sons, although further research is needed with male survivors to determine whether they have similar concerns for their daughters, or whether a baby of the same sex as them may also be a trigger for male survivors of CSA. The existing literature suggests that women may have sudden memories of the

CSA experiences during the birthing process, such as having skin-to-skin contact (Leeners, Richter-Appelt et al. 2006), but few findings look at the sex of children and how this may be a trigger. This finding shows that feelings of trauma are often continuous due to normative life-events which remind the survivor of the CSA. Moreover, one factor that could be serving as a reminder for survivors is vulnerability which is often a feeling experienced by mothers, especially new mothers (Sheikh, Allotey et al. 2024), and this feeling of vulnerability or powerlessness is what evokes feelings of trauma.

Another finding is that survivors may have difficulty trusting those in authority (Weinstein and Psych 2004), indicating there are various factors at play for a woman when giving birth with CSA experiences. It may be that a screening for past traumas could help these women feel more comfortable when giving birth. Such measures may include therapeutic services to help cope with the birthing process. A CSA screening was specifically suggested by some participants, as they stated that they hoped that their health practitioner, such as midwife/health visitor, were aware of the CSA experiences so that they were able to be supported throughout the experience. A screening in maternity services is a suggestion already made within the CSA literature (Seng and Petersen 1995), yet this was not reflected in the experiences of participants in this research. Thus, screening for CSA is yet to be introduced within the NHS.

As shown in chapter six, a number of participants, namely female, also noted that they were concerned they would not be good parents as a result of experiencing CSA. This concern meant that they engaged in parenting classes or had the involvement of social services so that they did not repeat the same cycle of CSA within their families. A couple of participants that were mothers even noted a lack of attachment to their children which they put down to the trauma they experienced from

the CSA. These findings indicate that linked lives are disrupted due to the breakdown of close relationships, which can affect their parental trajectory. Hence CSA can have intergenerational effects on family lives, since a CSA survivor may not have an attachment to their primary caregiver, which in turn may affect their ability to form a healthy attachment with their own children. Although, many participants in this research stated they were aware they had a lack of attachment to their parent and did not want the same to occur with their child.

Post-disclosure, survivors faced a number of long-term consequences related to their health which indicates a need for a reform within the NHS to take better account of the negative experiences of their patients. For instance, one participant in late adulthood discussed difficulties they had in receiving dentistry treatment as a result of her being orally raped as a child. So, when her dentist had to put any apparatus near her mouth, she was triggered, which in turn caused an anxiety attack (as shown in chapter seven). This participant's experience may be related to having a lack of control as this has been shown to affect CSA survivors ability to handle dentistry treatment (Willumsen 2004). Although, this participant was not treated with empathy until she disclosed to her dentist in a highly emotional state, suggesting a lack of trauma-informed approach within dentistry for adult CSA survivors, which is supported by recent research (Alyce, Taggart et al. 2022). Hence it may help to have screenings for histories of CSA, should survivors want to receive additional support to ease trauma when receiving dental treatment. The importance of a trauma-informed approach in NHS healthcare services can be seen in one participant's experience of receiving treatment for breast cancer. This participant said she was visibly affected by the nature of the tests and treatment which was not noticed or acted upon by the professional healthcare workers. Thus, post-disclosure, survivors face being triggered from every-

day life events, illustrating the extent to which survivors are affected throughout their life-course. These findings show that due to the complexity of the disclosure process and the difficulties survivors face throughout their life-course, it may be unhelpful to situate living adult survivors experiences as nonrecent or historic as this framing suggests that their current issues are not recognised. It is important to note that all participants brought an adult perspective whereby they spoke about their experiences with hindsight, something that child-survivor participants would not have. An adult perspective demonstrates the significance of the life-course theory because of how childhood experiences shapes adulthood.

## Limitations and recommendations for future research

This sample included a population of survivors that have never come to the attention of the authorities, providing much needed information about how CSA affects survivors across the life-course. However, my findings cannot be generalised beyond this sample and more men are required in future research surrounding disclosures of CSA across the life-course. Further research is also required with those disclosing in late adulthood in order to represent the lived experiences of those telling someone for the first time in later life. Likewise, in order to draw comparisons between the lived experiences of disclosures occurring at different points in time from the perspective of what generation the survivor was born in, further research with younger survivors is required.

