

Antecedents of Non-Disclosing Among Adult Male Survivors of Sexual Abuse

by

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### **Abstract**

Although significant research examining childhood sexual assault already exists, the overwhelming majority has focused on females, guided by the male perpetrator–female victim paradigm. This focus on women and girls has led people to believe that the sexual abuse of young males is rare. This is not the case, however, since the majority of male sexual abuse survivors do not report their abuse, but suffer in silence, and consequently remain untreated. Currently, there are few studies exploring why males seldom report their abuse and why they take so long to disclose. Research that specifically examines the antecedents to non-reporting among males is needed.

This research provides insight into the emotional, cognitive, physical and socio-cultural barriers men face, and their decision-making processes when considering whether or not to disclose their sexual abuse. Basic interpretive inquiry was used to examine the cognitive and psycho-social barriers that male victims face when considering disclosing. The questions that formulated the basis of the study are: 1) How do boys, and later men, who experienced childhood sexual abuse, perceive that others may have reacted and responded if they had disclosed their abuse? 2) How do these perceptions or beliefs make them react and respond?; 3) What are the decision-making processes they engage in when considering whether or not to disclose their abuse to a care provider, person in a position of authority or supportive friend?; 4) What were the environmental, cognitive and emotional contexts associated with this decision-making process? The knowledge gained from these questions will assist professionals to better meet the needs of male survivors of sexual abuse.

### **Preface**

This dissertation is an original work by Kelli Nicole Palfy. The research project received ethics approval from the University of Alberta, Research Ethics Board 1, “Antecedents of Non-Disclosing Among Adult Male Survivors of Sexual Abuse”, No50792, on September, 19, 2014.

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## Table of Contents

<b>Chapter I: Introduction</b> .....	<b>1</b>
<b>Chapter II: Literature Review</b> .....	<b>4</b>
<b>Prevalence of Male Childhood Sexual Abuse</b> .....	<b>4</b>
<b>What Male Offenders Reveal About Prevalence</b> .....	<b>9</b>
<b>The Impact of CSA</b> .....	<b>10</b>
<b>Emotional, Physiological, Behavioral, and Cognitive Impact of CSA</b> .....	<b>11</b>
<b>Damage to the Male Sense of Masculinity Due to Societal Gender Biases</b> .....	<b>16</b>
<b>The Ability to Trust</b> .....	<b>18</b>
Confusion based on ‘willingness to participate’ .....	21
Involuntary physiological arousal .....	23
<b>Reluctance to Seek Help</b> .....	<b>26</b>
<b>Research Exclusive to the Male Experience of Disclosure</b> .....	<b>31</b>
<b>The Present Study</b> .....	<b>34</b>
Rationale for this study .....	34
What was already known? .....	34
What is not known? .....	35
What will this study add to the literature? .....	36
<b>Statement of the Purpose and Significance of This Study</b> .....	<b>36</b>
Statement of the issue .....	37
Research questions .....	37
<b>Chapter III: Methodology</b> .....	<b>39</b>
<b>Epistemology</b> .....	<b>39</b>
<b>Theoretical Perspective</b> .....	<b>41</b>
<b>Basic Interpretive Inquiry</b> .....	<b>43</b>
<b>Method</b> .....	<b>44</b>
Participants .....	45
Recruitment .....	45
Inclusion and exclusion criteria .....	46
Participant questions .....	47
<b>Data Collection</b> .....	<b>48</b>
<b>Data Analysis</b> .....	<b>49</b>
Phase I: Become familiar with the data .....	49
Phase II: Generation of initial codes .....	49
Phase III: Searching for themes .....	50
Phase IV: Reviewing the themes .....	50
Phase V: Defining and naming the final themes .....	50
Phase VI: Producing this report .....	51
Memoing .....	51
Establishing quality and trustworthiness .....	51
<b>Researcher Background and Preparedness</b> .....	<b>53</b>
<b>Researcher as an instrument</b> .....	<b>55</b>
<b>Researcher positioning</b> .....	<b>55</b>
Biases and assumptions .....	56
<b>Ethical Considerations</b> .....	<b>58</b>
<b>Chapter IV: Stories of Abuse</b> .....	<b>60</b>
<b>Ricky’s Story</b> .....	<b>60</b>

<b>Leon’s Story .....</b>	<b>63</b>
<b>Jacob’s Story .....</b>	<b>66</b>
<b>A Brief Look at the Others.....</b>	<b>70</b>
Aaron’s story.....	70
Allen’s story.....	72
Anthony’s story.....	73
Garrett’s story.....	75
Gordon’s story.....	76
Josh’s story.....	77
Julien’s story.....	79
Leonard’s story.....	80
Michael’s story.....	82
Phillip’s story.....	83
<b>Chapter V: Results.....</b>	<b>86</b>
<b>Theme One: Fear “I Was So Afraid” .....</b>	<b>86</b>
Loss of memory.....	87
Fear of being blamed.....	91
Abuse was too difficult to discuss.....	92
Attempted disclosure had ended badly.....	93
Fear of worse consequences.....	95
Fear of not being believed.....	98
Fear of their perpetrator.....	100
<b>Theme Two: Shame, Guilt and Confusion “My Dirty Little Secret” .....</b>	<b>101</b>
Worry about image.....	101
Felt responsible.....	106
Evidence of physiological arousal.....	107
Sex was a taboo subject.....	108
Felt like a burden.....	109
Enjoyed the relationship.....	110
Confusion about sexuality.....	111
<b>Theme Three: Isolation and Hopelessness “Am I Invisible?” .....</b>	<b>113</b>
No point in disclosing: No-one would help.....	114
Non-sexually abusive parent was emotionally unavailable.....	116
Abuser kept them isolated and dependent/trapped.....	118
<b>Theme Four: Lack of Knowledge/Capacity: “I Didn’t Understand” .....</b>	<b>121</b>
Unaware of the impact of their abuse.....	121
Unaware their abuse was sexual.....	123
<b>Theme Five: Protecting the Family “I Didn’t Want to Cause a Stink” .....</b>	<b>125</b>
Protecting the family’s reputation or the idea of family.....	125
Too hard for parents to handle.....	126
<b>Summary of Findings .....</b>	<b>127</b>
<b>Chapter VI: Discussion.....</b>	<b>130</b>
Why do males wait so long? .....	141
What prompted them? .....	144
What has this study added to the literature?.....	145
<b>Considerations and Future Research.....</b>	<b>146</b>
<b>Practical Implications.....</b>	<b>148</b>
<b>Researcher Reflections and Conclusion.....</b>	<b>155</b>
<b>References.....</b>	<b>157</b>

<b>Appendix A:</b> .....	<b>172</b>
<b>Research Study: Antecedents of Non-disclosing Among Adult Male Survivors of Sexual Abuse.....</b>	<b>172</b>
<b>Appendix B:</b> .....	<b>173</b>
<b>Appendix C: Information Letter</b> .....	<b>174</b>
<b>Appendix D: Semi-Structured Interview Guide</b> .....	<b>176</b>
Participant questions. ....	176
<b>Appendix E: Consent Form</b> .....	<b>177</b>
<b>Appendix F: Demographic Information</b> .....	<b>179</b>
<b>Appendix G: Transcriptionist Confidentiality Agreement.....</b>	<b>180</b>
<b>Table 1 List of all Themes/Subthemes Identified:.....</b>	<b>181</b>

## Chapter I: Introduction

While most people in western culture recognize that young girls are regularly sexually abused, a lesser known fact is that male children are also commonly abused. Research indicates that approximately 18% of all males in North America are sexually violated before the age of 16 (Lisak, Hopper & Song, 1996), yet the recognition of males as victims of sexual abuse has only begun. Media attention documenting the clerical abuse of young boys, along with the outcry for public accountability, has created awareness of males as victims.

Additionally, in countries like Cambodia, Thailand, the Philippines and Vietnam, young boys are prostituted, even sold and made to dress like females (referred to as 'Ladyboys') then forced to perform sex acts for international "sex tourists". Sex tourists are pedophiles who travel abroad for the sole purpose of exploiting young boys or girls. The sale of one's children into the sex trade industry is not uncommon in developing countries. It is an act of desperation, that occurs frequently, but more commonly following natural disasters when parents see no other means of support their remaining children or even themselves.

However, the abuse of male children is not exclusive to Asian and developing countries. In North America professional athletes Sheldon Kennedy and Theoren Fleury, who both disclosed details of their abuse to the public, assisted greatly in creating this awareness. Oprah Winfrey, who profiled 200 male survivors in 2010, and pro-athlete, actor and producer Tyler Perry (who identified himself as a victim) in 2011, also helped draw attention to the pervasiveness of male childhood sexual abuse (CSA). The prosecution and conviction of high profile football coach, Jerry Sandusky, at Pennsylvania State University, and founder of The Second Mile, a non-profit serving under-privileged and at-risk youth, also provided much needed exposure regarding the prevalence and pervasiveness of the problem.

Nevertheless, despite the courage and efforts of those who came forward between the years of 2006 and 2011, there have been few noted cases of others following suit. For most, the subject has all but gone quiet. It is a topic that is again not commonly discussed, most notably among victims themselves.

Although male sexual abuse is increasingly being documented, what remains lacking is research that examines why males seldom report their abuse (Sorsoli et al., 2008), why they take so long to disclose, and what prompts their eventual disclosure (O'Leary & Barber, 2008). Academically, the overwhelming majority of research examining CSA and non-disclosure has focused on females, the results of which cannot equally be applied to males.

Since a small percentage of males ever report their abuse (Sorsoli et al., 2008) and others wait disproportionately longer than females to disclose (O'Leary & Barber, 2008), people often deduce that male sexual abuse is rare. Under-reporting and delayed reporting is believed to be due in part to social ideals of masculinity that leave little room for males to be victims (Lew, 2004; Kassing, Beesley, & Frey, 2005; Sorsoli et al.); abiding by masculine gender ideals forces males to remain silent about their abuse.

Among the few studies that exclusively examine male experiences, results indicate that many deep-rooted and complex barriers to disclosure exist across multiple domains and over the lifetime of a victim. Past researchers highlight the need for in-depth examinations of this complicated phenomenon. The current research will assist psychologists and other helping professionals to become more aware of the physiological barriers, behavioral manifestations, avoidance tendencies, and rational for avoidance that male victims experience. It is critical to improve the awareness of professionals who need to infer beyond what their clients are able to articulate, and to create the safety needed by male clients in order to facilitate disclosure.

Chapter II begins with a review of the prevalence and impact of male CSA, followed by a review of the grooming behaviors and techniques often used by offenders. Next is research supporting males' reluctance to see themselves as victims. This chapter ends with information about males' reluctance to seek help, societal gender biases, and common responses to male disclosures. Chapter III outlines the qualitative method of basic interpretive inquiry used to conduct this research. Next, chapter IV outlines three more detailed narratives of the participant abuse stories and a brief introduction to the remaining 10 participants. In Chapter V, the results of this research are presented. They are organized into five themes and several subthemes and communicated using examples from the participant interviews. Chapter VI is a discussion of the findings including implications for practice and suggestions for future research.

## Chapter II: Literature Review

### Prevalence of Male Childhood Sexual Abuse

When estimating the extent of male CSA, it is crucial to note that official statistics are generally believed to be unreliable due to underreporting (Corby 2000; General Social Survey, 2009; Hartill, 2009; 2014; McLean, 2013; Peterson, Voller, Polusny & Murdoch, 2011) and because many professionals do not recognize males as victims (Alaggia & Millington, 2008; Boyd & Beail, 1994; Holmes & Offen, 1996). Prevalence rates vary depending on the nature of the sample, the method of assessment, methodical variants, and how sexual abuse is defined (Holmes, Offen & Waller, 1997; Peterson, Voller, Polusny, & Murdoch). Prevalence rates in research that utilizes definitions of sexual abuse that include non-contact offences, where children have been made to view sexually explicit material but have not been physically touched, are generally higher than those which exclude non-contact types of offences. Studies conducted exclusively within prison settings also generally produce much higher prevalence rates than research conducted in the general population, as do studies that segregate and examine the gay and bi-sexual populations (Bullock & Beckson, 2011). One study showed that men who engage in consensual sexual acts with other men were six times more likely to have experienced sexual assaults as men who engage only in heterosexual activities (Coxell, King, Mensey and Kell, 2000).

Early research by Lisak, Hopper and Song (1996) who surveyed college men via anonymous self-report questionnaires, defined CSA as being touched or forced to touch someone else in a sexual manner. What they found was that one in six males (18%) reported they had experienced contact sexual abuse before the age of 16. Shortly thereafter, Coxell, King, Mezey, and Gordon (1999) conducted research designed to identify the lifetime prevalence of non-

consensual sexual experiences of males by distributing computerized questionnaires to medical offices in England. They assessed 2474 men in their study; 3 % reported non-consensual sexual experiences as an adult and 5% reported non-consensual sexual experiences as children. However, almost 8% of the participants stated that as a child they had experienced what they perceived to be consensual sexual experiences with someone 5 years their senior. These experiences, although deemed by to be of a consensual nature by the men themselves, met the criteria of assault and were considered illegal under English law.

Similar results were found by Fondacaro, Holt and Powell (1999), who invited American prison inmates to participate in a study designed to assess the prevalence of mental illness among inmates. This research team compared psychiatric diagnoses for male inmates who considered themselves sexually abused as children, and who met the standard criteria for CSA, with those who did not consider their past sexual experiences to have been abusive. They also examined the association between the perception of a sexual encounter as sexual abuse or not and psychiatric diagnoses. Of the 303 inmates who participated, 86 met the criteria for CSA. Of these, 41% did not consider themselves to have been sexually abused. Interestingly, “those who did not consider themselves to have been abused had higher rates of alcohol abuse/dependence, while those who considered themselves to have been abused had higher rates of post-traumatic stress and obsessive-compulsive disorder” (Fondacaro, Holt & Powell, p. 361).

Dube et al. (2005) surveyed the prevalence of CSA among adults who voluntarily attended a health appraisal center in California. They defined CSA as any sexual experience prior to the age of 18 that occurred with an adult or someone at least five years older than themselves. It involved the adult touching or fondling their body in a sexual way, or the adult having invited or forced the child to touch or fondle the adult’s body in a sexual way. It also included any attempt,

successful or not, to have oral, anal or vaginal intercourse. CSA was reported by 16% of the males, 42% of whom reported they were forced to have sexual intercourse. Females were reported as the perpetrators by approximately 40% of the males forced to have intercourse.

In 2010, Australian researchers Cutajar et al. looked at the rate and risk of suicide along with accidental fatal drug overdoses that were documented in the forensic medical records of 2759 male and female victims of CSA. Each case which had been reported between 1964 and 1995, was medically ascertained to be CSA, and was supported by referrals from the police or child welfare systems. CSA was defined as complete, partial or attempted penetration of an orifice by a penis, finger or object (63%) or non-penetrative sexual contact (37%). The rate of suicide among male victims was 14 times higher than that of a control group from the general population. Similarly, they were 38 times more likely than those in the general population to die of accidental overdoses.

In 2011, Peterson, Voller, Polusny, & Murdoch conducted a review of the scholarly literature for the previous 25 years. They examined a total of 87 empirical articles found on the MEDLINE and PsychInfo databases which reviewed the prevalence and consequences of adult male sexual abuse. One of their goals was to evaluate the prevalence of male adult sexual assault, as it occurs in males over the ages of 18 and 19 in North America and Europe. Their research highlighted that the “existing studies of special populations-gay and bisexual men, veterans, prison inmates, and men from physical and mental health treatment facilities” pointed to the importance of studying groups of men who may be at particularly high risk of adult sexual assault (Peterson, Voller, Polusny, & Murdoch, p. 21). Similar to the results of previous studies, their findings noted “considerable variability in the prevalence estimates presented across studies depending upon the sample and definition of sexual assault used” (Peterson, Voller, Polusny &

Murdoch, p. 18). In spite of the inconsistencies in numbers, their results suggest the existence of a high prevalence of male sexual abuse in society.

In 2013, researchers McDonald and Tijerino, with the Canadian Department of Justice, conducted surveys at two centers offering support to male survivors of sexual abuse. Out of those who reported CSA, almost all (n= 57) reported having been sexually abused as a child. Most of those (n=53) reported that the perpetrator was someone they trusted or a family member. A considerable number (n=13) were sexually abused by a family member (excluding a mother or father). This was followed by a person in authority such as a teacher, principal, babysitter, or clergy (n=16) or a family friend (n=12). A smaller number were sexually abused by a father (n=8), mother (n=3) or other known person (n=1). Only four men reported having been sexually abused by a stranger. Although there were no specific questions asking about the gender of the offender, there were four cases in which the offender was a female – namely, the mother and/or sister of the survivor. There is also the possibility that in other cases the offender was a female, such as when the offender was the babysitter, teacher, family friend and/or extended family member (p. 9). Ten of the 59 participants reported abuse that also occurred in their adulthood, since a majority of them reported abuse that occurred multiple times. Eight of the ten participants had also been assaulted as a child; only two had not.

Most recently, Artime, McCallum and Peterson (2014) examined the male frequency of acknowledgement of sexual victimization. They defined victimization as: forced or coerced sexual experiences and sexual experiences with a partner five or more years older, that occurred before the age of 14, and adult rape (defined as oral or anal intercourse obtained through threats, intoxication or violence), that occurred when the victim was 14 years or older. A second goal was to examine males' acknowledgement of sexual assault as it correlates to being re-victimized

in adulthood. They placed an advertisement on Craigslist and initially obtained a sample of 323 men who agreed to fill out an online questionnaire. One hundred and twenty (37%) endorsed behavioral indicators of childhood sexual assault and/or adult rape. Of the 99 who endorsed indicators of CSA, 51 participants (52%) did not identify themselves as having been sexually abused. Among the 45 who endorsed behaviors consistent with adult rape, 34 (76%) did not identify the experience as a rape. Finally, of the 99 who endorsed CSA, 24 endorsed themselves as later being raped as an adult. These 24 represented over half (53%) of the adult victims in total. From the group of 24 who endorsed both youth and adult abuse, only seven (29%) acknowledged both victimizations, and 3 (13%) did not acknowledge either. The re-victimization rate of males who had experienced CSA was 24%. Previous research by Coxell, King, Mezey and Gordon, (1999), also provided strong indicators that childhood victimization increases the likelihood of victimization in adulthood.

However, this research also highlights four other significant points. The first is that the majority of males who experienced abuse, either as a child or as an adult, did not identify it as abuse. While these findings are somewhat consistent with what women also acknowledge, the second noteworthy point is the differences in reporting based on age. While approximately half of the males who endorsed CSA acknowledged it as such, only a quarter of those who experienced rape as an adult did the same. Thirdly, males were also significantly less likely to acknowledge adult rape when it was perpetrated by a female versus a male. Finally, participants who acknowledged that their offenders used force (during both childhood and adult assaults) were more likely to label their experience as abuse.

### **What Male Offenders Reveal About Prevalence**

Abel et al. (1987) conducted research focusing on non-incarcerated perpetrators of CSA who were not receiving court-ordered evaluations or treatment. Subjects were recruited through informal discussions and formal presentations made by health care professionals, parole or probation officers, and forensic workers as well as media advertisements. Participants came from a broad spectrum of socio-economic status. Many were young and well-educated; 40% had finished at least one year of college. Each was informed that their participation was voluntary and given protection from any prosecution that might otherwise have resulted from their cooperation. Participants were instructed to provide only general details of their offences including their preferred age and gender of victim, along with their frequency of offending. Each was advised that “the primary interest of this study was to help the subjects understand their behavior and how they might gain control over it” (Abel et al., 1987, p.6). In total, 561 perpetrators ranging in age from 13 to 76 years of age were interviewed; of the 153 participants who admitted to targeting extra-familial males, each stated they had sexually abused an average of 150 victims. “These individuals admitted to having committed the greatest number of child molestation acts against the greatest number of child victims when compared to those who molest girls or those who molest boys within the home” (Abel et al., p. 22).

The high percentage of total child molestations committed by those who target young boys outside the home indicates the more serial nature of this abuse. Past research also indicates that when compared to those who offend against female victims, perpetrators who sexually assault young boys are more likely to use physical force, threats and violence during their assaults (Watkins & Leonardovim, 1992). They also engage in the abuse more frequently and continue it over longer periods of time (Baker & Duncan, 1985). Male victims are also more likely than

females to have had more than one assailant (Bullock & Beckson, 2011).

### **The Impact of CSA**

CSA can have a profound effect on a child physically, physiologically, emotionally, and cognitively when they are first victimized, and it can affect them for a lifetime. When children are first traumatized, the coping mechanisms and emotional regulation strategies they use to survive are influenced by their ages and developmental stages, as well as by their temperament, genetics, and available resources (van der Kolk & McFarlane, 2007). The impact of abuse also depends on other contextual factors including: who violated them, whether violence or threats of violence were used, the severity of the abuse, how long it lasted, and if the abuse was an isolated incident or on-going (Hopper, 2013; O’Leary, Coohy, & Easton, 2010). While each factor has both immediate and long-term effects, the extent of the trauma must be viewed as the product of a combination of the severity of the stressor and the supportive (or non-supportive) capacities of the victim’s environment (McFarlane & van der Kolk, 2007).

Sexual assault perpetrated by someone a child had previously trusted can negatively impact their sense of self-worth and their ability to trust their own judgment (Gartner, 2000a). It can also impact how they view both themselves and their caregivers. The experience of being sexually abused can transform a child’s previous perception of the world from that of a safe and predictable place, to a terror-filled, confusing place (Alaggia & Millington, 2008; Hopper, 2013; van der Kolk, 2007). This change in perception can drastically alter their life trajectory (D’Andrea, Stolback, Ford, Spinazzola & van der Kolk, 2012) and have a profound impact on their ability to trust others later in life. This is especially true if the perpetrator resorted to using threats to harm or kill them or their siblings as a means of ensuring their silence (Alaggia & Millington). “Despite the human capacity to survive and adapt, traumatic experiences can alter

people's psychological, biological and social equilibrium to such a degree that the memory of one particular event comes to taint all their other experiences" (van der Kolk & McFarlane, 2007, p. 4).

### **Emotional, Physiological, Behavioral, and Cognitive Impact of CSA**

Emotionally, many abused children feel anger toward those who harmed them, those who failed to protect them, or at themselves for failing to stop the abuse. Similarly, many feel guilty about the things they have done. "Young children, by virtue of their level of cognitive development, attribute everything that happens to their own actions or their own magical thinking" (van der Kolk, 2007, p. 197). Many feel responsible for their abuse and the subsequent problems they have no control over. They have difficulty seeing other people's contributions to their plight.

Similarly, self-directed shame, a common emotion felt by survivors (Alaggia & Millington, 2008; Fradkin, 2012; Lew, 2004) often leaves victims feeling judged by others. Survivors may perceive they are being viewed as inferior, defective and unattractive (Pinto-Gouveia & Matos, 2011). They may feel rejected and build emotional walls around experiences that are too painful to bear (Fradkin). To avoid feeling shame and judgement, many victims withdraw socially. They become meek and submissive as they discover that the only way to feel safe is through isolating themselves (Alaggia & Millington; Fradkin). Living in isolation becomes problematic in and of itself because it prevents victims from taking healthy risks in life and leaves them at high risk for developing depression (Fradkin). The self-fulfilling prophecy is that living in isolation then becomes proof that they are not worthy of love (Fradkin).

While growing up with the memory of each assault would be in and of itself confusing and challenging to negotiate, victims often experience a comorbidity of psychological and

physiological symptoms which compound their ability to recover. These include complete memory loss or blocking, dissociation, flashbacks, thought suppression, rumination, sensitization, hyper-vigilance, hyper-arousal and a diminished ability to pay attention and remember. Experiencing any of these symptoms can have a profound effect on a child's character and personality development, and on how they present themselves to the world around them (Rothchild, 2000; van der Kolk 1988/2007).

When faced with traumatic events, the human brain must decide whether it wants to fight, flee or freeze. These responses are available to them only to the extent that they are physically mature and emotionally able to respond and understand the context of what has taken place (van der Kolk & McFarlane, 2007). Infants have few options but to freeze and/or dissociate since fight or flight are non-available resources (Levine & Kline, 2006). Children who experience repeated traumatic events that are overwhelming often freeze and/or dissociate (Levine & Kline, Rothchild, 2000; van der Kolk, 2007).

Physiologically, although it is meant to protect them, dissociation interferes with their ability to be present in their own bodies, soothe themselves, or be soothed by others. This shutting down and heightened sense of arousal occurs when victims perceive that there is no escape. Compounding these symptoms, many develop a diminished ability to trust others, soothe themselves or be soothed by others (Levine & Kline, 2006). Out of a need to adapt to being traumatized, their "growing brain organizes itself to be more reactive to survival functioning at the expense of development of the limbic and cortical areas responsible for modulation of impulse and emotion" (Levine & Kline, p. 34).

Since infants can't yet self-regulate, they depend on their parents to soothe them. When this doesn't happen, children become dysregulated and disorganized. Those abused by

caregivers from a young age commonly suffer from ‘attachment injuries’ and develop either anxious/avoidant or disorganized/disoriented or insecure attachments based on the lack of or inconsistent love and support provided to them (Rothbard & Shaver, 1994).

Though previously able to function normally, sexually abused children may begin to have trouble functioning in social settings, and they may develop insecurity in their relationships with others. Many with previously established self-regulation skills will regress. This deterioration can lead to a reduction in their self-definition and self-image and can decrease their affect and impulse control toward both themselves and others. Thus, they may act impulsively, becoming hyper-aroused one minute then withdrawn or flat the next (D’Andrea et al., 2012). CSA can impact a victim to such a degree that they develop pathologies like a dissociative disorder, post-traumatic stress disorder, an anxiety disorder and/or clinical depression, etc. (Perry & Szalavitz, 2007; Rothchild, 2000; van der Kolk, 2007.).

Behaviorally, after experiencing abuse, many children either tend to become shy and withdrawn, or they become bullies and frighten other children (van der Kolk, 2007). Similarly, they are subject to social rejection, bullying, learning difficulties, and the repercussions of any behavioral problems they may express while attempting to avoid distressing memories or recover from dysregulated states (D’Andrea et al., 2012). Male CSA survivors may display anger, uncontrollable volcanic rage, threatening behaviour, fearlessness, or acting out (Sigurdardottir et al., 2012). As such, sexually abused boys can have extremely difficult childhoods and adolescence. Although behavioral manifestations may be observed by those who know the child intimately, it is often difficult to attribute these changes to any one cause or event. For this reason, behavior change post-abuse is often not recognized as an indicator of abuse.

Numerous studies of childhood maltreatment reveal that interpersonal traumas place

children at risk of developing severe co-existing problems, including anxiety and mood disorders or disruptive behaviour disorders (D'Andrea et al., 2012). The likelihood of a secondary disorder developing increases as the number of traumatic stressors increase. Children who are sexually abused also have a higher likelihood of being re-victimized both as adolescents and as adults (Cashmore & Shackel, 2013).

Cognitively, in a similar way to the experiences of women, male survivors of CSA may come to view themselves as damaged and unworthy of being loved (Alaggia, 2005; Fradkin, 2012). Many develop low self-esteem, a distorted self-image, and a diminished sense of self-worth. While women generally determine their sense of self-worth based on proven abilities to form and maintain relationships, men largely develop their self-worth through their ability to regulate internal states, to set and maintain boundaries, and through their behavioral responses to external stress (van der Kolk, 2003). Both men and women establish part of their identity based on their gender, sexuality and body image. Children who have been sexually abused often grow up struggling with their gender identity, sexuality and sense of personal boundaries; many also become unable to predict their own emotional stability (D'Andrea et al., 2012).

Although CSA impacts boys and men in similar ways to girls and women, there are distinct differences in how CSA affects males. First, males are commonly bothered by the myth that boys who are sexually abused grow up and sexually abuse others. Conversely, society does not generally fear that sexually abused women become rapists or pedophiles. Second, males are often extremely confused by the visible physiological arousal they often experience during their assaults (Fradkin, 2012; Gartner, 2000a; Pescosolido, 1988). "Because of the way male bodies operate," males are "at a significant disadvantage" when they are abused (Fradkin, p. 214).

While obtaining an erection is a normal bodily response to penile stimulation, this arousal

during assault does not indicate willingness or enjoyment. Nevertheless, the penile stimulation males often experience during abuse confuses them about their sexual identities and about whether or not they are in fact victims. In addition, perpetrators often use their victims' erection as evidence of their enjoyment and desire to participate (Gartner, 2000a), or try to convince their victim that obtaining an erection means that deep down they are really gay, and that they enjoyed or invited the abuse, so it is their fault it occurred (Singer, 2010). This confuses young boys about their degree of willingness to participate. Ultimately, perpetrators often seek to leave their victims with the belief that they liked, even invited the assault (Turner in Mezey & King, 2004).

Sexual abuse perpetrated by another male can undermine a victim's sense of gender identity and sexual orientation (Gartner, 1999). Whether the victim is gay or straight, CSA perpetrated by other males leaves many victims confused about their masculine identity and about whether or not they have homosexual tendencies (Sorsoli et al., 2008; Gartner, 1999; 2000):

Reporting that they have been victims of homosexual assaults is to boys tantamount to admitting that they are homosexual, even though they were forced into such activity. Fearing that their masculinity will be questioned or challenged if they report such molestation, most choose to remain silent (Nasjleti, 1980, p. 272).

Male survivors often confuse the shame they feel in regard to having been victimized as shame about same-sex orientation or homosexual desires (Gartner, 1999). Many truly believe they somehow invited the abuse by emitting homosexual inclinations; this is especially true if the victim is of homosexual orientation. Males who identify as homosexual ask themselves if deep down they actually liked the abuse and others believe their abuse made them gay (Gartner). They identify the fact that they had an erection during the abuse and believe it was an indicator that they enjoyed the homosexual relations. Homosexual males often confuse sexual abuse as an initiation, a coming of age experience or an affair (Gartner, 1999, 2000a).

Similarly, heterosexual boys abused by male perpetrators may view their arousal as a sign that deep down they are actually gay or fear that they may become gay (Gartner, 1999). Consequently, many straight males become repulsed by this idea and overcompensate through hyper-masculinity and homophobia; others choose to live in isolation (Gartner, 2000b). CSA perpetrated by females is also confused as ‘initiation’, a ‘love affair’, a ‘coming of age’ experience, or as a ‘rite of passage’ (Gartner, 1999; 2000; 2010; Sorsoli et al., 2008). One researcher posits that many who would have otherwise been headed toward heterosexual relationships, are so repulsed by their early sexual activities at the hands of a person they were not attracted to that they reject their heterosexual orientation and redefine themselves as gay or become asexual (Gartner, 1999).

#### **Damage to the Male Sense of Masculinity Due to Societal Gender Biases**

In Western cultures, males are conditioned from youth to believe that in order to be ‘real men’ they must be strong, confident, resilient and self-sufficient (Gartner, 1999; Alaggia & Millington, 2008). ‘Real men’ are not victims, they do not turn down sex (Gartner, 2000b), and they do not cry or even recognize sad or painful feelings. Furthermore, ‘real men’ are not dependent on others (Goldberg, 1977), but instead they are providers who are capable of defending themselves during an attack. The result of these biases is a tendency for men to disown their vulnerabilities while attempting to protect their image of masculinity (Valerio, 2011).

Sexual abuse violates many of the socially sanctioned gender expectations of Western culture which include dominance, winning, heterosexuality, emotional control or stoicism, and the pursuit of status (Mahalik et al., 2003). Because as victims they were both dominated and victimized, abuse casts doubt on a male’s sense of masculinity (Alaggia & Millington, 2008). To

compensate for any feelings of inadequacy, men often adopt attitudes of hyper-masculinity. They guard their secret through behaviours designed to assert their masculinity in culturally acceptable yet excessive manners (Fleury, 2011; Gartner, 2000b). Although not the exclusive domain of males, other destructive coping mechanisms used include denial, criminal acts, substance abuse, truancy (Sorsoli, Kia-Keating, & Grossman, 2008), suicide attempts (Dube et al., 2005) or sexual acting out (Alaggia & Millington; Gartner, 1999; Yancey, Hansen, & Naufel, 2011). Since anger has traditionally been one of the only socially acceptable emotions males are allowed to express (Gartner, 1999), male survivors often use destructive coping mechanisms to avoid or numb themselves from pain.

Since disclosure of sexual abuse involves placing oneself in a vulnerable position and making oneself truly known to another (Barrell & Jourard, 1976), and recovery involves traversing the emotional territory that males are culturally encouraged to avoid (Lisak, 1994; Gartner 1999; Greenberg & Watson, 2008; Spiegel, 2003; Wilken, 2003), a significant proportion of male victims never disclose abuse. Jackson Katz, an educator of gender violence prevention stated, “so many of these boys who were victims themselves grow up to deal with it the only way they know how, which is to go out and take back that which was wrongfully taken from them” (Katz, 2014). Equating CSA to an incubator for making violent men, Katz asserted that sometimes the only way to get respect when all has been lost is through the use of violence. Subsequently, many boys and men come in contact with other helping professionals or the police after having displayed this anger and/or utilized other destructive coping mechanisms.

Perhaps in no other arena are gender-based messages stronger than in organized sports. Boys are treated as ‘pseudo- men’, made to compete and prove themselves. They are given messages to “suck-it-up”, “shrug-it-off” and “take it like a man” (Hartill, 2009, p. 236) as

coaches and fellow players encourage boys in their transition toward manhood (Burstyn, 1999, Nauright & Chandler, 1996). Paradoxically, sexual abuse is widespread in male organized sports (Brackenridge 2003; Griffin & Genasci, 1990; Hartill, 2014; Kane & Disch 1993; Pronger 1990). Professional hockey players Theoren Fleury (2011) and Sheldon Kennedy (2006) confirm this. Fleury recently described the problem as "the biggest epidemic on the planet", and stated that Canada is like "Disneyland for pedophiles" because when caught, they often only get "a slap on the wrist" (Doucette, 2013). During the trial against his coach, Kennedy stated that "the police estimate that Graham molested 75 to 150 kids who were under his care during his time as a coach, manager and scout. Many of those players were great talents but almost all of them dropped out of minor hockey before they had a chance to be drafted" (Kennedy p. 78); most never disclosed their abuse.

### **The Ability to Trust**

Inevitably, the interpersonal consequence of CSA is a betrayal of trust. The sense of betrayal experienced by groomed males, those who have been targeted by a process of seduction (discussed below), is immeasurable. Acquaintance molestation, when children are victimized by someone who is meant to care for or protect them, is especially damaging since, prior to abusing them, their offender fulfilled certain needs they had (Frankin, 2012; van der Kolk, 2007). This form of betrayal can leave victims feeling guilt and confusion about 'wanting' the relationship and about their level of cooperation in the abuse (Fradkin; Lanning, 2010). All children have wants, needs, and desires; many are willing to trade sex, whether or not they understand what it is, for affection and attention (Lanning). However, while they may have been in need of love and affection, what they wanted or needed was only the relationship (Fradkin). Incest victims may be particularly confused by the paradoxical and alternating acts of being cared for and being

violated by the same person (Valerio, 2011).

Grooming behaviors are acts and gestures specifically designed to win the trust and loyalty of a potential victim or possibly the victim's parents (Lanning, 2010; Logan, 2006). Lanning, a former FBI agent with expertise in the area of child molesters, explained that perpetrators may be very attentive to both the child and the parent's needs in order to gain their trust, affection and loyalty. "Offenders who prefer younger child victims are more likely to first "seduce" the victim's parents/guardians to gain their trust and obtain increased access to the potential victim" (Lanning p. 27). Their actions are carefully orchestrated with the intent to fool, manipulate and exploit the immaturity of the victim (Lanning) as well as those meant to protect them (Sullivan & Beech, 2002). "The exact nature of this seduction depends in part on the developmental stages, needs, and vulnerabilities of the targeted child victims and nature of the relationship with the offender. The skilled offender adjusts his methods to fit the targeted child" (Lanning, p. 27).

Offenders typically study the "in" games, television shows, etc. in order to gain knowledge of their victim's interests and shower their victims with gifts, opportunities, praise and affection (Alaggia & Millington, 2008; Terry & Freilich, 2012). They may go to extreme measures, including establishing a career or hobby within an educational institution or voluntary organization. Others befriend, even marry, the parent in order to gain easy access to unguarded children and allow them to maintain their abuse undetected, often for years (Colton, Roberts, & Vanstone, 2010; Lanning, 2010; Logan, 2006; Sullivan & Beech 2004).

Grooming techniques progress through stages, but in males it often begins with the gradual introduction of rough play. It begins with a friend and later with the perpetrator himself. This form of non-sexual touching desensitizes the victim, breaks down his defenses and gets him

accustomed to being touched (Logan, 2006). With boys, offenders often introduce masculine principles, such as the use of coarse language. When the boy uses the words introduced to them they are rewarded for their outward displays of masculinity. Progressively, offenders will work toward a situation in which the child has to change his clothing, spend the night or both (Lanning, 2010). He may also introduce his prospective victims to pornography left around for easy discovery (Lanning; Sullivan & Beech, 2002). This sexually explicit material commonly depicts other children engaging in sexual acts, a gesture designed to get the potential victim aroused and interested (Lanning; Logan), and to lessen their resistance toward engaging in such acts. Some perpetrators supply alcohol or drugs to disinhibit their victims (Logan; Terry & Freilich, 2012). Gradually, the groomer may teach his victim to masturbate, rationalizing (to himself and the child) the educational value of this behavior toward becoming a man.

Such nice-guy offenders usually have strong needs to justify and validate their sexual behavior. This seems to be especially true of more intelligent, better educated individuals who molest children. Most offenders appear to have an overwhelming need to convince people, primarily themselves; that the behaviors they engaged in are not really sexual; that the child doesn't understand or remember the activity and is therefore not harmed. They rationalize their behavior as an expression of love and caring, and/or believe they are entitled to these acts because of all the good they do. Their need to rationalize their sexual interests and behavior often leads them to be involved in agencies which help troubled and needy children. They often become teachers, coaches, missionaries, child-protection advocates, or cyber vigilantes. Obviously such pursuits also give them convenient access to vulnerable children and socially acceptable reasons for interaction with them (Lanning, 2010). Their control stems primarily from having authority and status over the child. The perpetrator is also often the child's source of

survival, providing them with basic necessities such as food, clothing, shelter and attention (Lanning).

Offenders are thought to have radars for children in disadvantaged situations. “Although the vulnerability may be greater when a troubled child from a dysfunctional family is groomed by an adult authority figure, the fact is any child can be groomed by any reasonably nice adult with interpersonal skills” (Lanning, 2010, p. 27). However, in many cases offenders target children who are in need of relationships and isolated from their parents or peers (Logan, 2006). Others actually work to isolate boys from their peers through taking them on educational or recreational outings (Sullivan & Beech, 2002). Kennedy (2006) explained how coach Graham James “found boys who needed a father figure in their lives, boys who were confused and unsure of their masculinity and needed a man they could trust and confide in” (Kennedy, p. 79).

Often times, the increasingly inappropriate behaviors associated with abuse are so insidious that the abuse is well under way before the victim even recognizes that he is being abused. “If done well, the process not only gains the victim’s initial cooperation, but also decreases the likelihood of disclosure by the victim and increases the likelihood of ongoing, repeated access” (Lanning, 2010, p. 26). The proactive, sophisticated, evolutionary process employed by perpetrators confuses, diffuses, and blurs traditional roles and boundaries between boys and men.

**Confusion based on ‘willingness to participate’.** Despite memories of being hurt by their perpetrator, many boys remain confused about the loving words that were spoken to them by their offenders or the kind gestures that made them feel special (Alaggia & Millington, 2008; Fradkin, 2012; Fleury, 2011; Kennedy, 2006; Lanning, 2010). Boys not brutally nor violently raped are often confused about their willingness to participate, because they recall enjoying

certain aspects of the abuse: for example, the way their perpetrators made them feel loved prior to the abuse they suffered (Alaggia & Millington) or the feeling of ejaculating. Adding to their confusion and guilt is the fact that many boys who enjoyed the physical part of their experience return to their abusers for more sexual encounters.

Alternately some survivors do initiate their re-victimization, but not for sexual reasons; “because victims of acquaintance exploitation usually have been carefully seduced and often do not realize or believe they are victims, they repeatedly and voluntarily return to the offender” (Lanning, 2010, p. 75). Many are compliant with their abusers to avoid other consequences like homelessness or physical assaults, or the loneliness they might have had to endure had they not cooperated (Lanning). Likewise, some engage in unwanted sexual encounters due to peer pressure, intoxication or threats of defamation for saying no. In their minds this places them in the role of co-conspirator (Alaggia & Millington, 2008). When children co-operate it is often more difficult to decipher as abuse since if they had been of age, there would be no crime (Lanning p. 69).

Gartner (1999) believes that since males have a preoccupation with sex and are socialized to believe they should never turn it down, many regard their abuse as something they should have enjoyed. Child victims, even after becoming adults, often either deny their victimization or disclose it in inaccurate but more socially acceptable ways because they suffer from varying degrees of shame, guilt and embarrassment. Society tells them in so many ways they are not ‘real victims’” (Lanning, 2010, p. 26).

Conversely, Gartner (2000a) and Fradkin (2012) explain that those who were not offended by the gender of their abuser (or the non-familial type of relationship they had) often adopt myths about having enjoyed their abuse. Some look back on their abuse and choose to consider

themselves as 'lucky'. Others rewrite their histories and claim that they were in fact in control of the situation and that the abuse did not negatively affect them (Gartner, 1999; Gartner, 2000b). Many blame themselves for not having put an end to the abuse sooner (Hunter, 2011).

Masculine gender ideals, combined with fear of being seen as homosexual, amplify confusion (Baljon, 2011) and act as stressors that impede the ability to recognize or acknowledge the effect abuse had on their lives (Dube et al., 2005; Lisak, 1994; Teram, Schacter, Stalker, Hovey, & Lasiuk, 2006). These reactions complicate their healing processes. Nasjleti's 1980 question "what does it indicate about our society that male children tell us they cannot look for protection because they have been taught that they are responsible for protecting themselves?" (Nasjleti p. 274) is sadly still applicable today.

**Involuntary physiological arousal.** In consensual sexual encounters, arousal and the achievement of orgasm are usually welcomed outcomes. Arousal in women involves the vaginal/clitoral blood engorgement and vaginal lubrication; in men, the penile tumescence or erection. Sexual arousal occurs not only as a physical state but as a mental or emotional state as well. In pleasurable situations physical and emotion arousal occur simultaneously (Levin & van Berlo, 2004). However, it is possible to be mentally or cognitively aroused without showing any physical, genital manifestations of arousal. Typically this is considered a form of sexual dysfunction. Conversely, the reverse is also possible. Physical arousal can occur without any positive mental arousal, even when a person is experiencing extreme duress. During assaults, it is not uncommon for both men and women to exhibit genital manifestations of arousal and not be positively mentally aroused.

Although involuntary arousal can be troubling for both genders, there are crucial distinctions in the way genital arousal can affect male's ability to process it when it occurs during

abuse. Consider the variability noted in females' ability to obtain, recognize and experience orgasms. Some women can have orgasms that are so intense they overpower them and render them momentarily unconscious. Others have difficulty in recognizing their orgasms, or the only evidence of achieving climax is by her subjective report (Levin & van Berlo, 2004). Since women's orgasms can be much less visible and detectable in trauma-induced arousal, women can more easily dismiss, ignore, deny or minimize their physical responses. Because male arousal is more visible, they cannot deny, ignore, or minimize their erections even if they were not attained willfully.

However, similar to men, women who self-lubricate or experience orgasm during sexual abuse, also often feel as if their bodies have betrayed them. One theory suggests that if women did not lubricate during sexual assaults there may be far more physical damage done to them and they would be at an increased risk for infection. Lubrication may also help their assailant to finish faster, thus doing less damage to them in the end. Similarly, not unlike the experience of women, many males may unwillingly submit to the process in order to end their assaults earlier, since from previous experience the assaults do end earlier after they have provided the offender's desired act and ejaculated (Scarce, 1997).

Janssen, Vorst, Finn and Bancroft (2002) postulate a "dual control", including excitatory and inhibitory systems of sexual response that occur in both men and women:

Stimuli assessed as sexual and non-threatening activate the excitatory, those that are appraised as a threat activate the inhibitory reducing the chance of sexual arousal. Individuals, however, will vary in their ability for excitation and inhibition...A person with a low propensity for inhibition may become sexually aroused even by threatening sexual stimuli. Someone, however, with a high propensity for inhibition may be unable to become aroused even in relatively unthreatening situations which may lead to sexual dysfunction. A further and important aspect of the concept is that arousal induced by one type of stimulus can become recruited to activate the arousal response to another stimulus, a process described as 'excitation transfer' (as cited in Levin & van Berlo, 2004, p. 84).

Alternate explanations suggest that since sexual responses are initiated by our autonomic

nervous system – which is also responsible for the ‘fight or flight’ response and since the two systems are very closely linked, the nerve endings in a male’s penis, and in females, the clitoris, simply do not know the difference between good touch and bad or unwanted touch (Bullock & Beckson, 2011). “From a biological standpoint, these responses should not be interpreted as consent or even sexual pleasure” but rather as a symptom of the extreme trauma these men endured (Fuchs, 2004, p. 101).

Bullock and Beckson (2011) conducted a review of the literature on male victims of sexual assault and looked at the physiology governing involuntary sexual responses. Their review of the scientific literature supports that men often experience involuntary erections or ejaculations when provoked with extreme anxiety, such as during a sexual assault. These responses do not signify consent, and scientific evidence supports this. Researchers and authors Mezey and King (2004), from the Department of Psychiatry at The London Hospital estimate that approximately 20 percent of male victims become stimulated to the point of ejaculation during sexual assaults. Fuchs (2004) also cites several cases where males obtained and sustained erections during assaults that were committed under extreme situations of distress, including at gun-point and while being handcuffed, gagged and beaten to the point of passing out, or after awakening from being drugged, passed out, tied up, and threatened with castration for not performing.

Anecdotally, men and boys have long been described as having little to no control over their spontaneous erections, even ejaculation, in response to anxiety-provoking stimuli. They are reported to occur during sports, examinations, public performances, gym class or when experiencing fear associated to threat or the thought of being punished (Fuchs, 2004). Consequently, based on these experiences, males learn that only certain erections are associated to sexual fantasy whereas others are not. Nonetheless, when recalling their abuse, many males

fail to distinguish this. Instead they give allegiance to what they hear about mature males, specifically to the impression that mature males can always control when and with whom they obtain erections. As a result, when they recall their abuse, they tend to rationalize that although they may recognize the situation first began as non-consensual, they presume they must have changed their minds and became willing participants. They rationalize that their perpetrator must not have forced, but rather coerced or seduced, them into a state of arousal, making the act consensual.