Future research should acknowledge that a trauma-informed approach is required in a number of institutions, such as within the NHS, or Department for Work and Pensions (DWP) and/or employment companies. The services offered in the NHS such as from GP's to hospital and dentistry staff, must be improved so that survivors

are not re-traumatized due to the sensitive nature of some tests and treatment. Disclosure can alter employment trajectories, whereby a seemingly unaffected survivor discloses and then suddenly is unable to work. This is because disclosure can create an onset of trauma that was previously not an issue for survivors. Support must be given to those that may be unable to remain in employment as a result of disclosure. Such support may include ensuring that there is a statutory process in place for survivors to take a period of leave from employment or education without permanently affecting their trajectory, for instance, in a similar way to maternity leave. By providing such services, the survivor can have access to therapy or take a period of leave to focus on their healing and mental health, and then return when they feel they can do so.

Further research surrounding disclosures across the life-course and whether support services look different for those disclosing at different stages. A gerontological perspective looking at how CSA affects those through the aging process is important as it may provide more of an understanding on the health trajectories of survivors. Last, a recommendation for future research and trauma-informed practice includes a redress of the existing framing for adult CSA survivors since the current labels are deemed unfit for purpose by the survivors whom those labels describe.

## Conclusion

Overall, this thesis has shown how the life-course perspective is a fitting theory to study CSA. First, I showed in chapter four how disclosure relies on linked lives and the significance of trust in the person participants disclosed to. The findings in chapter four revealed disclosure as occurring as a non-linear, three stage process, from pre-disclosure to midst-disclosure, to post-disclosure. The disclosure process is

experienced non-linearly because many participants that disclosed in childhood often felt they had to disclose again, mainly so they could access support and be believed, and listened to. Participants also made secondary disclosures to different people, suggesting that disclosure is not a point in time but a process that continues throughout the life-course. The disclosure process began for participants by secret-keeping and in turn, this silence prevented them from linking to people in their lives. Participants also lost links to their parents and friends as a result of disclosing. Whilst many participants kept the CSA experiences a secret, many referred to wanting to disclose, hence there appears to be a desire to tell someone else, but barriers, such as anticipating a negative response, or not having the words, prevented them from doing so.

The findings also enabled me to show both individual and sociological facilitators and barriers to disclosure. A key finding to emerge from analysing linked lives in chapter four was how CSA disclosures relies on trust, since trust acted both as a facilitator and barrier to disclosure. Trust as pertinent to disclosure was paramount to participants because if the survivor did not have an individual that they trusted in their life then this acted as a barrier to disclosure. Also, CSA often occurs within the family home, which is why there must also be institutional trust developed, whereby survivors feel that they can trust teachers, GP's, and other professionals to whom children - or adults, may disclose.

A sociological facilitator to disclosure in the views of participants in this research was social education surrounding CSA, as shown in chapter five. Participants believed that learning and being informed about consent and sex would encourage disclosure. Although there are no findings to support this is the case, society has gradually changed the sex education that people receive. For instance, participants born



between 1940-1960's stated that they did not receive any sex education, whereas for those born in 1960-1980 and 1980's-2000's, they received sex education in secondary school. Research shows that now, education surrounding sexual consent is implemented in primary schools, which participants believed would help the future generation to disclose at a much earlier age. Thus, it was the belief of participants that the timing of disclosure, i.e., in childhood and to receive a supportive response was important to the survivor's well-being across the life-course.

Another sociological facilitator to disclosure was the historical life event involving Jimmy Savile as when participant's learnt about Savile's crimes, there was an increase in disclosures. How participants were effected by Savile illustrates a direct link between society and individuals, in so far individuals are influenced by collective attitudes that are socially portrayed, such as the media, as shown in chapter five. Whereas a potential sociological barrier may be related to social movements that are not inclusive of all survivors, such as men. Likewise, the findings in this research showed that high-profile cases of CSA may also create negative discourses for survivors, which in turn may act as a barrier to disclosure.