It is probable that many victims, both male and female feel humiliated or disgusted by the arousal they experienced during abusive situations. However, the physical 'evidence' of obtaining an erection often complicates males' ability to see themselves as victims, which diminishes their desire to disclose the matter. Furthermore, it increases their sense of shame and guilt, confuses them and negatively affects their perception of self.

### **Reluctance to Seek Help**

Research indicates that men are less likely to seek help for psychological problems than women (Addis & Mahalik, 2003; Lane & Addis, 2005). Addis and Mahalik, who examined the social construction of masculinity and how it affected help-seeking behaviour, discovered a number of factors:

A man is least likely to seek help for problems that he sees as unusual, especially when he also perceives them as central to his identity. He is also unlikely to seek help if groups of men who are important to him endorse norms of self-reliance or other norms that suggest his problem is non-normative. Finally, help-seeking is less likely to the degree that a man calculates that rejection from an important social group, as well as his view of himself as deviant, are costs too great to risk in relation to the help he might receive. This is especially true if he feels he will sacrifice his autonomy by seeking help (Addis & Mahalik, p. 11).

Simply stated, men are reluctant to seek help if they feel that others may disapprove of their need for help. If the majority of men with whom a man associates have never mentioned having the same or a similar problem, and/or if they regularly make statements about the

importance of being strong and not letting things get to them, then victimized men are more likely to remain silent and deny their own feelings of vulnerability and weakness. If a man sees himself as having similar qualities to his peers, he will not want to be rejected for seeking help. Lane and Addis examined the relationship between male willingness to seek help and male gender role conflict when struggling with depression and substance abuse. Their research revealed that men are reluctant to seek help from their friends, especially when dealing with issues associated with depression.

Although research indicates that male CSA remains under-reported to authorities, poorly-recognized by clinicians (Boyd & Beail, 1994; Gartner, 2000; Holmes & Offen, 1996), and under-treated in adulthood (Holmes & Offen), research into CSA disclosure also reveals that this reluctance to seek help is not exclusive to males. Research examining both male and female victims of CSA estimates that between 30 to 80 % of all victims purposefully do not disclose their abuse before adulthood (Alaggia, 2005). Alaggia explains that it is impossible to produce reliable data on disclosure since there is no way to know how many adults have not disclosed.

Theories of disclosure offer insight to understanding the processes involved in both male and female disclosure (Alaggia, 2005). Approach and avoidance factors have been suggested as influencing a person's decision to disclose. If a victim assesses the risks of telling to be greater than the rewards, he or she will not disclose (Omarzu, 2000). Victims will generally assess their situation and make a decision in regard to how much or how little to disclose depending on their understanding of the anticipated risks and benefits. This premise supports the assertion that disclosing is not a single event; it is a process. Similarly, social exchange theories have been proposed as a means to understand disclosure (Leonard, 1996). On the one hand, disclosing can sometimes stop victimization. Conversely, it could lead to secondary traumatizing like being

blamed or disbelieved.

Alaggia (2004) interviewed 24 male and female survivors of sexual abuse to examine the patterns and processes that influence, inhibit and promote disclosure of CSA. “The study objectives were designed to address gaps in knowledge about how, when and under what circumstances victims of CSA disclose, and understand issues that interfere with disclosure” (Alaggia p. 1216). In this research she identified that the term ‘disclosure’ lacks definitional clarity. The word ‘disclosure’ does not differentiate between the act of simply telling a support person or reporting their abuse to the authorities; nor does it clarify if it is referring to one static event or a process. During her research, *prompted*, *accidental* and *behavioral* patterns of disclosure emerged. *Prompted* disclosures were those elicited by a counsellor or other concerned investigator. *Accidental* disclosures involved the abuse being discovered by a third party. *Behavioral* disclosures were actions the child had utilized in an attempt to convey that something was amiss. These included clinging, temper tantrums, angry outbursts, avoiding home, social withdrawal, running away and suicide attempts (Alaggia, 2005). Statistically:

forty-two percent of the participants had disclosed the abuse during childhood, while the remainder (58%) had not disclosed until adulthood. Of the 42% who had disclosed during childhood, only 6 were purposeful disclosures. Of the 58% (N= 14) who had not disclosed, half did not disclose either because they had repressed or forgotten the memory, or the abuse had occurred in preschool years and they had difficulty with recall. Thus, this group of participants who recovered the memories in adulthood constituted 29% of the total sample. Seven other participants withheld disclosure intentionally and not as a result of forgotten memories (Alaggia, 2004, p. 1218).

Twenty-five percent had intentionally withheld their disclosures. “Their reasons for not telling included feelings that they would not be believed, self-blame, shame, fear, and not wanting to hurt people’s feelings (Alaggia, 2004, p.1219).

In a further study, Alaggia interviewed 30 male and female victims of CSA, in relation to their disclosure experiences. Once again, she found that “the overall trend for both women and

men was toward delaying disclosure, with more than half the sample (58%) only disclosing well into adulthood” (Alaggia, 2005, p. 460), although many had made indirect verbal attempts to disclose. Indirect attempts included hints about not wanting to be left alone with the abuser, or requests for the non-abusing parent to stay home from work. Those who withheld usually did so until they had an emotional breakdown later in life. What differed among those who had withheld were their reasons for non-disclosure. Men reported “fear of being viewed as homosexual; feelings of profound stigmatization or isolation because of their belief that boys are rarely victimized, and fear of becoming an abuser which eventually acted as a precipitant for disclosure” (Alaggia, p. 461). However, women felt more conflicted about who was responsible for the abuse and they more strongly anticipated being blamed or not believed (Alaggia).

Hunter (2011) researched the process of disclosure among male and female survivors of CSA. Of the 22 participants interviewed, only five had disclosed and each had experienced some form of disclosure-related trauma. Either their situation did not improve or they were not believed or supported. Similar to what was found by Alaggia (2004; 2005), four of Hunter’s participants described the ways they had acted out in hopes that someone would perceive their distress.

Hunter’s (2011) participants identified barriers to disclosure as: lack of positive family environment, culture, fear of punishment, fear the abuser will move on to other victims, fear of not being believed, feelings of responsibility, self-blame, shame about hidden thoughts about homosexuality, and fear about being labeled as homosexual. Although her results were not differentiated by gender as explicitly, she reported that the fear of what might happen within the family was also established as a barrier. For example, one victim feared that her father might kill her perpetrator and go to jail for murder. Another feared what would happen to her mother if her

father left the family. Hunter stated that anger felt in adulthood was a strong motivator for eventual disclosure: anger toward their offending parent for abusing them or anger toward their non-offending parent for failing to protect them. While many of the males had made selective disclosures, telling only their intimate partner, a friend or a therapist, several of the women disclosed to a family member or the police.

Like Alaggia (2005), Hunter (2011) identified disclosure as a life-long process that victims struggle with. Many of her participants viewed their lives in terms of pre- and post- disclosure phases. Some decided to seek justice as adults because they became less fearful and more able to recognize that they could gain protection from the law. Over time, as these men and women felt less fearful or ashamed, it became easier to talk about their experiences and to make new decisions about the role they played as children (Hunter). As adults, some decided to share their stories family members, despite experiencing negative consequences for having done so.

Jensen, Gulbrandsen, Mossige, Reichelt and Tjersland (2005) investigated the context in which children were able to report CSA. Results revealed that as children, these males felt it was too difficult to find situations containing either enough privacy or the prompts they would have needed to disclose. Participants conveyed that since they were never directly questioned about being abused, they never felt it was the right time to talk about it. They also stated it was too difficult to get time alone with their potential confidant and they were sensitive to their potential reaction. They worried that their disclosures might be misinterpreted, or their experiences might be trivialized.

Although the results of these studies are fruitful, research that exclusively examines males' experiences of disclosure is limited (Sorsoli et al., 2008). That which does exist reveals that male disclosures are often met with disbelief (Matos, Pinto-Gouveia, & Costa, 2013). A

dismissive, disbelieving, non-supportive, hostile or non-protective response can be traumatic. It can cause secondary injury (Rothchild, 2000), long-term mental health symptoms (Feiring, Taska, & Lewis, 2002; Matos, Pinto-Gouveia, & Costa), and deter the victim from making any further attempts to disclose. Since children (and presumably adults) often wait for their counsellor or other helping professional to provide them with sufficient privacy and prompts to facilitate their disclosure; when these conditions are not met, opportunities for disclosure are minimized or lost.

### **Research Exclusive to the Male Experience of Disclosure**

Although somewhat dated, research by Nasjleti (1980) reveals consistency and growth in our knowledge of male victimology. She examined the antecedents of non-disclosing among males aged 12-17 after recognizing that male incest victims had “virtually been ignored”, and that little information about them was available in the literature. Nasjleti studied the experiences of nine boys who were dependents of the court and known to have been sexually abused by a relative, most of whom were ordered to participate in therapy. She observed an “extreme resistance” to discussing their abuse. Most simply wanted to forget it ever happened, and refused to discuss their feelings even in individual therapy.

She believed that boys’ resistance to discussing abuse was related to “shame at not having been the dominant person controlling the molestation situations” (Nasjleti, 1980, p. 272). She identified several common fears associated with the thought of reporting their victimization. These included the fear of being considered unmanly for not being able to protect themselves, fear of being labeled as homosexual and fear of becoming homosexual, as well as the fear that familial incest was indicative of mental illness and victims felt responsible for seducing their mothers. Finally, they feared that no one would believe them, or that nothing would be done to

stop their abuse. The majority of participants were angered by the disbelief of those they had previously disclosed to. Several stated their greatest fears were justified by the person's reaction and their belief that males should be able to prevent such abuse.

Nasjleti (1980) explained that in society there existed a common reaction of either disbelief or passive acceptance among both the public and professionals in regard to male victimization. It was doubted that sexual abuse had a significant impact on males. There existed a myth that the "seduction of a male child" was a "positive sexual experience for the boy" (p. 271). Her opinion was that the seduction of a boy by a significant adult female was detrimental to his psychosocial development and to "the well-being of women and children who become victims of men who, as boys, were sexually abused by women" (Nasjleti, p. 271). Cumulative knowledge, research and clinical experience have since revealed the belief that all male sexual abuse victims become offenders to be a myth, and there is a new understanding that sexual abuse does have a significant impact on male victims (Fradkin, 2013).

In 2008, Sorsoli, Kia-Keating, and Grossman interviewed 16 men who were victims of CSA about their disclosure experiences. Inclusion criteria included that participants must be "doing relatively well in at least one area of their life" (p. 335). This study was initiated based on the observed need for research in this area. The researchers explored to whom disclosures were made, experiences of disclosure, as well as incentives and barriers to disclosure. Their results revealed "very few actual experiences of disclosure, while revealing many barriers" (p. 338). Only one out of the 16 men interviewed had purposefully disclosed the full extent of his CSA, and when he did so, the results were "disastrous"; he was not believed. Others had attempted to disclose but their disclosures were incomplete, minimized, "only partial and often cryptic" (p. 339). Their partial disclosures were met with disbelief, physical abuse or simply not

acknowledged. “The stark reality is that these men’s initial attempts to tell were neither well-received nor encouraged” (p. 343).

Sorsoli, et al. (2008) identified personal obstacles, relational obstacles and sociocultural obstacles as barriers to disclosure. Personal obstacles included “lack of cognitive awareness, intentional avoidance, difficulty approaching the topic or articulating the thoughts and emotions involved, emotional readiness and safety, and shame” (p. 339). Participants who stated, “it did not occur to them to tell anyone” suggested that their lack of awareness rendered them unable to disclose these events (p. 339). Emotionally, the men did not feel ready to disclose their abuse and they worried about their emotional safety should they disclose. In childhood, they reported feeling shame about the experience and responsible for not having stopped the abuse or for not telling someone earlier.

Relational barriers included the fear of specific negative repercussions or interpersonal difficulties. Fourteen participants identified that living in isolation also acted as a barrier to their disclosure. Some were too terrified and feared disclosure would make their situations worse. Others believed that they would not get the help they needed. They believed that others had known they were being abused but simply had not acted to stop the abuse. This left them with the impression that it was ‘normal’ (Sorsoli et al., 2008). Many found it hard to believe that their abuse went undetected. Most felt it would simply be too hard for others to hear about, and feared being associated with homosexuality or being perceived as offenders. Two of the participants stated that while they had previously been able to disclose their physical abuse, they did not reveal that they had also been sexually abused.

Socio-culturally, some participants indicated that biases regarding masculinity kept them from discussing their experiences. Since it felt culturally unacceptable for men to be victims,

they believed that disclosing their sexual abuse was something they should never do, unless it was to someone that they had known and trusted for many years. However, their fears of negative repercussions outweighed their desires to disclose. “These men actually seemed caught in a double bind”; they experienced shame and felt reluctant to share their histories “while simultaneously expressing shame for not telling earlier” (Sorsoli et al., 2008, p. 341).

Recent research conducted by Sigurdardottir, Halldorsdottir, and Bender (2012) is aptly titled “Deep and Almost Unbearable Suffering: Consequences of Childhood Sexual Abuse for Men’s Health and Well-being”. The study was designed to explore the consequences of CSA on Icelandic men’s health and well-being. This qualitative research describes the experience of men, all of whom endured sexual abuse during their childhoods, and all of whom had lived with a profound depression their entire life. None of the 14 men disclosed their abuse until well into their adulthood when “they hit rock bottom and faced the choice of revealing what had happened or taking their own life” (p. 694). The myth that men who have endured sexual abuse during childhood will become abusers in adulthood had kept them silent; each was convinced that nobody would believe they were not future offenders. Despite their intense fear, each chose to disclose as the alternative to killing themselves. This begs the question, how many others chose the alternative?

## **The Present Study**

### **Rationale for this study.**

**What was already known?** Vast amounts of research have examined the impact of CSA. Common themes denoted include that any maltreatment during childhood can affect brain development and social functioning (Twardosz & Lutzker, 2010; van der Kolk, 2007). Consequently, children who were sexually abused often grow up with an inability to trust others

(Hopper, 2013) or to form healthy relationships. They often feel unsafe, unsure of themselves, and unsure of what was once a predictable world around them. CSA victims are commonly bothered by intrusive thoughts, hyper-vigilance, hyper-arousal, differing degrees of dissociation, triggers, depression, anxiety, inability to pay attention, disturbances in their memory and emotional dysregulation (van der Kolk & McFarlane, 2007). Many struggle with anger issues, addiction issues, have suicidal ideations and have difficulty in other areas of their lives.

CSA can alter a boy's trajectory in life. Coping strategies are influenced by age, developmental stage, and supports in place prior to abuse. Also influential are a boy's temperament, available resources, social context, and the meaning he places on the traumatic events (van der Kolk, van der Hart & Marmar, 2007). The impact of abuse depends on who the perpetrator was, whether they used violence or grooming techniques, how severe the abuse was, and if the abuse was an isolated incident or on-going (Hopper, 2013; O'Leary, Coohy, & Easton, 2010).

For many, discussions of males as victims of sexual abuse remain a taboo topic. It is discussed perhaps least among male survivors themselves. This must change. Unfortunately, many people still find it difficult to believe that men can actually *be* victims of sexual abuse (Fradkin, 2012; Lew, 2004). Social awareness of males as victims of sexual abuse has only begun to evolve in recent years, undoubtedly influenced by an increase in media attention. Nonetheless, societal awareness remains in the early stages. Organizations like the Men's Project (ON), the British Columbia Society for Male Survivors of Sexual Abuse (BC) and MaleSurvivor.org (NYC) and 1in6 (USA and Canada) which provide services exclusively for male survivors in North America do exist, but they remain unknown to most people.

**What is not known?** While the prevalence and impact of sexual abuse of males has

increasingly been documented, relatively little research has specifically examined why males so seldom report their abuse (Sosoli et al., 2008), why they take so long to make disclosures, and what prompts eventual disclosure among those who do (O'Leary & Barber, 2008). The limited number of male voices in the literature is an oversight that requires attention.

**What will this study add to the literature?** Although past studies examining disclosure enrich our understanding, most have focused on how and when children do disclose and what helped them to disclose. Adult research has predominantly focused on women or the emotional cost of not telling. The current study focused almost exclusively on reasons why male participants did not disclose sooner, and on the decision-making processes associated with non-disclosure. It provides information and insights into the deep-rooted physical, physiological, emotional and socio-cultural barriers males face when considering disclosing. The knowledge gained from this study is necessary to help professionals find ways to remove these barriers and increase the likelihood of earlier disclosures.

#### **Statement of the Purpose and Significance of This Study**

Research examining the antecedents to non-reporting was needed. The purpose of conducting this research was to examine the antecedents, including masculine gender ideals and biases, males' avoidance of the problem and other unknown mental, physical, physiological, social or emotional barriers that contribute to males' reluctance to disclose. This study will increase our appreciation of this complex issue. It will also help us to understand the intensity of barriers and the ways that societal ignorance and gender socialization complicate these barriers. Finally, it will create understanding in regard to how these barriers overlap and impact each other (Sorsoli et al., 2008). Examining these processes is necessary in order to assist helping-professionals to step beyond what is currently known and to broaden the depth and breadth of

knowledge associated with male victimology. The intent is to allow for earlier intervention and healing of male survivors of CSA.

**Statement of the issue.** In 2009, Statistics Canada indicated that males account for 15% of all reported sexual assaults. Research indicates that one out of every six males is sexually assaulted prior to the age of 16. With approximately 17 million males in Canada, it is imperative to create understanding, awareness and environments where males feel comfortable disclosing their abuse. The definition of sexual abuse used in this research is based on the current Criminal Code of Canada (section 150.1 (1) (2) CCC) definition: any sexual touching by an adult or person two years older than them that involved touching or fondling their body in a sexual way or forcing them to touch or fondle the adult's body in a sexual way. However, adult was defined as any person at least five years older than the victim or a person in a position of trust or authority over the victim. Only victims of contact offences were included in this study in order to ensure that the offender's intent to have sexual relations was clearly established.

**Research questions.** In order to better understand the barriers males face when making their decisions to disclose or not to disclose their abuse, the present study seeks to answer the following questions from the perspective of adult male survivors: 1) How do boys, and later men, who experienced childhood sexual abuse, perceive that others may have reacted and responded if they had disclosed their abuse? 2) How do these perceptions or beliefs make them react and respond? 3) What are the decision-making processes they engage in when considering whether or not to disclose their abuse to either a care provider, a person in a position of authority, or a supportive friend? 4) What were the environmental, cognitive and emotional contexts associated with this decision-making process? One other question based upon a request from Dr. Hopper, a clinical psychologist, instructor at Harvard Medical School and researcher into male

survivor issues, will be asked. He requested that a question associated with the use of the word 'survivor' be asked during this research. He seeks to determine if the use of the word 'survivor' shamed, embarrassed or in any other way acted as a possible barrier to disclosure (Hopper, 2012, personal communication). A question associated to the word 'survivor' was therefore included in the semi-structured interview during this research project. The next chapter will describe the particular methodology and methods employed for this study.

### Chapter III: Methodology

The present study adopted a qualitative approach using *basic interpretive inquiry* as the guiding methodology. On the advice of seasoned researchers, I began planning my approach based on a desire to fulfill the objectives of my research and identifying the best way to answer my questions (Crotty, 2012). From the outset, I chose a qualitative approach since qualitative researchers are interested in understanding the meaning people construct and how people make sense of their experiences in the world (Merriam, 2009). Moving forward, I accessed textbooks written by Crotty, a professor and respected author in the field of social research, as well as Creswell (2013) and McLeod (2001), all prolific authors on research methodology. Crotty dictates that when developing a research proposal, considerable effort must be taken to decide what methodology and methods are employed, and to justify reasons for doing so. The rationale for each decision must be a by-product of the understanding and a declaration of our own epistemology, or own beliefs, about how knowledge is formed. A researcher's epistemological stance informs her theoretical perspective and directs her choice of methodology and methods. Below is an explanation of my epistemological stance, theoretical perspective and rationale for choice of methodology.

#### Epistemology

Epistemology is essentially a way of explaining and understanding how we know what we know (Crotty, 2012). Reflecting upon my own beliefs and guided by McLeod (2001), Crotty, Creswell (2013) and Merriam (2009), who define the paradigmatic distinctions of each stance, my epistemological position is that of *social constructionism*. "Social constructionism seeks to understand the ways in which the world is co-constructed by persons living within a cultural tradition" (McLeod, 2001, p. 29). It "adopts the stance that reality is socially, historically, and

culturally constructed through the use of language” (McLeod, 2001, p. 117). Some researchers argue that social constructions are not simply made through the use of language, but also through our emotions, body language, fantasy life, etc. They are formed, not simply imprinted, through interactions with others and the world around them. These meanings are varied, multiple and negotiated based on their social and historical context (Creswell, 2013). Since humans seek to understand or make sense of the world in which we live and work, we cultivate subjective meaning of experiences, objects and things. Researchers look for complexities within meaning bases versus taking a more narrow perspective.

The meaning people attach to experience is based on both historical and culturally accepted norms which operate within their culture (Creswell, 2013). Social constructionism emphasizes that the social and psychological worlds are made real (constructed) through social processes. Furthermore, “the ‘social’ in social constructionism is about the mode of meaning generation” (Crotty, 2012, p. 55). Simply stated, people develop their reality or meaning based on their interactions with other people, objects or things experienced in their environments (Creswell). Social constructionism dictates that our interpretations are shaped by the society in which we live, and that our knowledge, meaning, and reality are constructed through our interactions with other people (Merriam, 2009).

Social constructionism “seeks to understand the ways in which the world is co-constructed by persons living within a cultural tradition” (McLeod, 2001, p. 29). Both the researcher and participant are embedded within these traditions. Socio-culturally, the environments we are born into include concepts of gender biases. The appropriate and inappropriate display of certain emotions based on gender has been socially constructed and maintained over time. The objective of this research is to discover these culturally and historically situated emotional, psychological

and cognitive barriers to non-disclosure, and is consistent with the stance of social constructionism.

### **Theoretical Perspective**

My theoretical perspective or philosophical stance is consistent with that of an *Interpretivist* approach. Interpretivist researchers are interested in how people interpret their experiences, what meaning(s) they attribute to their experiences and how they construct their worlds (Merriam, 2002; 2009). They look for an in-depth understanding of how meaning is created in society; the “culturally derived and historically situated interpretations of the social world” (Crotty, 2012, p.67). Interpretivists recognize the self-reflective role of the researcher as an interpreter of the data, an individual who represents information (Creswell, 2013). This approach acknowledges the importance of language and issues of power, authority and domination that exist in all facets of the qualitative research (Creswell). Interpretivism was adopted out of the tradition of *hermeneutics* which originated from the discipline of biblical analysis and interpretation; it was used to interpret publically accessible texts.

Hermeneutics is a precise way of representing the interpretive stance whereby researchers seek to understand the meaning of human experiences through a historical and cultural lens (Crotty, 2012; McLeod, 2001). Our attempt to understand text or dialogue is framed by what Gadamer (1975), a German philosopher, referred to as our ‘historical consciousnesses. Gadamer’s approach provided a valuable dimension to inquiry in that it allowed for a deeper understanding of both the cultural and historical tradition. Gadamer explained that understanding is built from a set of “cultural constructs embodied in language” (McLeod, p. 23). He stated that understanding phenomenon involves the “fusion of horizons”, or the coming together of the interpreter and the text; it represents moments of insight and transformation for

the researcher.

McLeod defines hermeneutics as a “tradition-informed inquiry, in the sense that questions that are being investigated are always viewed not only in their cultural-historical context but from the context and tradition of the researcher” (McLeod, 2001, p.23). Furthermore, as an “act of interpretation which 'bring[s] to light an underlying coherence or sense' within the actions, behaviour or utterances of a person or group” (McLeod p.22). It is a part to whole process of interpreting text to understand its deeper meaning from a cultural-historical context. “Every act of hermeneutic understanding begins with a pre-understanding, which orients the inquirer in relation to the text or topic” (McLeod p. 23). Social constructionism honors the spirit of the hermeneutic tradition (McLeod). “Hermeneutics’ involves the appreciation that a successful interpretation is from a perspective, takes place from a position within history, requires sensitivity to the use of language, and leads to a shift (or learning) on the part of the person making the interpretation” (McLeod, 2001, p.22). According to McLeod, the main principles of a hermeneutic approach to inquiry are as follows:

That hermeneutic inquiry is a process of interpreting a text;

*The hermeneutic circle* means that the process of interpretation is developed through moving back and forth between the whole text and parts of the text while using both the whole and the parts as a framework for understanding each other;

*The use of empathy* indicates that interpretation requires an understanding of the emotional and interpersonal worlds of the participant, and an awareness of the differing cultural-historical situation of the writer.

*Achieving a comprehensive, coherent interpretation* which implies that the end results will be an interpretation encompassing all aspects of the interpreted text.

*Speaking from within a tradition* indicates that the researcher is a member of a community or tradition and that his/her interpretation of the text is influenced by his or her own values, beliefs, and prejudices.

*Innovation and creativity* involves the act of discovery, through insight the researcher enriches the participants understanding by proposing new differentiations and interrelationships in the text, and extending its meaning.

*Fusion of horizons* indicates the researcher and participant must have a consensus over meaning, and that both are changed by the study.

Epistemologically, social constructionism honors the spirit of hermeneutic traditions (McLeod, 2001). It is often combined with an interpretivist/hermeneutic approach as a theoretical perspective (Creswell, 2013). Interpretivism and hermeneutics inform the methodological approach of basic interpretive inquiry adopted in this study.

### **Basic Interpretive Inquiry**

Basic interpretive inquiry “assumes that reality is socially constructed, that is, there is no single observable reality. Rather, there are multiple realities or interpretations of a single event” (Merriam, 2009, p. 8). Epistemologically, basic interpretive inquiry is based on the assumption that knowledge is socially constructed, subjective and context-bound (Merriam). Merriam describes a basic interpretive study as exploring participant interpretations of experiences, understanding how they make meaning of situations, and how they experience phenomena and construct their worlds. It is a methodology well-suited for studying how individuals create their understanding of situations or phenomena (Merriam, 2002). Researchers using this approach seek to discover, uncover, understand and interpret phenomena and processes from the perspectives and paradigm of the people involved. It’s “strategy is inductive, and the outcome is

descriptive” (Merriam, 2002, p. 6). While “all qualitative research is interested in how meaning is constructed, how people make sense of their lives and their worlds, the primary goal of a basic qualitative study is to uncover and interpret these meanings”(Merriam, 2002, p. 39).

Given that a research design should be driven by the research questions (Crotty, 2012), a basic interpretive inquiry methodology aligned well with the objective of this study, which was to better understand male experiences of non-disclosure of sexual abuse. It is a well-suited methodology for studying how individuals make meaning of situations, experiences or phenomena (Merriam, 2002). Researchers using this approach seek to understand not only an individual’s experience of a certain phenomenon, but the meaning they attribute to that experience, how that experience informs the world which they construct, and their responses to these meanings. Not the events themselves, but rather the meaning placed on those events, was the focus of this study. Secondary goals were to garner suggestions and to make recommendations for ways to lessen the barriers and create environments where males feel safe to make disclosures.

Basic interpretive inquiry is one of the most common approaches to conducting research in education (Merriam, 2002). This methodology allows for the flexible analysis of data. It involves identifying recurring patterns that are presented as categories and themes common within and across the data from which it was derived (Merriam).

## **Method**

Braun and Clarke’s (2006) thematic analysis approach to analyzing the socially constructed phenomenon under study was the method of analysis utilized in this research. Thematic analysis aligns appropriately with a social constructivist epistemology (Braun & Clarke; Guest, MacQueen and Namey, 2011). The overall interpretation is “the researcher’s understanding,

mediated by his or her particular disciplinary perspective, of the participant's understanding of the phenomenon of interest" (Merriam, 2002, p. 38). Details of the analysis procedure are described below.

**Participants.** Data for this research was collected from the interviews of thirteen adult male survivors of childhood sexual abuse who had not disclosed their abuse for at least one year after it began or occurred.

**Recruitment.** Advertisement posters (see Appendix A) were placed in high traffic areas at various non-profit and private practice counselling agencies, including The University of Alberta Clinical Services, the University of Alberta Sexual Assault Center, the Sexual Assault Center of Edmonton, and at the MaleSurvivor.org 14<sup>th</sup> annual conference in Newark, NJ. Social media sites were also used to advertise for participants (see Appendix B). All advertisements and posters included a brief synopsis of the study and the researcher's contact information. Interested participants were encouraged to contact the researcher via phone, email or in person. Recruitment also occurred through email and word of mouth via counsellors or other helping-professionals who alerted other therapists and their clients to the research study. Although participants were recruited through a variety of sources, 12 of the 13 participants came from the same source, the 2014 MaleSurvivor.org conference in Newark, New Jersey, USA. Despite this, collectively, they are an international group and represent a variety of cultural, ethnic and religious backgrounds. They ranged in age from mid-30's to early 80's and identified as being from French-Canadian, Canadian, American, Italian and New Zealand heritage. Participants identified as Christian, Catholic, Agnostic and Atheist in their beliefs systems. They had completed differing levels of education, from a less than grade 12 to doctorate level education. Several men contacted the researcher requesting to be interviewed after her data collection was

complete, so were declined the opportunity to participate. Once potential participants expressed an interest in the present study, they were informed of:

The nature and purpose of this research study;

The role of the researcher – to collect data, not to conduct therapy;

The researcher's 'duty to report' should the researcher learn of any child or adult currently at risk; or should the participant disclose any suicidal ideations;

Their rights to confidentiality and anonymity;

The approximate time commitment required; and

Community resources available if needed.

The researcher explained the consent form to ensure that each participant: (a) understood it and was fully informed, (b) consented and (c) freely made their decision to participate. Informed consent was explained prior to their first interview when a signed informed consent form was obtained. To ensure participant anonymity, all identifying information was excluded or altered during the transcribing, analysis and writing process. All participants were assigned an alias; all data was stored on a password-protected computer, and all paper documents associated to this research will be held in a locked filing cabinet and will remain under the sole control of the researcher. All audio files are stored on a password protected computer.

**Inclusion and exclusion criteria.** Each participant was screened to ensure they understood the nature and purpose of this study and informed that they must meet the following inclusion criteria: they would be required to (a) have experienced at least one incident of sexual abuse as a child. Child was defined as any person under the age of 18. Sexual abuse was defined as any sexual touching by an adult or person five years older than them that involved touching or fondling their body in a sexual way or forcing them to touch or fondle the adult's body in a

sexual way, (b) had waited at least one year before making any disclosure, (c) were willing to participate in a semi-structured interview and a follow-up interview simply for clarification purposes, where they would be asked to reflect on their experience of deciding to disclose their abuse or not. Participants would have been excluded if they admitted to any active suicidal ideation, but none did.

Once candidates were screened for participation, an agreed upon time to complete the first of two semi-structured interviews was established. Participants were provided an information letter (provided in person) that contained a thorough overview of the study (Appendix C) and the semi-structured interview guide (Appendix D). Participants were required to sign an informed consent form prior to their first interview (see Appendix E) and were informed that they are free to withdraw at any time during the interview process. Participation was voluntary and participants were informed that their identities would be kept anonymous. They were also offered community-based referral information if needed; however, none of them requested this. One candidate was screened out during the interview phase when it became apparent that he did not meet the criteria. He had disclosed his abuse to an adult immediately after it occurred.

**Participant questions.** Once rapport was established and the participants indicated that they were prepared to begin their semi-structured interview, the following questions were asked:

1. Can you tell me a little bit about what you think that I need to know about your experience of being sexually abused?
2. Tell me about what led you to decide to disclose or not to disclose your abuse?
3. Help me to understand what impacted your decision-making process.
4. Can you tell me about any factors that discouraged you from disclosing?

Supplemental questions included:

5. If/when you did make a disclosure, what helped you to do this?
6. To whom and when did you make the disclosure(s)?
7. Prior to your disclosure or the discovery of your abuse, did you ever try to tell anyone about your abuse, or try to alert someone to your situation through your actions, words or behaviors? Tell me about any attempts to disclose that you made.
8. How long after your abuse was it before you tried to disclose or succeeded in disclosing to someone?
9. What other supports did you need that would have helped to disclose?
10. What was your motivation to participate in this interview?
11. Has anything such as the recent media attention given to male CSA survivors affected your decision to disclose? If so, what was it that influenced you?
12. Is there anything we have not discussed that is important to understanding your experience? If so, please describe.
13. What does the word ‘survivor’ mean to you?

Although these research questions were focused on describing the participant’s experience of non-disclosure, it was important to provide participants the space and opportunity to share their accounts of any attempts to disclose. Also, it was necessary to ask clarifying questions about their decision processes when they previously were deterred from disclosing.

### **Data Collection**

Demographic information was gathered from each participant prior to beginning the formal interview process (see Appendix F). All interviews were audio-recorded and took place in a setting that was quiet, confidential and conveniently accessible for the participant. Initial interviews lasted between one to two hours each. Supplemental questions evolved during the

interview and after the participant's first statement was analyzed, depending on the need to elicit meaning, clarify details or develop concepts. Clarifying questions were adapted based on the knowledge that some actions and statements may have had multiple meanings. All but one second interview was conducted over the phone, (audio recorded) simply due to geographical limitations.

### **Data Analysis**

Following the thematic process (Braun & Clarke, 2006), the data was analyzed in the following six phases:

**Phase I: Become familiar with the data.** First I familiarized myself with the data then sent all but two of the audio files to bonded transcriptionists to be transcribed verbatim. I transcribed the first interview and one follow-up statement myself, and subsequent interviews were sent to transcriptionists to be typed. (Both transcribers were required to sign a confidentiality agreement: see Appendix G). Once transcription was complete, I reviewed each interview in a recursive manner to gain a deeper understanding of the data and to identify any points needing to be clarified. I listened to the audio and made brief notes, then listened to the audio again and compared the audio file with the transcribed version. Next, I converted each document to an electronic format compatible for uploading to AtlasTi. AtlasTi is a qualitative analysis software program used by researchers to manage and organize data in a hierarchical way, prior to beginning the formal coding process.

**Phase II: Generation of initial codes.** Once familiar with the uploaded data, I systematically highlighted segments of data which captured the essence of what was being discussed in regard to each participant's reasons for non-disclosure. The AtlasTi software extracted these blocks of texts, or meaning units, which represented the essence of what was

being discussed. I assigned them each a brief code name which captured the essence of their meaning. Once this was complete for each interview, each statement was reviewed several more times to ensure each explanation, action, thought, emotion, and response was captured to reflect the participant's description. Using the functions of Atlas TI software, I then generated code reports for each statement. The first report included all of the highlighted text associated with each explanation, action, cognition and response and the location where each piece of data was found. The second report included just the meaning units.

**Phase III: Searching for themes.** A total of 115 initial codes were made. All of the codes and their meaning units were transferred and organized by the AtlasTi software into like clusters. These clusters included similar concepts that were extracted from the perspective of the male survivor and totaled 116 pages of data. I then used the AtlasTi software code output grouping function and the code manager function to organize, analyze and group them into overarching group patterns and themes. Finally I accessed the AtlasTi code manager function which counted the number of times each concept emerged.

**Phase IV: Reviewing the themes.** I reviewed each theme to ensure it fit in relation to the coded extracts. I organized, refined and interpreted the themes and data clusters to identify expand and condense as many themes as possible while considering each theme's validity in context to the entire data set.

**Phase V: Defining and naming the final themes.** I generated clear definitions for each theme and continued to refine the themes to ensure they told the overall story of the analysis from the perspective of the participant. Subsequently, I gave each participant the opportunity to review, verify or dispute the themes identified from their statements. After this process was complete for each initial interview, a second clarifying statement was conducted to gain

additional information that participants may have recalled after the conclusion of the first interview, to address points in need of clarification and to allow participants to review, clarify or modify themes identified from the first interview. Only one participant stated that he did not agree with one of the themes identified by the researcher. He provided insight as to how the misunderstanding had taken place and where the data fit more appropriately. No additional themes were identified during the clarifying statements.

**Phase VI: Producing this report.** I then prepared a final vivid and compelling report using select quotes that best represented the identified themes relating to the analysis of the process of non-disclosure. All of the research questions identified in Chapter One were addressed (Braun & Clarke, 2006).

**Memoing.** Using the AtlasTi software, I used memos to capture my thoughts during the data collection and analysis phase. Also, during the coding process thoughts, impressions and questions in need of clarification were recorded in a notebook or in AtlasTi as a memo. Memoing was also used to remind myself of items needing to be clarified and of my thoughts and/or interpretation of the meaning of any nuances in the participant's tone or language. Moreover, to link concepts and assist in analyzing the stories being portrayed. Memos were also used to assist myself to consider the possibility that concepts or terms may have multiple meanings.

**Establishing quality and trustworthiness.** Establishing quality and trustworthiness was a rigorous and on-going process throughout the research. The *quality* of this research was sought through conducting the research in an ethical manner and ensuring each participant was given the opportunity to fully express himself. Each interview was transcribed verbatim, reviewed, and summarized. Clarification was sought for both meaning and context to ensure the meanings

interpreted were accurate and that they related to the research questions. While I did use my cumulative knowledge and experience to understand and clarify points with each participant, I used the perspective of the participant when conducting my analysis.

Lincoln and Guba (1985), whose qualitative background is socially constructive (Creswell, 2013) advocate four essential aspects of *trustworthiness*: *credibility*, *transferability*, *dependability*, and *confirmability*. Due to the subjective nature of basic interpretive inquiry, it is essential that all of the researcher's interpretations accurately portrayed what the participant intended. The credibility of this study was first established by carefully ensuring that I grasped the context of what each participant was saying both during the interview and analysis phase. Clarification was sought by asking the participants to review the themes identified and by asking them clarifying questions during the first and second interviews. Participants were allowed the opportunity to confirm (or disconfirm) the validity of the themes identified, clarify information and provide any missing information (data). Finally, by examining the extent to which the research answers the questions it intends to answer.

*Transferability* was established by supplying an in-depth account of methods, procedures and rationale for interpretations made throughout the study (Merriam, 2002). The use of AtlasTi software ensured the creation of an audit trail. It also provided a formalized method for keeping memos. Again, due to the interpretive nature of this qualitative research, and the understanding that multiple realities exist, without an audit trail it is feasible that an independent researcher could arrive at different results. Second, the clarifying interviews and memos disclose how I came to formulate the themes through the socially constructed cumulative knowledge and experiences of the participant. To ensure transferability, rich descriptions, capturing the contextual details associated to the participant's reasons for non-disclosure, were included within

the memos and transcripts. This was done so that future researchers could understand the rationale for the findings. Reviewing transcripts and memos would be especially helpful if another researcher were observing this research through a different lens. For example, a researcher looking at the meaning unit “he had power over me” may interpret the data to mean a physical power, authoritative power, a romantic presence. In reality, one may be correct or all three interpretations may be correct. However, a detailed examination of the transcript and/or memo supporting the interpretation, describing how the researcher arrived at her conclusions, would reduce the chances of concepts being taken out of context if the data was ever reviewed by another researcher.

Transferability was also established by ensuring that an adequate number of participants was drawn from a broad and diverse ethnic, socio-economic and cultural background. Also, through providing rich and thick but anonymous descriptions of several of the participants’ backgrounds, so other readers can determine if there are enough similarities within these participants that the results of this research can generally be applied to other male survivors (Merriam, 2009). This is an important concept for *dependability* which involves presenting results in a manner that is defensible, and ensuring that the identified themes are strong enough to occur again if examined by a different researcher. *Confirmability* involves ensuring the researcher sufficiently brackets her own assumptions and biases, and that any conclusions drawn are sufficiently found within the data.

### **Researcher Background and Preparedness**

Prior to beginning my graduate studies, I was a Royal Canadian Mounted Police (RCMP) officer for over 13 years. I specialized in sex crime investigations. For four years I worked in the Integrated Child Sexual Exploitation (ICE) Unit of the Behavioral Sciences Group in Major

Crimes. My role was to investigate offences, including the possession, production and distribution of child pornography, and international sex tourism offences. One of my duties, reviewing video tapes retained by offenders, allowed me to see first-hand the grooming techniques and sexual acts regularly performed by offenders.

During an intensive police training workshop in 2006, former NHL hockey player Sheldon Kennedy gave a private lecture to police investigators detailing the circumstances surrounding the sexual abuse he suffered by his former junior hockey league coach, Graham James. At this workshop and during my time working in the ICE Unit, I began to discover how prevalent, premeditated and under-reported male childhood sexual abuse is, especially in junior male organized sports (see also Hartill, 2009; 2014).

While completing my Master of Arts degree in Counselling Psychology, I conducted research using Braun and Clarke's thematic analysis. I also completed a clinical practicum, and worked for one year as a counsellor at the British Columbia Society for Male Survivors of Sexual Abuse (BCSMSSA) in Vancouver, BC. I have attended the MaleSurvivor.org International Conference in New York, NY three times, and numerous workshops which inform the practice of counselling adult male survivors of childhood sexual abuse.

Prior to becoming a police officer I worked as a corrections officer in two correctional facilities for males. While working in these institutions, I saw many males who, in hindsight, may have been struggling with issues associated to being a CSA survivor. My combined experiences as a corrections officer, police officer and counsellor working with MCSA survivors invoked within me the desire to understand males' experiences of non-disclosure more thoroughly. This research is grounded in the understanding and belief that knowledge can improve our practice. The results of this study will be shared in academic settings including

conferences, publications and private lectures.

**Researcher as an instrument.** Creswell (2013) emphasized the role of the researcher as a primary instrument of data collection whose background and experience shape their interpretation of a phenomenon. Undeniably, my background knowledge, training and professional experiences working as a corrections officer, police officer, counsellor and researcher have informed me of many of the barriers and other challenges male survivors face when considering disclosing. Also, since CSA has been studied for the past 30 years, a number of barriers to male disclosure have already been identified; I am inclined to observe many of the findings of researchers and psychologists who have studied male survivors before me.

Merriam (2009) acknowledges that the subjective experience and values of the researcher will no doubt be reflected in the way the data is both collected and presented. She explained two possible biases that can result when the researcher is also the interviewer (Merriam, 2002). First, the researcher may have preconceived ideas about what s/he expects to find and will subsequently stop looking for additional information once s/he finds what s/he expected to find. This issue was managed by asking each participant if there was any additional information that we had not yet discussed that he felt was relevant, both during the initial interview and during the follow-up statement. Second, Merriam stated that researchers may select and interview only participants whom they expect would produce data that reflects their pre-existing biases and perceptions. This was managed by recruiting participants on a volunteer basis based on their observation of a poster or media advertisement and by ensuring that some cultural, demographic, socio-economic and ethnic diversity existed among the participants.

**Researcher positioning.** *Axiology* refers to the value judgments inherent in each researcher's ontological and epistemological beliefs. The axiological assumption that

characterizes all qualitative research is that “all researchers bring values to a study, but qualitative researchers make their values known in a study” (Creswell, 2013, p. 20). It is therefore important to acknowledge my stance as a *feminist-informed* researcher, though the boundaries of such a position are not well defined.

Traditionally, feminism could be roughly defined as a philosophy that advocates for equal rights between women and men (Feminism, 2001). Historically, feminists have been recognized as a woman rallying for the equal rights of other women. However, the third wave of feminism has created awareness and opened doors for discussions of oppression of any sort (Zerbe Enns, 1993). Perhaps to the astonishment of many men and women, feminist advocates today include men. Dr. Jackson Katz, an American educator, film maker and author seeks to lessen gender-based violence through drawing attention to the fact that gender-based violence is in fact a male issue, not a women’s issue, as the feminists of the past have mistakenly portrayed it to be. Other feminist-informed advocates are those (men and women) working to increase awareness of the fact that males can be victims of rape and violence as well as women. Many men working in the male survivor world are using the momentum and objectives of the feminist movement to advocate for the social acceptance of masculine displays of emotions. They do so while crediting the feminist movement for drawing awareness to gender inequality and gender-based violence (Hartill, 2005; Katz, 2014). My passion for the subject of male-survivor issues lies in my desire for equality for both sexes in regard to emotional expression, life opportunities, and personal safety.

**Biases and assumptions.** While I did believe that some or all of my participants would struggle with some or all of the issues discussed in the first chapter of this proposal, I monitored and ensured that my beliefs and assumptions neither restricted, shaped, nor interfered with the

collection and interpretation of my data. Prior to collecting my data, the research I conducted in regard to non-disclosure led me to believe the following: that there were numerous barriers to disclosure yet to be identified, and that some of the reasons which existed 30 years ago may have shifted somewhat as times have changed; that a complex relationship exists between these barriers; that they are confounded by the responses of others; and finally, that all of the males who volunteered to participate in this study would have the desire to disclose their abuse.

Many professional researchers advocate that having previous knowledge and understanding of a subject is valuable (Corbin & Strauss, 2008, Merriam, 2002, Turner, 2003). Having previous knowledge provides researchers with a starting point and a foundation for the language that can increase sensitivity and understanding of what is being described, often more quickly than for someone without previous experience or knowledge. It can also provide a basis for more in-depth discussions in the areas that are not yet well understood. Since I examined male experiences of non-disclosure as experienced by the participant, my previous knowledge was used only as a starting point and to increase my sensitivity and understanding of what was being described. Hence the concept of *bildung*, which implies that researchers keep a connection to their current understanding while remaining open to another's point or view or new meaning (Gadamer, 1975), and the concept of *bracketing* which implies that the researcher will set aside his or her personal biases and assumptions so as not to influence the process (Merriam, 2002), were adopted by me during this study.

Bracketing was utilized by the researcher who had previous knowledge and experience working with CSA. Because of how I became familiar with CSA I had to shift my purpose for talking with participants. I shifted from that of a police officer who evaluating and probing for the purpose of investigating criminal offences, to that of a researcher listening to implications. I

had to listen in a different way and for a different purpose. I bracketed my previous intent to gather evidence and evaluate criminal matters so that it would not taint the interview process, the data analysis process and the final discussion.

Comment [k1]: This is new

### **Ethical Considerations**

The initial proposal passed a review by the University of Alberta Research Ethics Board 1 (REB1). The research was conducted in compliance with both the standards and guidelines as outlined in Tri-Council Policy Statement for Ethical Conduct for Research Involving Humans, the Canadian Code of Ethics for Psychologists (CPA, 2001) and the University of Alberta, Research Ethics Board (REB 1).