A sociological barrier to disclosure illustrated in chapter seven, was the current framing of adult CSA survivors, i.e., as historical or nonrecent. Participants viewed these terms as detrimental to disclosures as there is too much of a focus on the passing of time when they are still living with the harmful effects of experiencing CSA. Reframing adult CSA survivors whereby their experiences are not downplayed may act as a facilitator, rather than a barrier.

The timing of disclosure (see chapter six) has been shown in this research to be important , i.e., in childhood has more of an impact on the lives of adult survivors

because of the level of disruption to their life trajectories. Responses to initial disclosures are integral to outcomes across the life-course because this research showed how participants negatively responded to in childhood had greater difficulties with transitioning across the life-course. For instance, did not complete education, or were unable to enter or remain in employment. This does not mean to say that participants disclosing in young or late adulthood did not have issues with transitions, but participants disclosing in childhood had greater difficulties than any other cohort. Further work surrounding the implications of the timing of disclosure is required to better understand how timing disclosure and responses can influence outcomes across the life-course.

A key finding is that older participants were just as likely to receive justice than younger participants. However, there was more of a time lapse between CSA, initial disclosure, and disclosure to the police for participants born in older generations. This finding could be a result of shifting public attitudes due to a decrease in survivor-blaming attitudes over time. Although, many participants have and still do experience survivor-blaming. Overall, this thesis has shown that disclosure is affected by both individual and sociological factors and that a life-course perspective is essential in researching CSA.

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Victims of childhood sexual abuse carry the experience of abuse into adulthood. One of the dilemmas victims face during adulthood is the decision to disclose or conceal the abuse. Although adult disclosure may be affected by former disclosure during childhood, adult survivors face new challenges and dilemmas, such as to whom, when, and how to tell. The purpose of this article is to review the domains found in the literature on survivors' experiences regarding disclosure of child sexual abuse during adulthood, all of which were published between 1980 and 2013. Domains include decisions to disclose during adulthood, barriers and facilitators to disclosure and potential recipients of the disclosure, as well as the process of telling and its impact on survivors' well-being. The authors present implications for policy, practice, and research.

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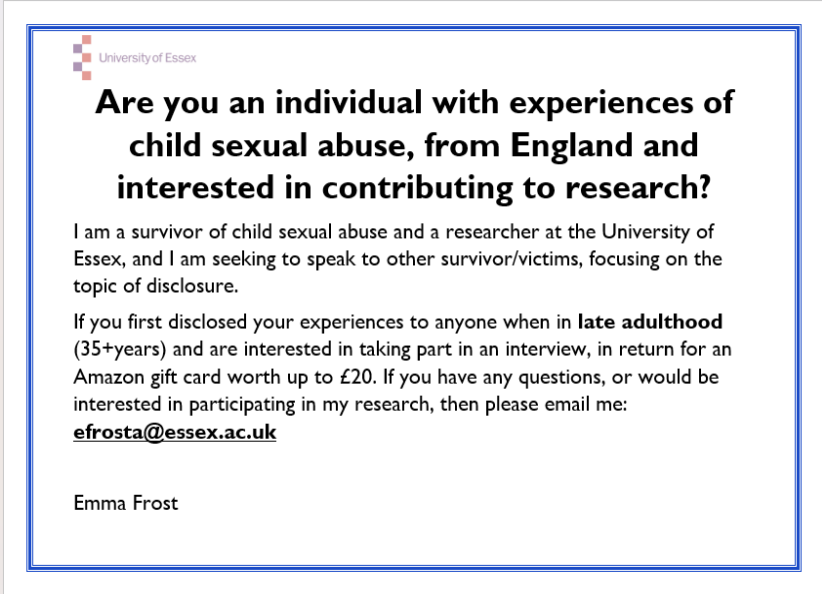
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## Appendices

### 1. Ethics materials

#### 1.1. Advertisement for first 26 participants



The advertisement is a rectangular box with a blue border, set against a light grey background. It contains the University of Essex logo in the top left corner, followed by a bold title, a paragraph of text, a paragraph of details, and the researcher's name at the bottom.

 University of Essex

**Are you an individual with experiences of child sexual abuse, from England and interested in contributing to research?**

I am a survivor of child sexual abuse and a researcher at the University of Essex, and I am seeking to speak to other survivor/victims, focusing on the topic of disclosure.

If you first disclosed your experiences to anyone when in **late adulthood** (35+years) and are interested in taking part in an interview, in return for an Amazon gift card worth up to £20. If you have any questions, or would be interested in participating in my research, then please email me: [\*\*efrosta@essex.ac.uk\*\*](mailto:efrosta@essex.ac.uk)

Emma Frost

#### 1.2. Advertisement for last five participants.



## **Are you an individual with experiences of child sexual abuse, from England and interested in contributing to research?**

I am a survivor of child sexual abuse and a PhD researcher at the University of Essex, and I am seeking to speak to other survivor/victims, focusing on the topic of disclosure.

If you have disclosed your experiences before, either in **childhood** (0-18 years), or in **late adulthood** (35+years) and are interested in taking part in an interview for research purposes, then please get in touch! If you have any questions, or would be interested in participating in my research please get contact with me by email: [efrosta@essex.ac.uk](mailto:efrosta@essex.ac.uk)

Emma Frost

### 1.3. Participant Information Sheet (PIS)

#### **Participant Information Sheet**

An investigation into Child Sexual Abuse disclosures at different stages of the life-course: why is there emphasis on non-recency and in what circumstances is it helpful or detrimental for adult survivors?

I am a researcher at the University of Essex undertaking a PhD in the department of Sociology. As a survivor of child sexual abuse, I am passionate about my research topic and I am looking to talk to other people with similar experiences to further understandings about the disclosure process. I would like to invite you to take part in my research project. Before you decide you need to understand why the research project is being done and what it will involve for you. Please take the time to read the following information carefully and ask questions about anything you do not understand.

#### **What is the purpose of the study?**

The purpose of this study is to investigate experiences of disclosing child sexual abuse. I am undertaking this project for the next few years to gain understandings on the disclosure process of people of different ages and to highlight factors that contributed to disclosure. Furthermore, I aim to provide understanding how the disclosure is handled by individuals and the positive and/or negative implications this may involve. Another purpose of my research is to analyse perceptions of historical and non-recent sexual abuse, from the viewpoint of the survivor.

#### **Why have I been invited to participate?**

I am recruiting 30-45 people with experiences of child sexual abuse who are of different ages **at the time of disclosure**, namely, 2-18 years, 18-40 and 40+. You have been invited to participate in my research project as you disclosed experiences of child sexual abuse and either responded to my advertisement on social media, or you have agreed to take part through word of mouth and you fit one of the age groups listed above.

### **Do I have to take part?**

No. You do not have to take part in my research. You will be asked to provide consent before participating and there are no consequences should you decide at any point of the study to withdraw from the research project, and you do not need to give any reasons for your withdrawal. If at any stage you wish to withdraw from my study, you can get in contact with me, or my supervisors, Prof. Pam Cox and Dr. Laurie Hawkins. If you have any questions prior to deciding whether to partake, do not hesitate to email me.

### **What will happen to me if I take part?**

You are invited to partake in my research study where I will interview you face-to-face in a safe, agreed upon and comfortable environment. Before I ask you questions that I will ask all participants centring on your experiences of disclosing child sexual abuse, I will have a brief discussion with you to ensure you are comfortable before we begin. In this interview I will ask you about your decision to disclose and how you felt after speaking out. I will record everything you say to me using an audio recorder, which I will later play back and type up into a document. I will ensure confidentiality and anonymity by typing up our discussion myself. Your data will not be shared with anyone else, except my PhD supervisors (Dr Laurie James-Hawkins and Prof Pam Cox). I must emphasise that this study is about your experiencing of disclosing not about your experience of abuse. However, should you feel you are comfortable discussing your experiences in relation to your experience of abuse then feel free to do so. In total, the interview will last between 1-3 hours. We will have another brief discussion when the interview ends so that you are able to ask any questions and we can talk about how the interview felt for you.