As with many personal and disturbing issues, there was a chance that participating in this study would bring up distressing memories, thoughts and/or emotions for participants. Precautions were taken to ensure participants were at minimal risk as a result of their involvement. These included: establishing safety and rapport prior to engaging in the interview, providing each participant the opportunity to withdraw from the study at any time, allowing each participant the option to refuse to answer questions, providing each participant with contact information for the researcher, providing contact information to appropriate referral sources within the participant's jurisdiction or assisting them to find appropriate counselling support if needed, debriefing the study results with participants who wished to be debriefed and allowing breaks for self-care. Although one participant did make the comment that he was "blocking" while giving his statement, he indicated that he was simply unable to recall the full details of an event, not that he was experiencing unmanageable emotional distress. The interview process would have been stopped if any participant felt the desire to stop or was unable to continue, however none expressed any interest or desire to stop. The last portion of each interview was

dedicated to establishing the safety and comfort of each participant before they departed. Participants were encouraged to contact the researcher at any point prior to or during their participation (or anytime thereafter) should they have any questions. Finally, all identifying information was removed or changed and all data, memos and diagrams will be retained to provide an audit trail of the researcher's findings.

## Chapter IV: Stories of Abuse

Outlined below are the stories of three participants. Although the names used are pseudonyms and any personal information that would disclose their identity has been withheld, I have provided enough detail for readers to get a basic understanding of who they are, how and where their abuse began as well as how and why it was maintained over time. I have provided longer narratives in these three cases to relay the participant's experience of abuse and to explain the context of how it was orchestrated and maintained. I chose to elaborate on the descriptions of Ricky, Leon and Jacob because of the specific characteristics of each of their stories. Ricky was chosen because his story appeared to be similar in many characteristics to those of many sexually abused boys growing up in homes with emotionally unavailable parents. He craved attention, was afraid to speak out and allowed himself to remain in an abusive relationship to meet his need for attention. Leon's story was chosen because of the unique clinical characteristics of his memory loss and memory recovery process. In contrast to Ricky and Leon, Jacob's story was chosen to provide readers with an example of parental abuse and to reveal the context, severity, duration and damaging nature of his abuse story. Stories like his are generally hard to comprehend. It was necessary to provide greater detail in order to relay the extent of his abuse experience. Briefer descriptions for the remaining 10 participants are provided for ease of reference.

### **Ricky's Story**

Ricky was 49 years old at the time of his interview. He was born hearing impaired. Since his mother had significant health issues of her own, Ricky's hearing loss remained undiagnosed until he attended school. When his impairment was finally discovered, he had multiple surgeries and gained the ability to hear. Excited about his ability to hear, Ricky soon decided that he

wanted to learn how to play the drums. An older boy who lived down his street volunteered to teach him. Ricky was five years old when he began taking lessons from Pavlo who was 13 years his senior.

Pavlo had a mentally handicapped sister who was older. He bribed her with candy to try and kiss Ricky. Ricky thought little of this until after his first drum lesson. Although he does not recall the actual lesson or the full details of the abuse he suffered, he recalls that after he went home he destroyed his drum set, began having nightmares about being trapped in Pavlo's house and began wetting his bed.

Around this time, Ricky's mother, who had Multiple Sclerosis, became wheelchair dependent. Since their house was not wheelchair accessible his parents made the decision to move, however Ricky was to remain living in their original family home with his grandmother who was aging, addicted to gambling, and "couldn't care less about having a child living in her home". Since Ricky's grandmother wasn't interested in parenting Ricky and his parents were largely consumed with his mother's health issues, Ricky parented himself from a very young age and lived like this for the next several years. He visited his parents only on weekends, holidays, and for short periods of time in the summers. When his summer visits became too much for his parents to cope with Ricky's parents made the decision to send him overseas to stay with his aunt and cousin in Italy. It was during his first visit that Ricky's cousin, who was five years, older took him camping which is where Ricky had his second experience with sexual abuse.

On the first night of a six day camping trip, while he was sleeping, Ricky felt his cousin begin to fondle him. He was scared, confused and didn't know what to do, so he froze and pretended he was sleeping. His cousin was much older and had taken him to a place where he had little control over his environment or the outcome. Aside from that, he was alone in a

foreign country. Frozen with fear, Ricky hoped it would stop if he did not respond. However, the fondling continued until he ejaculated.

Ricky stated that although the sensation of ejaculating felt pleasurable, he was also frightened, disgusted and confused. He said nothing when they woke the next morning. He simply went about his business and hoped that it would not happen again. However, the next night his cousin returned and became more aggressive. He pushed Ricky to engage in oral sex. Although Ricky objected, his cousin was stronger, more determined and he succeeded in overpowering Ricky.

Although he felt repulsed and violated, the physical and emotional attention he got from his cousin felt nice, so he simply “fell into” the abusive relationship and did not fight it as much. He ‘allowed’ the abuse, which later included his cousin’s friends, to continue until his visit to Italy came to an end. Ricky was happy to be going home. However, after returning home he learned that his cousin had made plans to move to America so the abuse of Ricky continued for the next several years.

Retrospectively Ricky is able to see that this relationship was extremely damaging. He also recognizes that it occurred at a time when he needed the human attention, affection and physical contact. He made the decision that the negative attention was better than no attention at all. Ricky let the abuse continue until his cousin tried to progress into more aggressive acts like attempting to engage in anal sex. Ricky put an end to the relationship. He was 18 years old.

When queried about what influenced his decision to disclose or not disclose his abuse to his parents, Ricky stated that since his mother had multiple life-threatening health issues, he felt that his parents had enough problems of their own. He did not want to burden them further with the details of his problem. Also, since his father was “straight off the boat” from Italy, extremely

religious, homophobic and “not good with emotional things”, Ricky believed that if had told his father what had happened to him, his father would simply have told him to ‘get over it,’ and may not have believed him. Ricky felt that what he was going through was upsetting enough; he did not want to experience his father’s negative reaction. Ricky did not tell anyone about his abuse for several years. He reasoned that if he could not tell his own parents, who else could he tell? He also wanted to protect what little sense of family he had and avoid the possibility of having a family rift.

### **Leon’s Story**

Leon was 58 years old and was eager to participate in this research, since he wanted to share the “unique and complicated” aspect of his situation. His abuse began just a year after the death of his father, when he was 13 years old. Both he and his mother were grieving when a young school teacher, Scott, befriended his mother and offered to be a companion and role model to young Leon. He took Leon on outings, talked with him and paid special attention to him. Leon was missing his father and welcomed the attention.

During Christmas, Scott took Leon to his house, introduced him to alcohol and began touching him. Soon thereafter he progressed to anally raping Leon. Shortly after the abuse in this relationship began, Leon began being abused by a second man, his priest, who was less aggressive, but abused him nonetheless. At the time Leon did not comprehend that what his social companions were doing to him was abuse. Also, although he didn’t like these interactions, he felt powerless to stop them. He felt trapped, vulnerable and obligated to please the men who had paid him special attention at a time when he desperately needed it. Both of these abusive relationships lasted until Leon was 17 years old.

Although he went on to lead a somewhat normal life, which included getting married,

raising four children and being the Chief Executive Officer (CEO) of a large corporation, Leon admitted that he had hidden something from people in his life. His secret was that he had drunk daily from the first time he was introduced to alcohol by his abuser, for the next thirty-five years. No one knew the extent of his consumption: not his wife, his boss or any of his friends or staff.

Although he never understood his addiction to alcohol and at times questioned his sexuality, he only reflected on his abusive relations briefly. Leon believes the daily alcohol consumption removed him from the pain of ever acknowledging what he had been through. Alcohol helped him to block his painful memories which were all but completely removed from his conscious mind.

At the age of 47, Leon had a frightening experience. After a particularly heavy night of drinking, he was arrested for drinking and driving and faced losing his driver's license for the second time in his life. He was very frightened and made the decision to stop drinking. He quit "cold turkey" that night. After 35 years of daily consumption, he experienced considerable withdrawal symptoms in the days that followed. With his primary coping method gone, Leon began feeling suicidal. As these feelings grew, he became increasingly concerned for his personal safety, and took himself to his local hospital where he was admitted to the closed psychiatric unit for eight days.

Leon explained that this is where his story gets "significantly more complicated". During his hospitalization, he developed a slight limp and began dragging his right leg "in a very peculiar way". In out-patient rehabilitation his limp became more and more pronounced. He began falling down, having difficulty walking and was eventually referred to a psychologist, neurologist, and a psychiatrist. While he waited in anticipation of a diagnosis and cure, he was placed on 11 different types of psychotropic medications and saw numerous health care

providers, but none of this cured his limp. As time went on Leon grew more and more concerned and depressed and experienced more pain in his legs and in his penis. He described himself as “like the Hunchback of Notre Dame”. He was exhausted, in pain and dragging his leg behind him.

Leon was eventually referred to a top neurologist who confirmed that the pain he was experiencing and the limp he had developed were both real. His neurologist was an expert on conversion disorders. He observed Leon walk a corridor which would normally take an average person about one minute to walk, but took Leon 20 minutes to complete. He then told Leon that there was nothing wrong with him physically; however, psychologically there was something very wrong; something he had hidden that he had never talked about that was causing him to have a somatoform disorder. His neurologist referred him to a psychiatrist who also specialized in conversion disorders.

Leon began working with this psychiatrist who was trying to help him uncover what he had buried. For the next several months he and his psychiatrist went through the details of his upbringing, “unravelling the onion”. They had not yet discussed his teenage years when Leon believes he must have suddenly felt safe enough to allow the memories to return to his consciousness. It was not during a session with his psychiatrist, but when he was out walking with his Alcoholics Anonymous (AA) sponsor. They were discussing the work Leon was doing and exchanging stories about their pasts, when his sponsor asked him to tell him about the first time he ever had a drink. This was something he had never thought of before. The question literally stopped him in his tracks. He fell to his knees and began to weep as the memories of his first drink with his abuser came flooding back. He believes his therapy, sponsor, and being alcohol-free enabled him to uncover what he had repressed for thirty five years.

Examining the situation as an adult brought back the emotional intensity of his experience. He recalled the feelings of confusion and disorientation he had felt which had lead him to alcoholism and to deny the impact of his abuse. His confusion over his sexuality had not allowed him to understand that he had been abused. He had a genuine affection for both abusers and failed to recognize what they had done. Although he always had some awareness of the events in the back of his mind, he never thought consciously of them.

Aside from being a CEO, Leon had also been trained as a therapist and had worked with others who had been sexually abused, but was not yet in touch with what he had gone through as a teenager. Although he was aware he drank too much he never linked his alcoholism or somatoform disorder to his abuse. He believes that physiological and/or psychological defence mechanisms kept the memories of his abuse buried from his consciousness for 35 years. He also believes that God kept the memories hidden from him until he was more able to deal with them. His limp went away shortly after his memory returned.

### **Jacob's Story**

Jacob was 63 at the time of his interview, hardened by life, but intuitive and dedicated to helping others. He reassured the interviewer that he “didn't bite”, he merely wanted to educate people. He apologized for how hard he thought it may be to believe what he was about to relay but he wanted a chance to help people understand the realities of male sexual abuse. He asked his female companion to stay with him for support as he shared painful details of the extent and depth of his abusive past.

Jacob didn't know when his abuse first began but recalled he was very little, before school age, when he began being physically, sexually and emotionally abused. When asked what it was that he thought might be relevant for people to understand about his abuse history, he stated that

he had been “raped” by his mother, “raped by a priest” and “raped by a man in the engine room of a ship” and prostituted by his mother. As he relayed details of the extensive sexual abuse he endured, it became clear that the sexual abuse was only part of his significant history of abuse. He described his childhood and adolescence which was filled with abuse and neglect. Other than what was provided by his siblings and grandparents, Jacob’s upbringing was almost completely void of love and human compassion.

The abuse began after his mother appealed to him that he was special and encouraged him to engage in sexual acts with her. Her messages about his kindness and tenderness left him feeling responsible and confused; that it was his fault and he had somehow invited the abuse. In addition to being forced to engage in sexual relations with her, his mother sent him to the homes of some neighboring women who paid her for his services. This went on for several years and sometimes when Jacob got home his mother would accuse him of keeping money for himself, condemning him for being dishonest and selfish. He had difficulty comprehending the painful nature of this treatment as he relayed it in retrospect.

Jacob had a twin brother Jack who was mentally handicapped. Jacob did his best to protect him from experiencing abuse. He explained that if his parents wanted to “get Jack” they had to go through him first. He gave one example of protecting his brother after their family Beagle had been hit and killed by a car. Jacob’s mother wanted him and Jack to stay in the house while she went outside to speak with the neighbor and deal with the dead dog. She filled the bath with water and told them both to stay in the tub while she went outside. They could hear her yelling and discerned what had happened. When their mother finally returned, the boys were standing in a tub full of cold water. When she reached in to find the soap, she grabbed on to a piece of feces. Jacob knew it was not his, but instinctively backed his brother into the corner to protect him

which resulted in his mother stuffing the feces into his mouth. Although he struggled to communicate, Jack thanked his brother for having protected him.

When Jacob was in grade two, his grandmother interrupted their priest anally raping him in their church. Although his grandfather asked him if he was okay “down there,” he relayed that there was nothing they could do since he was their priest. When they told his parents what had happened, Jacob’s parents forbade him from ever seeing his grandparents again and he did not see them again for several years. This loss devastated Jacob who learned early in life that if he tried to disclose abuse, things were more likely to get worse for him instead of better since the only time he had ever felt safe before was with them.

Jacob relayed a second similar situation. He explained that his father, who worked in the engine room on a docked ship, had taken Jacob to work with him one day. His father had left him alone for a brief period of time when a man “came out of nowhere”, pulled his pants down and threw him up against the inspection port and anally raped him. He was very rough with Jacob and had just pulled up his pants and tucked in his shirt when Jacob’s father returned. His father must have suspected something had happened because he questioned Jacob, who lied and said nothing had happened. His father must not have believed him because he proceeded to beat the man very badly. Jacob’s uncle, who was his supervisor, later confronted his father about how badly he had hurt Jacob’s assailant. His uncle was worried about what to do if this man died since he had not moved all afternoon. The incident was never brought up again.

Another situation he relayed was in regard to when his mother had sent him and his brother outside to cut the lawn with scissors. After this incident Jacob came to understand that his mother was literally “crazy”. He realized that if he was going to survive until adulthood it would be because of his own efforts not anyone else’s. He recalled beginning to count the years from

age 8 until he would be old enough to move out. By the time he entered third grade Jacob was dissociating very badly. For not doing well in school, his parents beat him, which then decreased his ability to concentrate the next day.

Jacob learned early in life that he was alone and no one was going to help him. He believes his father turned a blind eye to the fact that his mother was selling him to neighborhood women and molesting him herself. He also believes that he became known around the community as a boy who could be used for sex. His family lived in a rural community and he often needed to hitchhike to school. Men would often pick him up and he experienced several attempted rapes while on his way to and from school. He became good at jumping out of moving vehicles to avert the assaults until electric locks were invented. In grade seven he experienced one particularly frightening event which he reported to his vice principal. Although he called Jacob's mother, nothing was done and the incident was never brought up again. Their failure to respond left Jacob with the impression that he should "keep his fucking mouth shut", and "never ever trust anyone again", that it was futile to seek help.

Jacob described other incidents where adults in a position of authority over him had witnessed situations that were either neglectful or indicative of abuse and no one rescued him from these situations, however, one person tried. In his ninth grade Jacob tore his knee during football practice. His doctors informed him that he required immediate surgery, but needed his father's permission to operate. When his father arrived several hours later, his doctor and coach were upset and asked him why he took so long. His father replied that he had been "shingling the shed and it was going well" so he did not want to stop. The coach explained that without his consent, Jacob had not been given any pain medication to which he responded that Jacob was able to tolerate the pain. He then denied him the recommended surgery despite being told that

Jacob may have problems later in life if he was not given the surgery. His stated that was not his problem and that he would be dead by then.

Jacob's sexual abuse ended when he was in eighth grade and finally had the physical strength to restrain his mother. Also, after years of being prostituted by his mother, his father finally asked him what he was doing at the neighbors all the time. Jacob lied and said he was going over to see their puppy, but his father did not believe him and forbade him to go there anymore, then moved his family from the neighborhood shortly thereafter.

In the end, Jacob's father, grandparents, principal, football coach, doctor and a teacher each had reasons to suspect that he was being neglected and/or physically and sexually abused, but did little to nothing to intervene. When Jacob grew up, he married an abusive woman and had children with her. He sought therapy after finding out their son had cancer and needed a bone marrow transplant. When he finally trusted the therapist enough he disclosed his abuse, however she died shortly thereafter. At the time of this interview, Jacob was working with a new therapist who was assisting him. He had been diagnosed with post-traumatic stress disorder (PTSD), divorced and was in a healthy non-abusive relationship.

### **A Brief Look at the Others**

The following is a brief description of the stories of the remaining 10 participants. Some information about their lives, demographics, up-bringing and abuse histories is included.

**Aaron's story.** Aaron (age 55) explained that prior to his abuse no one had ever talked to him about sex. When he was 14 years old he was selected by his summer camp director and coach, to assist with closing the camp down after everyone had left. He chose Aaron "the hardest working kid in camp" and appealed to his sense of manhood through allowing him to drive a truck, giving him alcohol and asking him what he knew about sex. He introduced Aaron

to pornography and the concept of masturbation, then left him several pornographic magazines and told him to do what he was supposed to do. No one had discussed sexual matters with him before and the discussion made Aaron extremely nervous, but he did what he had been instructed to do.

He later learned that his coach had been watching through peep holes in the bedroom and bathroom, so he knew precisely when to walk in and catch Aaron masturbating. The second time he walked in, he told Aaron he was going to show him what ‘guys do’ when they are alone, challenged him not to be a wimp and sexually assaulted him. Aaron asked his coach if he was “trying to make him gay”. His coach got violently mad and told him “not to use that word”. This abuse went on for the next several days until he drove Aaron the 60 miles home. Aaron was too ashamed, upset and confused to say anything to his parents. He felt like his body had betrayed him. He had experienced his first orgasm and had pleasurable sexual relations with a man. He did not know that sexual abuse could even happen to boys and questioned his willingness to participate.

Although he had previously had a very close relationship with his mother and wanted to tell his parents, he worried about getting into trouble. He had looked at pornographic pictures, driven a truck, drank alcohol and discussed sex, all things his parents did not allow him to do. He also thought the news would be too upsetting for them.

Aaron distanced himself from his mother because he did not want to disclose to her what had happened. However, he went to his school counsellor and insisted that he had to warn other students not to go to that camp. Although he didn’t disclose what had happened, he believes the counsellor understood what he meant. His response was to absolve Aaron of his sins and tell him never to discuss it again. Since his counsellor was also a priest this left Aaron with the

impression that it was his fault and that he had done something wrong. He left feeling insignificant and confused and didn't talk about it again for several years.

After high school, Aaron became a lawyer and assisted other male victims of childhood abuse. During that time Aaron's mother passed away. Shortly thereafter, he ran into his coach who offered him condolences. Feeling angered, since fear of disclosing his abuse to her had caused him to distance himself from his mother, Aaron made the decision to pursue charges. He played a crucial role in convicting his offender and later went on to become a police officer. To this date he struggles to define his own sexuality and identifies as bisexual.

**Allen's story.** Allen (age 57) described himself as a "bloke" and a "non-academic". He shared that prior to his abuse he had been wrongfully accused by the local police of committing a break-and-enter. The accusation traumatized him and caused him to grow up with a deep fear of police. When Allen was eight years old, his father began using physical intimidation and death threats to force him to have sexual relations first with his older brother and sister, then later with his younger sister. He explained that "when things got to a certain point" his father would join in.

Allen explained that abuse became a regular part of his life, so much so that it felt normal. He lived an otherwise normal life. He had friends, played sports and enjoyed many of the things normal teenage boys enjoy. It was only when his friends began to discuss losing their virginity with their girlfriends that he discovered the inappropriateness of what he was doing at home. After this revelation, Allen became consumed with shame, guilt, regret and anger. He did not disclose the abuse in part because by then, the acts with his older sister had stopped and he felt responsible for what he was still engaging in with his younger sister. He feared getting in trouble, breaking up the family, and worried that if his father got arrested he and his siblings would be separated and put into foster care.

During high school, one of Allen's sisters attempted suicide. After this, she disclosed to their mother what was happening with their father. At an extended family meeting, Allen heard his aunts and uncles discussing the abuse, but none did anything to assist. He and his siblings were sent home to remain living with their parents. Allen was shocked and saddened that nothing was done to protect them, but even more shocked and saddened when his mother chose to marry his father shortly thereafter. He believes she did this to protect herself from having to testify should the matter go to court.

Allen eventually married and had children of his own. He disclosed to his wife when he was 25 years old and discussed his abuse with a counsellor after struggling with feelings of guilt whenever he had to change his daughter's diapers. He wanted help to not feel angry or like he was doing something wrong when simply parenting his daughter. He now facilitates support groups for sexually abused men in a prison and is well-respected in the male survivor community.

**Anthony's story.** Anthony (age 62) explained that he had been sexually abused by his father, likely from before he was age two since he does not recall ever not being abused. His father engaged in anal intercourse and an act called "fisting", which involves the abuser inserting his closed fist into the victim's anus. Anthony was unaware this was abuse, he thought it was "just bathing", something that all parents do with their children. His mother had a psychotic illness and was physically abusive. She also suffered from clinical depression and spent most of her time in her bedroom with the door closed and was emotionally neglectful and physically abusive towards Anthony. He stated that although his father could still pass a test of sanity, his mother never could.

Anthony described himself as a very isolated and lonely child, who was very badly

physically and emotionally abused. He spent most of his youth in “a high level of distress”, and had little ability to relate to his same age peers. By age 10 Anthony began acting out behaviorally. He started to kill his pets, which made him feel bad about himself. By age 11 Anthony had developed a deep self-hatred, but did not understand his self-loathing. He believed he was ‘weird’, attempted suicide, and was sent to a treatment facility where he was abused by a fellow patient. Anthony believes this abuse occurred not because the young man who was five years older than him intended to abuse him, but because he did not know he was allowed to say no to people’s sexual advances. Once Anthony learned from a camp counsellor that he could say no, he did and the abuse stopped.

Growing up, Anthony found attending therapy to be helpful. At age 37, he was in session with a therapist when he mentioned not having bathed alone until after age 11 and after his suicide attempt. She identified that he had been abused and suddenly blurted out “oh my, you were sexually abused by your father”. Prior to this, he was unaware that he was sexually abused.

In adulthood, Anthony’s older sister disclosed to him that she had been sexually abused by their father and questioned whether he had. She was “completely crushed” by his admission. Wrought with guilt, she apologized profusely for not having protected him and admitted to suspecting that when her father stopped abusing her at age five, he had likely started abusing Anthony. Though he did not hold her responsible for his abuse, and despite his pleading with her, she could not bear the idea of having been the “cause” of his abuse. She committed suicide a few months later. Anthony was deeply grieved by her death and made the decision never to discuss his abuse, believing that doing so may kill him too.

Anthony was diagnosed with dissociative identity disorder and post-traumatic stress disorder. Although this information was unsettling it helped him make sense of why he often

found himself in places he did not recognize. It also helped him to understand some of the coping mechanisms he had developed. Although Anthony is happily married he had no children since he did not believe he was healthy enough psychologically to raise children of his own.