### **What are the possible disadvantages and risks of taking part?**

The possible disadvantage of this research is that asking you to speak about your experiences of disclosure may bring up some upsetting feelings for you before, during and or after the interview. Only you can decide if you feel you want to participate and you should carefully think about whether you want to share your experiences for the purpose of research. In the event that you feel you may be psychologically distressed from partaking in my study, then please do not take part. At the end of this form are some organisations who may be able to provide you some support before and after should you feel you require it.

### **What are the possible benefits of taking part?**

Many individuals have reported that the participation process is a positive experience as they are able to tell their stories in an environment which protects the identity of the participant. Also, your participation can contribute to a furthered understanding of why people may or may not, speak out after child sexual abuse.

### **What information will be collected?**

I will collect information from you verbally by asking you a series of questions related directly to your experience of disclosing the child sexual abuse. I will also ask you some general questions relating to non-recent and historical sexual abuse. After we have completed the interview, I will ask you to fill out a brief demographic questionnaire, which asks basic questions regarding ethnicity, geographic location, nationality to name a few. All the

information collected about you will be anonymised, in the form of an acronym, asides from the consent form which will be stored in a locked safe, unobtainable to anyone other than myself.

### **Will my information be kept confidential?**

Absolutely. Any personal information will be anonymised, meaning that you will not be able to be identified in any way. Anything you say to me will be held confidential by myself, unless you indicate that you, or someone you know is at risk of immediate harm. This means that my ability to offer confidentiality is limited; I have a duty to report anyone currently at risk from harm to the authorities. Otherwise, your name will be changed in the means of a pseudonym, meaning your interview data will be referred to under a false name and any other identifying details disclosed will be changed to protect your identity.

Once I've finished all interviews, I will analyse the data myself with help from my PhD supervisor's Dr Laurie James-Hawkins and Prof Pamela Cox. The data you provide may be published in an academic journal but without names or identifying details so you will retain anonymity even if specific quotes from your interview are published. All data that contains personal information, will be kept at my home, in a locked safe. This includes the audio recorder I will use to record your interview. I will ensure I write up each interview before I conduct another so that your interview can be promptly deleted. Transcriptions will be on my laptop, which can only be accessed through using my thumbprint. Also, transcripts will have acronyms instead of personal information so they may be generated in paper form and stored at my home address. I will retain the consent forms and transcriptions for a period of 10 years, to which paper documents will be destroyed and electronic documents will be permanently deleted.

### **What should I do if I want to take part?**

Please ask any questions you may have before you decided to take part. If you feel you want to participate in my research study after considering all the available information then please get in touch with me by phone, text or email. Then we will together arrange a date, time and location for the interview to take place.

### **What will happen to the results of the research study?**

The findings resulting from this research may be published in a journal article or in a conference paper/presentation. Any information from participants will be anonymised, meaning you will be unidentifiable in the results arising from this research. The findings from this study will be used in my PhD thesis. Last, if you want to be provided with a copy of the findings from this research, then either let me know in person, phone, text or email, or you can tick the box on the consent form.

You should tell the potential participant what will happen to the results of the research. Will they be published as a journal article or used as a conference paper / presentation? You do not need to be specific about the type of publication but you do need to be clear that the results will be published and so in the public domain. It would also be helpful to remind them at this point that any results will be anonymised and that they will not be identifiable if that is what

you have guaranteed earlier in your PIS. Will the results be used in your dissertation or thesis and, if so, where will this be deposited and in what format? It is good practice to make a copy of the findings of the study available to each participant and you should advise potential participants about how this will be done, i.e. will this be automatic or will they have to apply for a copy.

### **Who has reviewed the study?**

The University of Essex Ethics Committee has reviewed and approved my application for ethical approval.

### **Important Support Lines**

#### **CARA (Centre for Action on Rape and Abuse)**

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CARA is a registered service working with individuals of all ages from across mid and north Essex. They provide support services from their main head office in Colchester and from outreach premises in Braintree, Chelmsford, Clacton-on-Sea, Great Dunmow and Harwich.

You can refer yourself for specialist support using the online self-referral system. Please visit: [www.caraessex.org.uk](http://www.caraessex.org.uk)

Telephone: 01206 769795

#### **Samaritans:**

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Telephone: 116 123

[jo@samaritans.org](mailto:jo@samaritans.org) [response time is within 24 hours]

Write to a volunteer:

Chris

Freepost RSRB-KKBY-CYJK

PO Box 9090

Stirling FK8 2SA

Alternatively, you can visit a trained listening volunteer at the Colchester centre:

Walsingham Rd Community Hall

Waslingham Rd

Colchester, CO2 7BN

Visit: [www.samaritans.org](http://www.samaritans.org) for more information regarding the support you can receive

#### **The National Association for People Abused in Childhood (NAPAC):**

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Telephone: 0808 801 0331

Open hours: Mondays – Thursdays 1-am-9pm; Fridays 10am-6pm

### **Adult Mental Health and Wellbeing Team**

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Telephone: 0333 032 2958

Email: [mentalhealth.wellbeing@essex.gov.uk](mailto:mentalhealth.wellbeing@essex.gov.uk)

Open hours: Monday-Friday, 10am-4pm

Post: County Hall C328-9

Market Road

Chelmsford

Essex

CM1 1QH

### **Safeline**

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A leading specialist, national charity for sexual abuse

Website: <https://www.safeline.org.uk>

### **Concerns and Complaints**

Participants should be provided with details of who can be contacted if they have any concerns or wish to make a complaint. The list should include the principal investigator, the departmental Director of Research and the University's Research Governance and Planning Manager. An example of this would be:

'If you have any concerns about any aspect of the study or you have a complaint, in the first instance please contact the principal investigator of the project, Emma Frost, using the contact details below. If are still concerned, you think your complaint has not been addressed to your satisfaction or you feel that you cannot approach the principal investigator, please contact the departmental Director of Research in the department responsible for this project:

Dr. Ayse Guveli

[aguveli@essex.ac.uk](mailto:aguveli@essex.ac.uk)

If you are still not satisfied, please contact the University's Research Governance and Planning Manager, Sarah Manning-Press (e-mail [sarahm@essex.ac.uk](mailto:sarahm@essex.ac.uk)). Please include the ERAMS reference which can be found at the foot of this page.

### **Supervisors on this project**

Dr. Laurie James-Hawkins

Department of Sociology

[laurie.hawkins@essex.ac.uk](mailto:laurie.hawkins@essex.ac.uk)

**Prof. Pamela Cox**

Department of Sociology

[pamcox@essex.ac.uk](mailto:pamcox@essex.ac.uk)

1.4. Consent Form

**Consent Form**

An investigation into Child Sexual Abuse disclosures at different stages of the life-course: why is there emphasis on non-recency and in what circumstances is it helpful or detrimental for adult survivors?

Research Team: Department of Sociology: Emma Frost (PhD student); Dr. Laurie James-Hawkins; Prof. Pamela Cox;

Please initial box

1. **I confirm that I** have read and understand the Information Sheet dated April 2020 for the above study. I have had an opportunity to consider the information, ask questions and have had these questions answered satisfactorily.
2. I understand that my participation is voluntary and that I am free to withdraw from the project at any time without giving any reason and without penalty. I understand that any data collected up to the point of my withdrawal e.g. will be destroyed
3. *Example of a risk statement:* I understand that, due to the nature of the interventions used in this research, those who have had epileptic seizures in the past may not be suitable as participants due to the risk of triggering such a seizure. I confirm that, to the best of my knowledge, I have never had an epileptic seizure.



4. I understand that the identifiable data provided will be securely stored and accessible only to the members of the research team directly involved in the project, and that confidentiality will be maintained.

☐

5. I understand that my fully anonymised data will be used for a PhD thesis, journal paper and/or conference paper

☐

6. I understand that the data collected about me will be used to support other research in the future, and may be shared anonymously with other researchers.

☐

7. I give permission for the researcher to record what I say using an audio recorder which will be anonymised by using an acronym.