**Garrett's story.** Garrett (age 34) believes he was two years old when his mother, a school teacher, began sexually abusing him. His father, who also a professional, would use threats of violence to ensure that he complied with his mother's every request. He was made to be his mother's spouse, and out of fear, he complied, even became hypervigilant to meet her every need. Garrett knew enough to know that "something was very, very wrong" with this relationship, but he did not know "how to describe it" or "what to call it", and part of him did not want to think about it.

Although he excelled in school both athletically and academically, he had significant difficulties relating to his same age peers and establishing friendships because his parents interfered each time he tried to develop a friendship. They "decimated" his social development by encircling him, deterring him from being autonomous, and keeping him dependent on them both physically and emotionally. The sense of hopelessness that resulted was the main reason Garrett remained silent and confused. Since he was already socially isolated, Garrett made the decision to study hard so that he could someday create a new life for himself through going to college.

However, since his parents kept him so sheltered he lacked confidence and socialized almost exclusively with his immediately family. Although he lived in hope that a coach or teacher would notice something was wrong, no one did. He feared reporting his parents since knew he needed their physical and financial support to attend university. He also worried that things might not be better if he were put into the care of the state. He also felt unprepared to get

a job or pay his own bills. He also felt helpless. His parents had conditioned him not to seek help through instilling in him the belief that any form of outside help was not only dangerous but futile. They taught him that the only people who cared about him were his immediate family and everyone else would just use him.

In university, Garrett's PTSD symptoms flourished and his ability to function diminished. Confused by what was happening, he looked up his symptoms on the Internet and recognized them as trauma-related. From there he researched sexual abuse and found a psychotherapist who specialized in male survivor of abuse. He was diagnosed with chronic, severe PTSD and believes he also has DID. He eventually got in touch with the inner strength he knew had always existed and reported his mother to the school board. He now works as a teacher and coach's high school athletics. He attempts to provide students with the things he never had including the support that might have helped him disclose earlier in life. Although he remains single, he is hopeful of establishing a healthy romantic relationship.

**Gordon's story.** Gordon (age 38) grew up in a small, rural, southern, religious community, surrounded by a large extended family. His mother was a single mom who worked several jobs. He explained that they had an "enmeshed relationship" and lived close, if not below, the poverty line until his mother remarried. Gordon was abused by three different people. Although he has few memories of his life between ages five and twelve, he knows he was five years old when his older step brother began coercing him to perform oral sex on him. Shortly thereafter, he began being "seduced" in a similar manner by a cousin and by a neighbor boy. Gordon thought it was his role to satisfy the sexual needs of all three of these individuals since he knew of several other children in his community who were being abused. Although none discussed their abuse, he stated that "survivors just know other survivors". He explained that many of them accepted the

abuse as a way of life.

Collectively, Gordon was abused multiple times and over an eight year period. His abuse ended when he was 12 years old. He never spoke about it to anyone for years because he thought that if sex itself was a taboo topic, it must be worse to talk about abuse. Also, since there was a strong deterrent regarding breaking up the family, he feared raising the family's issues publically might have huge implications not only for his family but for the entire community. He also believed that no one would help even if they did know. He remained silent in part because he was confused about his own sexuality and because no one in the south was openly gay. Being homosexual was against societal norms and homosexuality was also a taboo subject. Gordon maintained the illusion of being a "model kid".

As he progressed through his teenage years, he got a job, started drinking heavily and began living a promiscuous lifestyle. He tried to "drink away, have sex and work away" his memories. He kept himself too busy to allow for time to reflect on what had happened. Gordon disclosed his abuse as an adult in therapy after his first marriage ended badly. He is now happily married for a third time, but has recently been diagnosed with DID. He says the diagnosis is helpful since it allows him to make sense of certain things in his life. Despite his mental illness, he works in a rape crisis center and as an educator in the area of violence prevention. Gordon reports that discussing sexual matters is still taboo in the community he lives in.

**Josh's story.** Josh (age 48) was raised in a tight-knit middle class family who held traditional views in regard to subjects like homosexuality and family loyalty. His first experience with sexual abuse occurred when he was seven years old. He explained that he had been taught to obey his elders and had been left in the care of his two older female cousins to whom he had made a comment regarding the fact that he did not know what girls looked like. He was shamed

for his lack of knowledge and coerced into performing sexual acts on the two girls. The incident humiliated him and he did not discuss it with anyone.

When he was 10 years old, he was similarly abused by a male cousin who was eight years his senior. His cousin had offered to teach him how to play strip poker, instructed him to fellate him and attempted to sodomize him. Josh knew what they had been doing was likely wrong, but he didn't speak about it to anyone in part because he did not want to upset his family. He felt it was his "job" to repress the abuse, so he learned to put on "an act" and pretend that everything was wonderful. He carried on this act until it became his truth and he completely forgot the assault ever took place.

By the time Josh was finishing high school, he knew he was attracted to other males. However, he kept his sexuality secret from his family since they were openly opposed to homosexuality. Messages made known to him in the past indicated that he must not breach loyalties nor deviate from their family's boundaries, since others who had was ex-communicated forever.

Josh was sexually assaulted again in his 30's. He was in Africa in the Peace Corps when his commanding officer invited him to meet another male superior who had recently come to visit. The three spent the evening partying. They smoked marijuana and then each went to their separate beds. Josh, who was heavily intoxicated, had been asleep for a while when the visiting superior crawled into his bed with him. Josh believes the assault was orchestrated in advance since he had been open about his sexuality and this superior was also homosexual. He was travelling in a country where homosexuality was considered a crime, and he his offender assumed Josh would be a willing partner once he initiated the assault, but he wasn't.

As an adult, Josh initially had no recollection of the abuse he experienced during his youth.

He struggled to understand why after six years of therapy he had made such little progress. Although his therapist had inquired about childhood sexual abuse, Josh initially failed to recall it. With his memories fully intact he is now experiencing success with his mental health, however he still feels “like a total creep” when discussing his abuse. Josh was diagnosed with PTSD. He is openly “queer”/bisexual and works as the head of the education department in a respected university.

**Julien’s story.** Julien (46) is a French Canadian. He described himself as a “naïve”, “trusting person” and “a people pleaser”. He grew up in a loving home with strong Catholic values and strong ties to their church. Julien was the third child in a family of six children, who sometimes lacked for personal attention. His priest, who visited the family on a weekly basis, made accommodation for this by taking Julien on weekend ski trips, to his cabin, for dinner outings and swimming. The relationship went on without incident for several months. However, when Julien was 16 years old his priest invited him to his room, began to wrestle and play fight with him and then fondled him. After ejaculating, the priest pretended to cry and began discussing how he was no longer able to preach anymore because of the sin he had just committed. Julien felt manipulated by his obvious request for forgiveness. After he took Julien home, he immediately called to tell him he had received absolution for what he had done. The incident left Julien feeling “rejected”, like “cold pizza that was not acceptable”.

Julien’s mother worked with this priest and had regular contact with him, but Julien did his best to avoid him. One day his older sister noticed this and asked him why he had changed his demeanor toward the priest. He didn’t recall whether he made up a story to protect his family from the information he thought would be too hard for them to hear, or if he told his secret, but he did recall making her promise not to tell their parents. She agreed and kept his secret. A few

weeks after this incident, Julien saw the priest with a much younger boy in his car. This observation solidified to Julien the exact nature of his intentions, and that he had been “dumped” for his new object of affection.

Julien’s abuse experience “took away my voice”, stole his innocence, shattered his trust, and “opened the door” for other abusers to take advantage of him. When attending college the following year, Julien sought therapy but was abused for a second time when his therapist had him re-enact what had happened with the priest. Believing that this was meant to be helpful, Julien complied and returned to this counsellor, who would likely have continued to abuse him in this fashion, but was reported to have left this position. His replacement explained the unethical nature of his previous counsellor’s approach.

The following year Julien began to be sexually abused by an uncle who crawled in bed with him one night. After getting what he wanted the first time, this uncle continued to abuse Julien for the next several years. Julien finally put an end to this abuse when he was in his early 30’s and engaged to be married. He struggles with self-blame for letting the abuse occur and continue for so long. Although he was married for 25 years, he has recently recognized and accepted that he is gay and has ended his marriage.

**Leonard’s story.** Leonard (39) described himself as a shy and gentle child. He was four when his mother, a school administrator, began sexually abusing him and invited her long-term boyfriend to join in. The abuse occurred when Leonard’s father, an alcoholic, worked out of town. Although he returned on some weekends the abuse went undetected.

Although he initially did not understand that anything was wrong at home, he also avoided being home because he didn’t like his mother. He spent time alone in the woods or went next door to his grandparents place. He also went to church, sang in the choir and made plans to

become a minister, but never disclosed his abuse to his grandparents because he did not believe they would understand. He did not tell his father, because he was emotionally unavailable and he didn't want to jeopardize what little relationship he had with him.

At age 11 Leonard developed the strength to challenge his mother and the abuse ended. By the time Leonard was 12 he became fearless and angry. He had tried to get his mother in trouble by telling his teacher about her affair. He hoped this might start gossip that would cause her to lose or leave her job and force him to live with his father. This teacher called his mother who "beat the living crap" out of Leonard which deterred him from seeking help again. Prior to testing the waters, Leonard had not wanted to disclose to anyone in part because he did not want people to treat him differently. Also, because he had read that most offenders had been abused themselves and he did not want people to think he might grow up to be an offender. Leonard was also mad at God. He did not understand how God would let someone so devoted be abused and left the church.

Although Leonard asked his older brother, who was also being abused, to go to the police with him he refused. Leonard felt too afraid to go alone and never went. As a teenager, Leonard developed an interest in dark poetry, heavy metal music, drugs and alcohol. He recognized these same interests in a female friend. Believing she too had been abused, he disclosed to her. She in turn, disclosed her abuse to him.

When Leonard was 21, his father stopped drinking and took an interest in having a closer relationship with his son. Leonard did not tell him about the abuse at this point because he feared his father would get too upset and start drinking again and he knew his father's drinking had seriously negatively impacted his health.

When Leonard was 32 and became a father himself, he realized that his mother may gain

access to his children if something happened to him and his wife together, so he made the decision to report his abuse to the authorities. He told his father about the abuse and about his intentions to go to the police, and then confronted his mother. He stated that if she cooperated in providing the truth and implicated her co-abuser so he could be arrested, that he would not press charges against her personally. She refused and tried to convince Leonard that she had received absolution from God and that he should forgive her too. When Leonard told her he intended to have her be registered as a sex offender, she went in to the kitchen, grabbed a knife, and ran out of the house and killed herself in the forest.

Leonard was forced to tell his grandmother all that had happened. She could not comprehend that a mother could do that to her own child. Leonard is now a middle class professional man who lives in rural Alberta. He has two children and is happily married, though he is on his second marriage and he does struggle with symptoms of PTSD. He is under the care of a professional therapist and is now back in touch with his faith.

**Michael's story.** Michael (50) was adopted at birth and raised in a Christian home to loving, but emotionally unavailable parents. He had been raised not to talk about his feelings, and not to embarrass his parents. Michael's father was a pastor who kept busy with his congregation. His mother was a nurse who tended considerably to the needs of his older sister who was also adopted, but very "problematic". Their lack of attention toward Michael left him feeling unloved and like something was wrong with him.

When Michael was 13 he was abused by an elder who attended his father's church. He never told his parents because although he was close to them, he did not feel safe enough or trust them enough to tell them and he felt unworthy and did not want to cause problems. His abuser was a friend of the family and an elder in their church. In lieu of complicating matters for

everyone, Michael chose not to think about his abuse.

After being abused, Michael's personality changed drastically. He went from being a mild mannered soft spoken Christian teenager, to an easily irritated, angry and rebellious young man, with a sudden interest in drinking, smoking marijuana and having sex. He attributed his sudden change in character to having become a teenager. Although his mother questioned why he was so angry, her tone of voice seemed to imply that whatever he was upset about was likely his fault anyway. She didn't give him permission to experience or process his emotions, instead she reminded him not to "rock the boat" or not to "go into that territory". Having been taught not to discuss his feelings, Michael only had a sense that something was bothering him, but had no idea what it was.

Four years after Michael's marriage failed (when he was in his late 40's) he was invited to go camping with a friend who disclosed to him that he had been sexually abused as a child and discussed how it had affected him very badly for over 35 years. Michael was deeply impacted by his friend's disclosure. He began to examine and recognize the impact that his own abuse had on his life. He came to understand the confusion he felt over having had his first sexual experience and first orgasm with a man, and how he had masked his confusion and pain through the drugs and alcohol. He also saw clearly how he had tried to assert his heterosexuality and satiate his strong desire for sexual pleasure through acting out with women. He came to realize that the abuse had affected him deeply. It changed his personality and his life trajectory. It transformed him from being a mild mannered Christian into a rebellious angry teenager and likely cost him his first marriage. Although he remains single, he has returned to his Christian roots and is now a successful commercial real-estate developer in the USA.

**Phillip's story.** Phillip (82) described the sexual abuse he suffered as only a minor part of

his abuse story. He compared his life to that of an orphan since his father, a Methodist minister, was very angry and controlling and his mother used Phillip to be her full time caregiver who reciprocated little affection to him. Phillip felt unloved, un-nurtured and had little to no emotional attachment to either of his parents. By age five he began going for long walks on his own. After the police had to find him once, his mother started tying him to the back of the house so he would not walk away. Phillip was humiliated by this. He recalls hiding so that his playmates would not see him “tied up like a dog” in the back yard.

Phillip explained that his father had his life planned out for him from the day he was born. He decided what Phillip wore, what sports he played, who he was allowed to date and dictated what he was going to be when he grew up. Although he did not beat Phillip, he threatened him with physical violence if he refused to comply with his orders. Phillip had seen him “go off” on people in public and feared his father.

Phillip’s father began anally raping him when he was 14 years old. He also sent Phillip to spend the weekend with his friend, whom Phillip believes was his father’s lover; this man also abused Phillip sexually so he ran away after one night. After being raped by his father about five times, Phillip mustered up the emotional courage to challenge him physically and the abuse ended. He did not speak to anyone about his abuse for years. He suffered nightmares and had suicidal thoughts, but felt he could not talk about his abuse. He explained that it happened in the 1940’s, when no one talked about abuse and he was therefore initially too ashamed to say anything. However, the main reason he never disclosed was because he repressed the memories of it for over 45 years. He was 62 when his therapist asked him if he had ever been abused by his father and all of his previously buried memories came flooding back. This was well after his father had passed away.

Phillip played college football, spent 3 years in the army and later became an internationally renowned Ph.D. scientist. Phillip is a gentle but giant man. He remains an atheist largely because of the abuse he experienced at the hands of his father, whom he described as a decorated pillar of the faith community.

## Chapter V: Results

Interviews were conducted with 13 men who were recruited through posters seeking participants to discuss their reasons for not disclosing their abuse sooner. Questions this research attempts to answer are: 1) How do boys, and later men, who experienced childhood sexual abuse, perceive that others may have reacted and responded if they had disclosed their abuse? 2) How do these perceptions or beliefs make them react and respond? 3) What are the decision-making processes engaged in when considering whether or not to disclose abuse to either a care provider, a person in a position of authority, or a supportive friend? 4) What were the environmental, cognitive and emotional contexts associated with this decision-making process?

Based upon the participant stories, rich data for analysis was then categorized and organized to reflect not only each individual participant's experience, but the experiences common to all of the participants. Data was organized into five themes and subthemes and was reported using quotations from the transcribed statements. The data extracts presented were condensed in order to more clearly and unambiguously demonstrate the themes they reflect. Ellipses (...) are integrated to reflect where additional material, including therapist questions or comments were removed. Omitted statements can be made available upon request.

### **Theme One: Fear "I Was So Afraid"**

The most predominant reason for non-disclosure provided by participants was the experience of being traumatized and/or experiencing feelings of intense fear. A fear response was conveyed by all of the participants. It was reported directly by those who were aware of their physiological and emotional symptoms and indirectly by those who experienced memory loss and/or dissociation as a result of their traumas. The subthemes identified under fear were (a) loss of memory; (b) fear of being blamed; (c) abuse was too difficult to discuss; (d) attempted

disclosure had ended badly; (e) fear of worse consequences; (f) fear of not being believed; and (g) fear of their perpetrator. These subthemes are discussed below.

**Loss of memory.** Loss of memory was the most predominant subtheme identified. Over half of the participants reported that they had only partial memory or no memory of their abuse at least for a period of time. Introspectively, two admitted they had purposefully tried to forget their abuse, either through drinking alcohol or intentionally trying to push their memories out of consciousness. Both report that they were successful. Just under half identified their memory loss as an automatic subconscious process. Their brains simply protected them from information that was unbearable or too hard for them to handle at that time. Some blocked their memories through the process of dissociation. Three participants shared their insight regarding the dissociation, memory loss and remembering process:

It was part of a numbing process...I can remember being scrunched up in a ball, hugging my knees and saying to myself, 'I'm not going to feel anything. They're not going to get to me. I'm not going to feel a thing. I won't feel anything, it doesn't matter what they say or do; it's not going to hurt'.

One of the factors in my non-disclosure is just the profound level of dissociation that I experienced ...Periodically new memories are released...And so, you know, my awareness of the full extent of what happened to me all those years is clearer and clearer...you can imagine that the level of distress that I was feeling makes the chronology of events a little difficult to capture.

I don't have much recollection between six and twelve. I'll look at family pictures and things and have no recollection. I had a pony when I was little. I mean what eight-year-old kid wouldn't remember their pony? There's a picture of me sitting on a pony with a pony cart and everything...I don't remember Christmas, I don't remember birthdays...we recently have discovered that there was probably a whole lot more that I have blocked that has come to light that we're not aware of.

Anthony, Gordon and Garrett each self-identified as having developed dissociative identity disorder (DID) which they believe is a symptom of the extensive trauma they experienced.

Gordon explained: "I have different alters that took the abuse". He described one of his alters as engaging in pornography and very sexually promiscuous:

He would be what you would consider the ‘true southern gentleman’. Pun intended, he could charm the pants off you and that is his intent...I remember some stuff yeah but, I am pretty sure...I haven’t recovered all of the details yet.

He described the process of discovering his alters as “getting to know new people and making new friendships”. He is always “co-present” when they appear, “if you can imagine a stage and a microphone...most of the time I’ll be over here”. He discovered his DID through the help of his therapist and a psychiatrist after having become aware that he was experiencing significant lapses in his memory, noticing things disappearing from his house and having unexplainable issues happen at work, like requesting days off and not recalling having done so. He found his diagnosis helpful in explaining the behaviour patterns he could not otherwise explain or recall.

Anthony also found his diagnosis helpful to provide him with context to understand himself and his experiences that did not make sense:

I would get lost all the time. I would physically be in a space that I’d been in many, many times before, and I simply wouldn’t recognize the surround or the names of the streets and would not know which way to turn because I was totally disoriented.

One frustration for Anthony regarding his dissociation and memory loss arose because he was “a trained therapist who worked at least the first ten years of his career with sexually abused children, having no knowledge that I was abused...”

Among the participants who did not report developing DID, six others also conveyed significant memory loss issues which blocked them from remembering much detail about their life during the time period that they were abused. They believe the memories of their abuse were revealed to them when they were no longer in the abusive situations; when it was safe for them to process their abuse and they were better able to deal with the full emotional impact of what had happened to them.

You know something...the subconscious says ‘well, you’re not ready to deal with this, I’m going to hold it down here for a while. I’m going to... keep it hidden from you until the time comes when you can deal with it...The therapist said to me ‘you couldn’t have done

this work while your father was alive because he had so much control over you'. Maybe that has some impact on my repressing it...his control...The decision to forget was not mine. I buried it completely. It never rose to the conscious level for 45 years...I just repressed it. I guess it was something that was just intolerable. That my conscious mind didn't want to deal with, I don't know. I always say that your subconscious only allows things to come up that you can deal with and a little at a time...There was a lot of talk about my father who was a very angry, very controlling person and one day he just asked me 'were you ever sexually abused by your father'? It just came back full blown, in Technicolor...It was all there, all intact...I could see the room, I could see him, I could see the sunshine and I could see myself lying on the bed and wondering where in the hell is my mother?

Other participants also relayed how their memories returned to them while they were working with a therapist. During his first interview Leonard relayed: "I don't have a lot of recollection from the ages of five to twelve". However, during his follow-up interview he advised that some of his memories have been returning to him likely because of the work he had been doing with his trauma therapist.

Unlike those whose memory loss was completely involuntary, Josh made a conscious decision to forget what had happened and ultimately was successful until many years later. He described the process of how he succeeded in suppressing all memory:

It was like... I have to put this out of my mind. I have to put this out of my mind. I have to pretend it never happened. I want to be able to forget about this as soon as possible...I was physically pushing something away. It was as if I were... I don't want to see this glass anymore. I don't want to look at it, I can't look at this glass anymore, I can't, I can't, I can't, I can't wait 'til I can't see the glass anymore. Okay, I can't see the glass.

He explained that as an adult he had tried to commit suicide. At the time he felt like his "life was a waste", but had no idea why he felt so confused and alone. "I had no idea what was going on in my life, it felt like everything was completely wasteful and wasted, and it was just overwhelming. I felt like there was an undercurrent in my life...I didn't know what was pulling me under". His memories came back to him after he watched a few documentaries involving male survivors of sexual abuse. Following the recovery of his memory Josh made the decision to disclose to his friends:

Most of them looked at me and said ‘You know, you told me’, and I said, ‘I don’t remember having told you. I honestly don’t’...It took me until 2011 to disclose to my family and before that it took me to 2011 to actually remember. To permanently remember that I had been abused...I didn’t remember. It was a convenient blank slate...What would happen is every now and then it would force its way into my consciousness. I might tell somebody, and then it would disappear, I swear to you it would disappear, I would repress the memory.

Josh recalled that he did not understand why he had been making very little progress with his therapist who had previously asked him if he had ever been sexually abused. He had replied no, because at the time he believed that he hadn’t:

I absolutely did not recall....Then something shook loose...I was sitting in my apartment, and I was like, wow, I remember this. This really happened....Why have I not been thinking about this all these years? Why have I not put all of this together?... I was knocking my head, figuratively, against the wall, going I just don’t know why I’m failing at therapy ...why I’m not a good client...I had wicked bad panic attacks. Wicked, wicked bad, in fact while I was repressing everything, I had the mother of all panic attacks almost all the time, I would wake up between 2:00 and 4:00 in the morning. Regularly...in a just freaked out dead panic, couldn’t understand why the hell I was afraid. Like, I was scared shitless. I would ... walk around my house, my apartment, walk around, and do anything I could to soothe myself down.

Although not consciously aware of the fact that he was doing it, Leon used alcohol to protect or numb himself from experiencing his emotional pain and from thinking about his abuse. He used considerable energy to do this and he too was subsequently successful at compartmentalizing and completely blocking his memory:

Alcohol to me... it was a two-sided coin. It took me into removing me from the world in many ways and numbing me to my feelings. It also protected me from dealing with the pain until I was ready...To me there was this self-forgetting, if you will. That just perpetuated itself and I kept it all buried...I buried the abuse for thirty-five years....It was almost like a protective mechanism...Obviously, there were times when I know I reflected about it, but I never, it just never was front and center that I wanted to pay attention to it....on top of consciously not thinking about it there was a deep unconscious thing going on...it just got buried and life just kept on going... I think that’s where it gets complicated clinically...it’s very convoluted because there was obviously some sort of physiological, psychological defense mechanism going on clinically that just kept it down, and the alcohol kept it down. The alcohol removed me from the pain of even dealing with it and what impact that may have had on my life...It was almost as if God contributed to my keeping it buried all those years. You know, saying, ‘we’re going to wait, you’re too good of a person, we need you around, we need to wait for you to deal with this’. I never

actually forgot everything; there were always a couple of incidents that were pretty clear in my mind. I would have nightmares about something and they'd kind of form into memories really.

Unlike those who had failed to access the memories of their abuse until later in life, the majority never forgot their abuse. Burdened by their memories of what happened they worried about getting in trouble or being blamed either for not stopping their abuse or for 'allowing' it to happen. This subtheme is examined next.

**Fear of being blamed.** Fear of being held responsible and getting in trouble for their 'participation' or involvement in the abuse was a deterrent for eight participants. Jacob who was forced to engage in sexual relations with his mother relayed his experience of being fearful his father may discover the truth and blame him:

I was little...when the sex thing started... before first grade, maybe before kindergarten ... She did the grooming, you know. 'Oh Jacob, you're special, no one's like you', blah blah. You know...text book stuff you read; I thought it was totally my fault. I remember saying what am I going to do if dad finds out? I had fucked my mother...how could I do that?

Ricky had similar fears. He explained that although he had been traumatized the first several times his cousin abused him, he had also experienced the sensation of ejaculation for the first time. After several times he simply "fell into it" and "let" the abuse happen. Consequently he worried he would get in trouble for not having stopped it sooner. He explained that his father was extremely homophobic and would likely not understand:

I know that if I was to come to him and go 'look Dad, you know, this happened when I was a child and it really fucked me up. Really affected me mentally', his answer would be like, 'just get over it'. I know he would. He also wouldn't believe it...He didn't believe it was possible.

Allen, who had been forced by his father to engage in sexual acts with both his older and younger sisters and brother, felt responsible for abusing his younger sister simply because he was older than her. He'd previously had a bad experience with the police. He had been accused of a break-in that he did not commit and he feared what might happen to him if he was found out:

My mother asked me whether anything was going on, and I believe she knew, but I said nothing... I didn't see myself as the child, I saw myself as doing something wrong....I thought I'm going to be in trouble. By the time I realized my older sister had stopped with me, the relationship with my younger sister was still going. I thought I was in trouble with the police, my school, everyone. I thought I was the bad person. The overwhelming feeling of being in trouble, that's definitely the biggest one...Honestly, I think a lot of it was also the fear that my mom would be angry with me because I was the older one. That's what got me, the age thing.

Aaron's fear was about getting in trouble for participating in sexual acts and for talking about sexual matters:

I was a perfect victim because my parent's didn't talk to me about sex. We didn't talk about that at home. I wanted to tell my father, but I knew that if I told him...he'd tell my mother and I'd get in trouble. She'd be upset...I wanted to tell my father 'beat him to death with a baseball bat', but I said I know I can't because my parents think he is the greatest guy in the world for doing this for me...and I'm going to get in trouble and it's going to be horrible... I just knew that this would be major trouble if I told my mother....We did not talk about sex and I would have to say those words and that I would get in trouble. I was afraid of my mother finding out... I would have disappointed her.

Aside from worrying about being blamed or getting in trouble, many reported that the thought of discussing their abuse would have been too difficult since it would have re-traumatized them. This subtheme is discussed next.

**Abuse was too difficult to discuss.** A majority of the participants interviewed discussed not wanting to re-experience their trauma by discussing it. Michael, who was abused by a male in his father's church, stated, "I didn't want to have to revisit the whole situation...I choose to continue to run because it seemed like the path of least resistance and the one that would be least painful."

Anthony had similar thoughts about discussing his abuse. He had a sister who was five years old when their father stopped abusing her and started abusing him. She committed suicide shortly after apologizing to him for not having protected him from their father. He discussed the impact her apology and subsequent suicide had on his desire to discuss his own abuse:

The pain that she was showing to me as she was apologizing to me it was just like wow...

It was horrible. I mean I didn't want her to feel that way. First of all, I didn't need an apology. But, I didn't know how to help her with that. Other than saying I'm not upset with you, you don't need to apologize; it's not your fault. I didn't know what else to say. But those things did not help her...Her suicide made me more frightened of ever saying anything...It seemed to me that talking about being sexually abused was dangerous. Having already attempted suicide at such a young age, I felt like this is something you shouldn't really talk about, ever, because this will kill you. Talk about it and it will kill you.

Garrett, who was abused by his mother, said he also did not want to discuss his abuse:

"Part of me was just in denial and didn't really want to look at it; I would just rather try to repress everything for years". Ricky had similar sentiments about discussing his abuse with his parents when it first occurred: "I just didn't want to deal with it myself. I put it out of my head. It just never happened. It never happened." Julien had a similar experience: "What the priest did was take my voice away...Nobody knew that I was sexually abused. I couldn't talk about it."

Jacob relayed his avoidance and lack of desire to discuss his abuse:

I refused to talk about my mom; I wouldn't go there...I mean the school bus would go by the Catholic Church and I'd have panic attacks and I couldn't really remember why. The church had Saint Paul in the chains. ...No...I didn't want to go back and live that again.

Although some feared discussing their abuse, others actually made attempts to seek help through testing to see if they could trust someone enough to tell them based on what kind of a response they got after disclosing lesser information. This is the subtheme discussed next.

**Attempted disclosure had ended badly.** Five participants reached out to someone whom they thought might be able to help them, but were met with detrimental results. They made attempts to disclose lesser issues as a means of checking to see if they could later trust them with additional information and were met with negative responses. This deterred them from seeking help again. Leonard recalled his experience of telling his teacher about his mother's affair:

I decided it was time to sort of lash out at my mother, so I went to my Grade 6 teacher whom I adored, to tell her about my mother's affair. Just to get her in some trouble. My mother worked for the Board of Education and it definitely would have started some gossip that would make her extremely uncomfortable if not lose her job...Not that she would get fired over it, but that she would have to leave her job because she was so embarrassed

about it. It ended with my teacher calling my mother to tell her and only her. I got the living crap beat out of me. So that put off my plans for ever trying to get someone to help.

Jacob, who was being abused by his mother, was often sought out by males in his community who were also looking to abuse him. One morning he had a particularly frightening experience on his way to school. He relayed the information to his junior high school vice principal in hopes that he would respond favorably and assist him:

Around 1:00 the vice principal came and called me out of class and brought me in to the office. I could see through the door where my mother was in his office. She was talking to somebody else. He asked me again to describe what happened and I did. He said okay I'll walk you back to class and I was looking at my mother...I almost didn't recognize her. She has a wig on, bright red makeup. She looked like a whore. So even in the beginning of seventh grade I knew what a whore was. I asked 'when do I talk to my mother?' He said 'she doesn't want to talk to you, I'll walk you back to class'. It was never brought up again.

He relayed several other examples where professionals who had seen glimpses of what was going on in his world had failed to intervene despite being presented with strong indications that he was being abused.

Aaron made a cryptic disclosure but was met with detrimental results. The week after his abuse experience, he went to his school guidance counsellor and warned him not to send other youth to the camp he had sent him to:

When I got back to school I went to my guidance counsellor who was a priest and I was trying to talk to him about it. I just, I wasn't saying it, but I just said 'you know you have to warn the kids that go to that camp you know about the director'. And he's like 'why, what are you talking about?' And I was just like, 'you just got to warn them about him'. And he's like 'I absolve you of your sins, say ten Our Fathers and Ten Hail Mary's and never say a word of this again.' He was a priest who was also molesting kids in my class. He knew exactly what I meant and he wanted me to shut up about it. He's the one that sent me to the camp in the first place. One of the biggest obstacles for me to tell is, one, when I did try to kind of reach out I was basically made to feel like it was my fault, that I committed a sin and was told to shut up.

Julien also sought help soon after his abuse occurred. He too was met with another sexually abusive experience:

I remember going to classes... I had a hard time focusing. So I made an appointment with

a counsellor. It was an older man and he was apparently good, but when I told him about the abuse his way to heal, his technique was to re-enact. So here I am talking about my uncle and he's half naked, he only has an undershirt on. He's naked, we're sitting on the ground... redoing what the abuser did. Then he gave a hug and he had an erection himself. Like, this is an older man. When I came for my next appointment the following week, he wasn't there anymore...So it kind of reinforced...you know, if I open my mouth, danger. So...I carry the secrets.

Several years later he worked with another therapist who doubted and invalidated his experience, "one therapist knew nothing about sexual abuse. I spent two years of my time educating him; then he ended up telling me I was 'not authentic.'"

When Josh disclosed his abuse, his therapist minimized and dismissed it:

I was actually seeing a psychologist, a clinical psychologist...when I brought up the instances of abuse. He dismissed them as 'the way children played together'... I said 'Len, I think I was abused'. I told him, I think I told him what happened with my cousin. His response was 'uh, all cousins do sex play'. Done! Boom! That was it.

Others did not attempt disclosures in part because they were convinced that any sort of intervention would be futile and lead to worse consequences. This is the next subtheme discussed.

**Fear of worse consequences.** Over half of the participants worried that if they were to try and seek help the punishment they would receive for having tried to escape their abuser would be worse than the abuse. They worried that they would be more traumatized in the end. This fear was particularly prevalent in victims whose parent(s) were their offender/s.

Jacob's fear that worse may happen if he disclosed his abuse had been validated in his youth after his grandparents discovered him being abused by a priest. After walking in on him being anally raped they did little to intervene. When they told his parents what they observed he was forbade from ever seeing his grandparents again. Later in life when he was in hospital after injuring his knee, his father informed him that there would be a female doctor coming in to talk to him. He warned Jacob 'not to say a word to her'. Jacob complied despite the fact that she

asked him several times if everything was alright at home. Jacob truly believed that she was not capable of helping him and that he would be severely punished if he spoke out. He lost faith that anyone could rescue him and feared that any attempted intervention would be futile and temporary. He believed that if he told her the truth things would get worse for him. Once the intervention was over he would be left back in the hands of his abusive parents who would then take revenge on him. This belief was so great that he actually went to significant lengths to hide his abuse:

I think what's really important is that I make it clear to you that I did everything I could to hide what was going on. I didn't want anyone to know... You know, kept covered with long sleeves and eyeglasses, even when I didn't need them. To cover up bruises on my eyes and stuff; you get really good at being sneaky.

Leonard worried he might be separated from his siblings and placed in a foster home where he might be abused worse by someone else. Garrett's fears were similar, however, he not only worried about his physical safety, he also feared what his future might look like if he made a disclosure. "I don't know if I thought of this intentionally, but if I ended up in the State's care, I mean things might not have been better off." He not only worried about who was going to pay for his college, but that his abuse might continue with somebody else. He wanted a better life for himself, but he lived in an affluent community and he knew that he needed his parents support financially in order to attend college. He made the decision to remain silent in part in order to obtain that. "My expectation was that my life might be in jeopardy by making a disclosure... Part of me thought that my whole world would collapse if I did tell that something was really wrong in my family."

Josh, who was abused again as an adult, explained that he had been travelling alone in Africa where engaging in homosexual acts is considered a crime. He was employed by a government outreach program and was accessing their accommodations when a male superior

sexually assaulted him. Josh had done his best to terminate the sexual assault when it occurred, but did not say a word about it to anyone the next morning:

I'm just going village to village and this rape happened. How can you claim you were raped in a country where it's illegal to have homosexual relations with a man? It would never happen, right? I can't tell anyone because if I tell anyone, I'll never be welcome back in this particular office again. That's exactly what I thought...I consciously thought at the time I won't be invited back...and I was right! All of a sudden there was no room at the sub office.

Aaron grew up to become a lawyer and played an instrumental role in both catching and convicting his offender. However, he feared the consequences of disclosing his own abuse. He feared what identifying himself as a victim may do to his professional image:

I didn't want anybody to know especially not professionally...I was so afraid. I was in the friggin court house where I worked and I was afraid that somebody was going to walk in, somebody was going to tell somebody, you know somehow my name was going to be on a document and it would be everywhere and it would destroy my career...

Aaron had an encounter with his camp director and made the decision to cooperate with the police in order to prosecute him. Police requested that Aaron invite his offender to have a conversation while he wore an audio recording device. He agreed, met with his offender several times and fabricated having an interest in abusing young boys himself. Aaron agreed to do this in part because his own offences had passed his state's statute of limitations and police needed evidence of more recent abuse to convict his offender. In the end police laid charges against Aaron's offender and offered Aaron a job as a police officer investigating sexual crimes against children. Unfortunately, in his career as a police officer one of his worst fears in regard to having fall-out for having been a victim came to fruition. After completing training and entering his new position in the unit, his professional credibility was challenged by a police expert specializing in child sex crimes who told Aaron's unit chief that he should not be allowed to investigate child sex crimes since he would likely be too much of a "zealot". He feared Aaron could not be impartial. This was exactly what he worried might happen if he revealed himself as

a victim when working as a prosecutor.

Strongly associated to their fear of not wanting their situation to get worse, many feared that if they told someone, they would not be believed. This is the subtheme discussed next.

**Fear of not being believed.** Similar to the belief that their situations could get worse if they made disclosures, six participants held strong beliefs that if they were to make a disclosure that they would not be believed. Michael, who had previously led a protected or sheltered life also felt that his abuse would be hard for people to understand. “I didn’t feel like it would be believable. I didn’t want to embarrass my mom and dad and I just didn’t feel the safety within my family to be able to share with them.”

Others stated:

I didn’t think I would be believed because I was shamed so much or invalidated in my family...Also my parents were good at manipulating authority figures and so they knew all these coaches and supposedly had good relationships with these coaches that I maybe potentially could have opened up too...

The kids on the hockey team would say some really awful things to me...I don’t know I guess some people consider my mother attractive or whatever so like it was just really odd to be in this role where they were trying to say sexually provocative things about my mother because they thought she was attractive and I’m in this situation where she was abusing me and just wanted to die.

I know that if I was to come to him and go ‘look Dad, you know, this happened when I was a child and it really fucked me up, really affected me mentally’, his answer would be like, ‘just get over it’...And he also wouldn’t believe it...I didn’t really feel it was good to tell anybody... I don’t think that it would be good to involve anybody that I knew, because I’ve seen the results of when people decide to tell things of this nature. They’re usually met with disbelief and distrust. I hate to use the word victim, but the victim usually becomes the bad guy. It’s like you know what, it’s painful enough what I’m going through inside, I don’t need to add to it.

Aaron worried about the age and power difference between him and his abuser. “Feeling like he...you know...they wouldn’t believe me. Like he was this man’s man and I was just a kid.” Leonard knew that comprehending his home situation would be hard for anyone to fathom. He worried he would not be believed as a youth and as an adult. “You know, I can do all I want

to go after my mother. I could tell the entire family what happened and she would be shunned, or they wouldn't believe me!”

After having described his abuse and living in fear that one or both of his parents may kill him, or that he may someday die from the injuries sustained during his abuse, Jacob commented: “I know it sounds hard to believe ...” Although he was a 63 year old man providing this statement at a conference designed to support victims, he still worried that if he told the truth about the graphic nature of his abuse, that he might be thought of as embellishing. He expressed the fear he still felt in regard to not being believed. He said he worried people would think he’s “crazy, crazy, crazy.”

Growing up in fear of the people they were supposed to be able to trust had devastating effects on these young males’ ability to sustain friendships, and on their ability to trust. Five males stated that although they may have wanted to disclose their abuse they did not trust anyone enough to tell them their secret. Phillip explained that growing up he was teased about being “creepy and socially awkward”. He explained:

It didn’t create a sense of trust or that it was safe to be vulnerable around people and I mean these were teachers that were telling me that I was odd. So even in as difficult of a time as I had, I still had this awareness of these people who are not accepting me and are belittling me, they are probably not the person I would want to confide in about something I was having such difficulty with.

Garrett had a similar experience: “I mean mostly I just didn’t trust anyone, based on getting rejected left and right by peers and the way my parents treated me.” Julien explained that his abuser “stole my innocence, my trust, my childhood. I didn’t have friends. He robbed me from the friendships that teenagers have. I felt I had to keep that secret. I was the dirty one”. Based on his experiences with help seeking in the past Jacob reminded himself not to trust anyone. “I mean I actually said to myself, ‘don’t trust anyone. Ever. Ever!’ Aside from fearing others in their environment outside of their abuse many feared their perpetrators. Fear of their

parent-perpetrator or offender is the subtheme described next.

**Fear of their perpetrator.** Six participants were victims of parental sexual abuse: four by their fathers and two by their mothers. Not unlike those who had non-familial offenders, they reported that their parent-perpetrator used violence or the threat of violence to control them. For two the violence and abuse occurred on a daily basis and the fear they felt towards their offenders was profound:

My thoughts were I have to do this to avoid a beating, and to make sure I have a chance to get something to eat. I can't take a chance of not doing what she says. Because she'll make up a lie and tell my father and he'll beat the hell out of me. Then while he's doing that she'll egg him on. 'Hit him harder'.

My father was a very physical man, by physical, I mean very muscular in stature. I always remember him as that. I don't know whether it's control...It's just that power he still has over you. About two years ago at eighty years old he would have been...I had seen him walking down the main street and I was still afraid of him. I'm twice his size and I was still afraid of him.

Anthony and Garrett each reported they developed DID as a manifestation of the physical, emotional and sexual trauma they experienced from their abusive parents. Although Anthony did not discuss the fear he felt, he stated that he had been very badly physically abused and he did not remember ever not being abused. He stated that the memories of his abuse were returning to him now through his work with a psychiatrist.

Garrett did not discuss details of the sexual abuse he sustained by his mother, but relayed some of the threats he received from his father. "He threatened to kill me... I think at some level he was jealous, but usually he was working or getting angry at someone...He always threatened violence, he was a pretty scary guy."

Participants were coerced with lies, force and threats to their safety or to the safety of those they loved. One reported that he felt threatened simply by observing the way he saw his abuser treat other people:

He used to threaten physical abuse... the anger was certainly abusive, you know, I used to just cringe. I'd be in a public place and he'd take on somebody and I'd just want to crawl in a hole and hide, and I was always afraid when I came home, you know. I was always waiting to be slammed about something or other whether I'd done it or not.

The physiological sensations these boys experienced were, in retrospect, perceived by each to be a manifestation of their intense trauma experience. Likewise, they attributed the fear they felt caused them to have extreme physiological symptoms. Outside of the fear they experienced, several also experienced negative perceptions of themselves. This is the theme discussed next.

### **Theme Two: Shame, Guilt and Confusion “My Dirty Little Secret”**

Each participant discussed having concerns related to their self-image, although for varying reasons. Many felt shame, guilt or confusion toward themselves, trepidations about how they perceived others would feel about them, or both. While these feelings of shame, guilt and confusion are independent concepts, when considered as reasons for non-disclosure, they were reported not to exist independently of the other. The subthemes discussed under shame, guilt and confusion were (a) worry about image; (b) they felt responsible; (c) evidence of physiological arousal; (d) sex was a taboo topic; (e) they felt like a burden; (f) they enjoyed the relationship; and (g) they were confused about their sexuality.

**Worry about image.** All of the men in this study experienced shame at some point in their lives and either had a diminished perception of themselves, or they worried what other people would think of them if they knew what they had experienced. This feeling was strong if they also had questioned their level of participation, felt aroused, ejaculated or felt like they should or could have stopped their abuse sooner. Shame was also conveyed when discussing their self- image and concern over what others might think of them. Some felt responsible for their abuse having taken place and did not want others to know.

Josh felt guilt and shame for having taken risks in his traveling destinations and for having

placed himself in a vulnerable position since he was high on drugs at the time of the assault and had openly identified that he was bisexual. “It’s my own goddamn fault...You knew the countries you were going into.” He condemned himself for having put himself in a position where he couldn’t report what had happened to him and for trusting a complete stranger enough to get high with him.

Julien felt shame for letting his abuse go on into adulthood: “This is a shaming, like not be able to say no is very weak, a weakening experience. You know, for self-worth. We see ourselves as being weak.” He worried his own watchful eyes were also how others would see him. He also felt shame and guilt because of how others were treating him. He was 30 when he finally put an end to the abuse with his uncle. He described the struggle he had as he tried to answer for himself and for his wife the question she asked him. “You were that age, why couldn’t you just say no?” He explained, “I felt as though I had no control at all. It’s not that easy. It’s not that easy...Once the voice is removed. It’s like I’m sucking out all your power, your muscle out”.

Leonard’s shame manifested into him not wanting people to know what had happened to him and not wanting people to pity him. He was worried his friends would treat him differently if they knew:

The biggest fear for me was I didn’t want to tell anybody because I didn’t want their pity... ‘oh this is what happened to that guy,’ you know I just never wanted pity...Worst of all ... there’s a particular look in their eyes that I never wanted to deal with because I never felt that I needed the pity. I mean it happened, I was angry about it, but pity just made it worse.

By the time I was 15, I really liked to read and there was a fair bit of literature at the time about abusers having been abused, so the automatic assumption is always drawn, oh you were abused to you are going to be a pedophile and I would not deal with that well.

He conveyed that exposing his abuse would have left him completely vulnerable and unprotected. He remained silent in part because he identified that no one knew what was

happening to him at home. Outside of his home environment he could pretend that everything was normal and maintain the illusion that he was alright. Sustaining this illusion helped to ground him.

Allen's shame also co-existed with guilt and worry that his friends would leave him and he would be in trouble with the police since he believed he had done something wrong:

My personal experience was the first time I was ever intimate with somebody was with my sister. That was through manipulation and stuff like that, of course, but that's where the shame and guilt come into it...It was also about me being in trouble, because I didn't see myself as the child. I saw myself as doing something wrong.

Leon felt similarly. "The shame is ...I think as you develop you mature...There's tremendous shame where you feel like you did something wrong. You did something that contributed to this. You feel tremendous guilt and tremendous shame..."

Phillip worried about being stigmatized:

I didn't want people to know that had happened to me...There's a stigma or there was, it's becoming less so, but there's a stigma about having been abused. I think it's the shame factor, that I'm something bad, that that happened to me. Did I invite it what happened?

Similarly, many others remained silent in part because of concerns over what others might think. When Gordon was asked if he remembered ever acting out as a cry for help, his response spoke to how he 'acted' based on how he wanted to be perceived by others:

No, I was a model kid. I was a model kid.... Like I said I was very strong I was the leader of our youth group. I mean you couldn't pour alcohol on me, didn't cuss, didn't drink, didn't smoke, didn't go with girls that did. Nothing...

Others stated:

As I got older it was embarrassment... It was what would people think? They would think I was some kind of crazy person when I was little or later on a pervert...I felt guilty. I was ashamed. It was my fault...

People sometimes want to know gory details...I don't want them necessarily being curious. And you know, the question of sexuality, like how did you let it happen...I didn't want to be judged. Nobody wants to be judged... I hate to use the analogy of rape, but people always judge the rape victim.

Ricky struggled with identifying himself as a victim since he was physically mature when his offender began assaulting him, and since he 'let' it continue for so long. In order to feel safe enough to disclose, he needed to know that he was not going to be judged and that his abuse would not reflect poorly on him.

Aaron remained silent in part because myths in society had led him to believe that real men were not victims, they were able to protect themselves. He worried what being labelled might do to his career, but eventually learned to see the flaw in his logic.

My career was probably a tenth of it, ninety percent of it was my image, who I am, what I am. I mean it was so devastatingly powerful a fear. The last thing I wanted was for people to know...I was the victim of the a crime, just like any other crime victim, this happened to be a very insidious personal crime, but I was the victim of a crime and somebody manipulated me into this and made me feel bad like it was my fault....The additional factors with males are that boys want to be a man and being victim is not seen as manly, it's certainly not masculine...Masculinity and also the victim-ness of it, the broken, the damaged nature of it.