☐

8. I agree to take part in the above study.

☐

Participant Name

---

Date

---

Participant Signature

---

Researcher Name

---

Date

---

Researcher Signature

---

### 1.5. Interview guide.

#### **Interview Guide**

*Thank you for agreeing to take part in my research, can I just clarify for ethical reasons that you agree to participate in my research in exchange for no payment or reward. Your consent to this study provides me permission to ask questions on your experiences of disclosing*

*child sexual abuse. How much detail you choose to give in your responses is entirely down to you and you have the right to refuse to answer any questions that you do not want to. Please take as much time you need and do not hesitate to let me know if you require a break at any point or wish to bring the interview to a stop.*

*Please verbally clarify that you consent to participate in my research project [ensure informed consent is given before proceeding]*

## **Questions for participants**

### ***Generic/demographic questions***

1. How are you today?
- Do you feel comfortable?
- Is there anything I can get you?
2. Do you have any questions for me before we begin?
3. Can you tell me a bit about yourself?, such as how old you are and what you do for a living or any hobbies you may have in your spare time?
4. Have you ever taken part in a research study before?
5. Could you explain to me why you decided to take part in my research project?

### ***Initial disclosure***

6. Can you tell me about your experience of first disclosing the abuse? for example, how old you were, where you were, how long after the abuse you decided to disclose and who you disclosed to?

Can I ask you about how you felt prior to disclosing, for example, how you felt emotionally?

Did you consciously decide to disclose? Take me through your decision processes at the time

- What was it like for you going through something like this in silence?

- Had you tried to disclose or considered disclosing before this?
- 7. Can you tell me about the relationship you had with the individual you chose to disclose to? Such as, how long you have known them and how old they were
- Why did you decide to disclose to this particular individual?.
- 8. So, can you tell me more about the response you received from disclosure and how you felt at the time?

### ***Disclosing to others***

- 9. Did you make a formal disclosure to the authorities, such as the police and what were your reasons for this decision at the time?
- [if yes] can you tell me more about this, for example, how you feel you were responded to and how you feel about the outcome from formally disclosing?
- 10. Can you tell me more about speaking out to others? For example, have you told more than one person, your relationship to individuals you have disclosed to and the responses you may have received.

### ***Post-disclosure***

- 11. Tell me about any changes in your life after you disclosed?
- What were your expectations of how things would change in your life?
- 12. Is there anything you feel you would have done differently about disclosing when you did?
- 13. Tell me how you felt right after disclosing?
- 14. How do you feel about your experiences now time has passed?
- 15. Can you tell me about any ways in which you feel the abuse may have affected you?

- Have you sought support before, during and/or after your disclosure? What sort of support did you feel you needed and were your needs met?
- Can you describe your experiences with professionals and how they responded to your needs?

### ***Perceptions of other survivor's disclosures***

16. What do you think is different between disclosure as an adult, compared to disclosing as a child?
17. Do you feel there are any benefits in delaying disclosure?
18. And do you feel there are any adverse or unhelpful issues arising from delaying disclosure for survivors?
19. How do you think the passing of time might matter when disclosing abuse?

### ***Framing & labelling of CSA***

20. What do you think disclosure is? For example, how would you define it given your lived experiences?
21. Tell me how you feel about the ways in which the media and society more generally portrays adult survivors of child sexual abuse. Do you think those portrayals are accurate?
22. Can you describe how the attitudes were toward child sexual abuse in general when you were growing up?
23. How do you feel about the label 'historical sexual abuse' as a description for adult survivors such as yourself?
24. What does the term 'non-recent sexual abuse' mean to you?
25. Do you identify as a 'non-recent' or 'historical' sexual abuse survivor/survivor?
26. Do you believe the way adult survivors are labelled, matters? Tell me more about that.

27. Do you feel your experiences of abuse felt 'historic' or 'non-recent' when you were disclosing? Tell me more about that.

28. And what about now? Does your experiences in any way, feel 'non-recent'? Tell me more about that.

***Ending the interview***

29. As we are approaching the end of the interview, can I ask you how you feel about how this interview has gone?

30. Do you have any feedback for me, as a researcher?

31. Last, do you know anyone who may be willing to participate in my research?

That's all the questions I have, thank you for taking part in my research.