The real fact is...Somebody manipulated me into this and made me feel bad like it was my fault. It's like somebody sticking a gun in your face, robbing you from your stuff and people blaming you because you weren't wearing a bullet proof vest or something. I mean it's ridiculous.

Conversely, others disclosed to protect their image:

Whoever I dated I always told them...I always felt that a person couldn't fully understand me unless they knew my past. So every girlfriend I ever had, which were numerous and several male friends as well...because...when you get drunk you have violent outbursts or, I mean, I the most obvious one "why do you hate your mother so much?"

I'm a Roman Catholic, you know there's a thing of forgiveness...and I couldn't forgive him...And I was struggling and I started to feel like I'm doing something wrong; I can't forgive him... I didn't want to feel like I was a bad Catholic ...That was important to me...So at 38, I went to confession...And I told the priest...And the priest is the first person I said I was sexually abused by my father...The priest said it is not a sin not to forgive him for this. It's fine for you not to forgive him.

Shame about having been victimized was a strong deterrent for eight participants. It was verbalized as paralyzing and as an emotion as powerful as fear. Jacob stated that despite the fact that he had been seeing a therapist for two years to help him deal with his son's cancer diagnosis, he did not speak to her about his abuse because he was ashamed and he thought it was his fault. Gordon relayed similar sentiments: "You didn't talk about it. I mean it's just something you don't talk about. It's your dirty secret...I think it's the shame factor, that I'm something bad because that happened to me." Ricky did not want to discuss it in part because he worried that people may want to know "the gory details". Michael described his abuse as embarrassing and stated this it was a very personal issue that he did not want his friends to know about even to this day. Anthony was ashamed because some of his abuse "seemed homosexual". Aaron feared going to his high school prom. He worried, "they would know that it happened to me" it was "branded on my forehead...I never felt relaxed sexually around a woman" after his abuse. He stated that he wanted to tell his best friend, "I just felt like nobody would understand, nobody would like me anymore, I would be vilified...I did not want anybody to know what I had done, what had be done to me. I mean it was paramount". Others stated:

It was my female cousins', who took care of me, took care of me, isn't that an interesting choice of words? They were with me and it was assumed that of course because they're the older cousins that they would be nice to me and play with me and they were kind of mean. You know if I wanted to watch a certain show or something, they might unplug the TV and say it wasn't working or the TV wasn't there. One day I just sort of very offhandedly said that I didn't know what girls look like...I really was an innocent and protected kid. I had no idea, but it was just a question. I had access to the friendly Encyclopedia Britannica so I saw the plates. They had the plates on anatomy and I kind of figured well I look like the one that has the male parts and so this one with the female parts. My cousins took the opportunity to taunt me and eventually show me, and invite me to touch. That's really what I can remember right now. I see the pool table. I see one of my cousins in the bathroom. I just remember being humiliated a great deal with that, that's what I remember from being with them. Feeling embarrassed about ever telling anybody and even today, it's kind of hard for me to tell me someone especially a woman. Because I feel like it makes me seem like a total creep.

It's something you don't see but it's huge. It's like an elephant. It's a weight on your

shoulders...and it's so sneaky, sometimes you think you dealt with it and then it comes back. It's like a cancer and I have treatment and then, it comes back...when you talk about the shame it's so big, it's like the darkness of the cloud is so big that you don't see the light, you can't see the light.

Phillip stated that he never really thought about his abuse as having been a crime that was committed against him, "I think it's just more about shame than anything else that I just wasn't going to tell anybody". Leon also described his shame as a very powerful feature in his silence, "I think it's more the shame, why I never said anything. The silence was such a powerful element of it"

Those who experienced shame during or after their abuse often saw themselves in a painfully diminished manner. Feelings of shame caused them to fear disconnection not only from others but within themselves. Participants' perception of self was also negatively affected by the idea that they felt responsible for allowing their abuse to have taken place or for not having stopped it sooner. Over half reported that at some point in their lives they felt guilt or were confused about their level of participation because they had not done more to stop the abuse. This subtheme is discussed next.

**Felt responsible.** Words of accusation and blame spoken to these boys' as they were being victimized often led them to feel confused and responsible. Their self-perceptions became distorted. Several reported feeling badly, not because something bad had happened to them, but because they perceived themselves as being bad. Jacob discussed how he felt responsible. He explained how he struggled to even discuss the matter with his therapist:

I thought it was my fault. My mother would say 'you did this to me'... It took me two years of seeing her before I had the guts to admit it...except I didn't fuck her, she fucked me... but I felt guilty. I had been carrying around the fact that I fucked my mother for fifty nine years. How could I do that, I mean what was wrong with me?

Garrett stated that based on the teasing and rejection he experienced he too felt responsible:

I guess on some level I blamed myself for what was going on and felt ashamed and guilty

and internalized all of their treatment towards me. I thought that it must be about me, so I thought if I really told anyone that that would be further evidence of how I'm screwed up and that it would somehow be a reflection on me not that that was the way they were treating me.

Feelings shame, guilt and confusion were especially predominant among males whose parents had taught them not to discuss sexual matters. These participants oscillated between wondering if they had been victimized or if they had done something wrong. Feelings of guilt for having done something wrong, including having been aroused are examined next.

**Evidence of physiological arousal.** Although involuntary arousal was not discussed directly, it was discussed implicitly. Feelings of guilt and confusion were relayed when explaining the confusion they felt over having been physiologically aroused and when considering that sex was a taboo topic of discussion or feeling that they were a burden to their families. Although some feared being thought of as a homosexual or labelled as a sexual deviant, the participants who admitted to experiencing involuntary arousal did not understand it as a response to trauma, and they feared others would not as well. Three participants were assaulted in their beds while they slept and woke to the assault occurring. The physical stimulation they received caused them to become physiologically aroused, despite any emotional willingness or desire to participate. All were coerced into sexual acts by people they had once trusted and cared for. They described engaging in the acts not for reasons of sexual arousal or desire to participate, but rather out of loyalty to the relationship they had previously enjoyed and valued with their abuser.

Aaron's abuser, who was well regarded by his parents, appealed to his ideal of becoming a man, something he had not discussed with his parents. He gave him pornographic magazines and alcohol and implied that he should use the pictures they contained and masturbate. He then strategically walked in on him when Aaron was aroused:

He gave me a whole stack of magazines and beer and he said ‘take it to your room’. I did, I was looking at them and he walks in and like totally shocked me. I started shaking and he’s like “what are you so nervous about, this is normal. I meant it’s what guys do, don’t worry about it”. He sat down next to me and started going through the pictures with me and he started showing me more and more graphic magazines: men on men, women on women and all sorts of stuff. I was like “what is all of this” and he goes “well it’s just sex don’t worry about it, just be a man, why are you such a wimp” you know that kind of stuff. Then he touched me and performed oral sex on me... I felt like my body was betraying me and I just wanted to disappear. I literally tried to curl up in a ball and cover my head with the blankets and pillows. You know just feeling like there’s no escape. I’m in the middle of nowhere. He’s my ride home. I mean there’s no phones, no cell phones, nothing. I remember saying to him “are you trying to make me gay? And he got violently mad and he said “Don’t use that word with me”.

I had a profound sense of shame, guilt and failure for not seeing this coming and for letting it happen. For not being smart enough or man enough to stop it and for my body betraying me, like ‘Why was I aroused, how come I came?’ ‘Why did that happen?’ ‘What’s wrong with me?’...The last thing I wanted was to be gay because of him. He had this leering disgusting look in his eye, this lascivious look in his eye. I mean it just always bothered me and it was like that was haunting me and so I just shut down sexually. I stayed away from anybody.

Michael, whose abuser attended his father’s church, was similarly confused about his arousal:

It was not only painful but it was extremely confusing because it was the first time I’d ever had an orgasm. The first time I’d ever had those feelings of arousal and excitement and the pleasure. It was confusing because it was from another man. I didn’t get it and I didn’t know what to do about that... I think it was more of a shameful thing, I mean it’s like you’re not supposed to, first of all have an experience like that with another man. I had never had any prior experiences sexually with anybody. I didn’t understand any of it myself. I was just really, at 13 years old just starting to like girls and stuff like that. I just remember that feeling, that sexual pleasure, the release from orgasm and I just kind of craved that.

The physiological arousal they felt, the trust and fondness they felt toward their abuser, or the kind words spoken to them prior to their abuse taking place left many of the victims in this study feeling guilty, shame-filled and confused. These emotions were also felt in part because they had been taught not to discuss sexual matters. This is the subtheme examined next.

**Sex was a taboo subject.** Six participants reported that sex was a topic that was forbidden in their homes. Gordon stated that sexual matters were not talked about in his home or his

community:

We're not allowed to talk about anything other than abstinence if sex is brought up. Sex is still a taboo topic, even I mean just plain sex you know in sexual education classes and things like that... Sexual abuse is very prevalent in the South... You just didn't talk about it then and you still don't talk about it now... the only thing they can teach is abstinence. You can't even talk about things like condom usage and things like that.

He never discussed it in order to maintain his alliance to the norms of his culture.

Phillip stated that part of why he never disclosed was that he grew up in 'different times'.

He explained that no one talked about sexual abuse in the 1940's. He didn't hear anyone else discussing abuse, let alone male abuse and explained that even if he had discussed it, it would have been futile as there were no resources for males then.

Aaron's parents also forbade him to talk about sexual matters. "It was something that was wrong and dirty and you know taboo to talk about, therefore I was afraid to say anything to my parents about it." Aside from not wanting to be in trouble for discussing sexual matters, three males relayed that feeling like a burden was also a deterrent for them. This subtheme is discussed next.

**Felt like a burden.** Three of the males who were abused by people outside of their immediate family relayed that they did not want to burden their families with their problems.

Ricky, who was left to live with his grandmother while his family moved away to better meet the needs of his ailing mother, felt like he couldn't burden his father with his problems. "My mother was always on the verge of dying; the whole time. They had enough problems. They didn't need my problems".

Similar to this, two were verbally deterred from burdening their families. This was Josh's experience, "my father's message was clear... I don't want to talk about it. I don't want to think that anything like this happened." He explained that as the last child and having been and unplanned child, he was often reminded that he was a burden to their family. He simply felt he

did not have the right to place any further burdens on them.

Michael who was adopted relayed having had a similar experience. He had an adopted sister who “grew up with major abandonment and rejection issues” that required a lot of their parents attention. Since he did not receive much attention from them he believed there must be something wrong with him and felt that he should not burden them any further with his abuse concerns. Strongly associated to feelings of guilt, some felt confusion over having enjoyed certain aspects of their abusive relationships. This subtheme is examined next.

**Enjoyed the relationship.** Three participants reported having feelings of confusion for having enjoyed the non-sexual part of their relationship. The following quotes reflect the experiences of participants:

I mean here’s somebody that I admire, somebody that I love, you know, cared about, showing some affection... I was not being paid attention to at all. Here’s somebody paying attention to me....actually showing me some affection and showing me some consideration... You know, we’re humans, we’re animals, we need contact, we do... It’s an older cousin that I respected and loved and admired, and I’m getting emotional and physical attention from somebody. It’s an oddity for me...it felt good emotionally for somebody to take an interest in me. I didn’t realize that he was using me.

I would say he seduced me. He would sing to me. I mean, he obviously gave me a level of attention that I wasn’t used to...I didn’t push him away. He wanted to do things with me that I didn’t like and if I said I didn’t like it he would stop. But there were some things that he did that I did like...the sexual things I didn’t like....But he also held me and he sang to me, and that I did like.

There was an affection I had for both of these men as a child...I think there was sort of a feeling of pleasing them and giving them gratification. No question. But I think to be fair...that is sort of portrayed in adolescent development versus say an adult that may have much more understanding of how to assimilate that all. But I think there was a feeling. Sort of a trapping, sort of pleasing... You know if I take care of you, you’ll take care of me or I’ll get more gifts or I’ll get more admiration and support...but in that sexual moment, yeah it was absolutely that feeling of being trapped and feeling like I need to please them and gratify them. No question.

Guilt over having enjoyed the relationship and physiological arousal may have contributed to confusion about their sexuality. This subtheme is discussed next.

**Confusion about sexuality.** As discussed previously, despite the fact that it occurred under unwanted conditions, three participants admitted to having enjoyed the physical release of having had an orgasm. They conveyed the shame and fear they felt in regard to disclosing their ‘enjoyment’ of the assault they experienced. This is not to say they enjoyed being assaulted; this was not the case. They were initially very afraid. However, as their perpetrator decreased his level of violence and increased his positive reinforcement for cooperation, shamed them and convinced them of their enjoyment, their level of consent shifted. Their abusive relations became complicated by the fact that while they were initially assaulted and felt powerless to stop their abuse, after a period of time, the assaults changed into something that they began to defend against less. Subsequently, their memories of being coerced produced confusion, shame and guilt. They questioned whether or not they may have been willing participants from the beginning and feared telling anyone what they had done. Also, since their bodies respond physically to the stimulation, despite their fear and disgust, these males questioned if they had actually enjoyed the initial abuse, invited it or somehow consented to it. Others questioned if their abuse made them gay.

While I was sleeping one night...I felt him touching me...and I was confused...I didn't know what to do. I mean, it wasn't as if I couldn't physically probably push him away. But I was scared...He was older... I'm in a place where I have no control over my situation...a foreign country...and I was like, okay...He continued to fondle me until I ejaculated...Of course it felt good, I mean it's a physical release, it feels good. But at the same time I felt weird, I felt confused, scared, really scared and I was grossed out and disgusted. But at the time, like here I am, I wasn't a stupid child...but I had no emotional life. I was emotionally stunted...

Ricky was confused by the attention he received. He was also reluctant to label his initial assault as abuse since the relationship turned more consensual. He minimized the fact that he had been traumatized, while focusing on the fact that he had enjoyed the relationship and the sensation of ejaculation.

Aaron stated this about the emotions and confusion he felt:

I didn't do anything sexually for at least six years after that...I thought that was a vampire bite. I thought that's what made somebody gay. I didn't know anything about sexuality at the time. Nobody ever talked to me about this. So I thought it was a *fait du complete*. I thought that's just going to happen and I'm just waiting for it to happen... I thought that's how it happened, that's how people got gay...Why did he pick me out of all the kids in the world; all the boys? Something must be wrong with me? He must know something about me that I didn't know...I had guys who were really close friends, I didn't have sexual thoughts about them, but you know after being molested it was like invading my fantasy, my brain, my dreams...I hit puberty really late... like when I was fifteen and I'm you know in the locker room and...like wait a minute why am I looking at that kid?

I had a number of sexual relationships with women and every one of them ended in her cheating on me. I said, "Well I know the reason, she knows fundamentally somewhere what's wrong with me, so that's why, I'm not worthy. She cheated on me because I just don't measure up". I felt horrible as a man. I felt horrible as a lover....You know it was it was terrible and eventually I would come to the conclusion that I have to find out if this is true about me or not....and I kept trying to push it away and eventually I just said you know... I'm going to go out with a guy.

Aaron did experiment with men and now identifies as bi-sexual. He questions whether he ever would have had he not been abused.

Julien had similar negative experiences that contributed to his confusion after his abuse experience:

Like, I had sex with two women and those experiences were not that satisfying to counterbalance. One girl it was, she gave me her virginity but she was crying, she was seeing her mama on the ceiling. So that was not a very pleasant, I was feeling like I was hurting a person, you know. The other, she was trying to replace a relationship so it was, everything we were doing she was doing that with *that* guy. She kept saying his name and then once we had sex she was crying and crying and said that's too much emotion for her. She was a colleague, I was teaching with her in a high school and I felt like I was taking advantage of her. I did it once and I didn't like the feeling to not be accepted for myself, to be the substitute...

Leon admitted that he still questioned his sexuality despite being happily married to a woman. He described the confusion he felt in regard to his ability to participate and how that affected him sexually:

So sexually I was trying to, you know, I never had an affair, I never acted it out but there was all this fantasy life going on and you know, figuring out sexually. Am I gay, am I

heterosexual...am I bisexual? What am I? You know... What does this all mean? Why am I reasonably comfortable with performing in these situations even though it was abusive? But there was something that was okay about it. Like I was able to do it, but at the same time I was also developing interest in girls and having sexual experiences sort of thing so yeah, there was this confusion.

He questioned how he could I consider himself be fully heterosexual man if he had enjoyed sexual relations with another male.

Aside from the shame, guilt and confusion these men felt, several experienced a profound sense of isolation and hopelessness. This is the next theme discussed.

### **Theme Three: Isolation and Hopelessness “Am I Invisible?”**

Generally speaking, living in isolation and hopelessness meant that participants maintained little or no hope for a successful intervention. Specific sub-themes related to isolation and hopelessness that emerged include their belief that (a) there was no point, no one would help; (b) their non-sexually abusive parent was emotionally unavailable; their (c) abuser kept them isolated and dependent and they felt trapped. These subthemes are discussed below, however several general descriptions of isolation and hopeless are provided first.

Common experiences include having been aware of circumstances in their youth where adults had the chance to see that something was amiss and intervene, but in the end did not. Overall, adults who failed to provide safety for them deepened the sense of hopelessness and isolation they already felt. Others felt isolation and hopelessness because they felt that there was something wrong with them, or felt alone because they did not have the social skills to relate to their same age peers:

I saw my friends dating, having relationships, having friends and I felt that I was missing out on all of that, that I didn't really have the skills to relate to people or there was just something completely wrong with me. I felt like I was on Mars. I was a very good student, great athlete, but for whatever reason I just couldn't relate to people in a functional way... So this social group never really formed for me to explore the world as an adolescent and so that just kind of lead me into isolation...

My attempts at friendships were pretty much rejected so I kind of retreated...I had very limited exposure to kind of functional social environments... I didn't really feel like I had any faith in anyone...I wanted a high school teacher to recognize that I was suicidal every day in high school...I was getting socially rejected left and right and it made me retreat further into myself and into my studies. I kind of stopped trying...I mean I had very high marks, but it was pretty much because I gave up trying to have a normal developmental progression. I couldn't relate to people... so I studied... I mean I think this is something that I was thinking about almost every day growing up. 'Am I invisible?' 'Something's going on', 'is there anyone in the world that can see that I'm not okay?'

You have to understand something. I did not *have* those kinds of close relationships with other children...I just couldn't relate to other children. I couldn't really relate to anybody, I couldn't relate to other adults...I didn't consider myself sexually abused. I didn't know what was happening between my father and me was sexual... I didn't have friends...I couldn't relate to other children. So I was a very isolated, lonely kid.

I feel very isolated, very alone...like I'm discussing things that no one else wants to discuss. So partly there's this need to really, really want to belong even when I'm here. It's like but I do belong. So sometimes the insecurities creep in.

When Aaron returned to school after his abuse at summer camp his social life changed. He had similar feelings of being isolated from his peers and like something was wrong with him:

I feel like I'm still a kid and these guys are growing up and I'm not. What's wrong with me? What he did to me just multiplied that. It was like a force multiplier of all things that you normally go through in puberty and teenage years; it just made it so much more. I mean teenagers are isolated, they don't feel like they fit in. Well I thought I was the only one this ever happened to, so I am so bad. I am so damaged. I am so worthless.

Julien described his experience with isolation: "He stole my innocence, my trust, my childhood...He robbed me from the friendship that teenagers have. I felt I had to keep that secret. I was the dirty one. It's huge." Leon described himself as a social person, however, "people never realized that deep down I was really truly a very lonely and isolated person". Several others also led social lives but felt like they were alone in the world with no one to help them. The subtheme of their being no point in disclosing, that no one would help them anyway is discussed next.

**No point in disclosing: No-one would help.** The subtheme associated to isolation and hopelessness reported most consistently among participants was that there was no point; that no

one would help. This was also the second most predominant subtheme identified overall.

Although some examples of the inaction by potential interveners were already relayed in the story of Jacob, he provided several other examples where adults could have or should have intervened:

I'd got my brother and sister...and walked over to the car and we couldn't get in. She was laid over on the front seat...I opened the door and tried to wake her up, she didn't wake up. So I told Jack and Barb 'go stand over here' and I went into the Principal's office and I told the guy, I said 'my mother's dead in the car'...he had me go stand with my brother and sister and then all of a sudden a shouting match started between the two of them. He told us to get in the car... she was drunk out of her mind and she drove home. Nobody did anything, nobody said anything.

In those days kids belonged to their parents. So if I saw a kid being beat up, I mean you have to realize that I went to work with my father on the waterfront, and it's not a beach! It's a very rough place. There were kids whose parents beat the hell out of them. I'd look and my father would say 'there's nothing we can do about that. Those kids belong to him, what he does to them is his business.' That's the way people in my extended Polish family looked at things. They're not our kids, we can't say anything.

Allen described his mother's decision not to help:

I did become angry with my mother when she found out about the abuse and she still stayed with him...I was about fourteen and my sister had just attempted suicide.. and then my parents married. I always thought they were married, but they never were...They married, I believe so that mom wouldn't have to testify ever if anybody ever took it to court.

The experience of the isolation and hopelessness was profound. Several participants explained that they simply grew up accustomed to not having had anyone be there for them. Leonard shared the sense of hopelessness he felt. "I wouldn't have known who to tell...I mean this is going on at home where else are you supposed to go?" Ricky shared that same sentiment: "Who else can I tell? If I can't tell the people that I'm supposed to be closest with?" Phillip stated it never occurred to him that he could tell "you know the run, scream, and tell kind of thing nothing like that existed that I'm aware of".

Approximately half of the participants interviewed were sexually abused by at least one of

their parents. Others stated that although they were not abused by their parent, they were not emotionally available to them. This subtheme is discussed next.

**Non-sexually abusive parent was emotionally unavailable.** Seven participants reported having at least one non-abusive parent to live with, five did not. However, a majority described their non-abusive parents as emotionally unavailable to them and/or physically abusive toward them. Although he was not abusive, Leonard described his father as an alcoholic who worked out of town. He explained that he “was never an emotional man in any way, he still isn’t, and the idea of having a conversation like that in the first place... I knew he would go for a drink”.

Aside from being emotionally unavailable, two participants reported they feared disclosing their abuse because they were either physically and/or emotionally abused by their non-sexually abusive parent. Anthony, who was sexually abused by his father from infancy, described his fear of his mother:

My mother was a drug addict, on prescription drugs, most of my life... So I don’t really know what she knew, what she understood, but she was very ill... I knew to keep away from her. She was very, very erratic. She would stay in bed for days. Lay in bed staring at the ceiling. I knew that was a time not to bother her. Before I learned that, that could get me smacked around quite a bit, but after I figured that out I just left her alone.

As an adult Jacob speculated about why his father treated him so poorly:

Now I’m seeing the bigger picture... Now I kind of understand maybe he knew my mother was fucking me and was pimping me out and that’s why he was so angry with me and why he didn’t do anything about it... She would blame me and tell my father. He liked whips and fists.

He described one incident where his father treated him particularly cruel:

I walked home from high school in a blizzard. They wouldn’t come get me... and it was dark. It was after basketball practice or something, I didn’t play, I was the manager but I remember, there weren’t even cars going by to hitchhike from. I remember just saying ‘I’m not gonna let them get to me, I’m going to make it through this, I’ll make it home. Somehow I’ll make it home’. When I got in the door, my father screamed at me and whacked me, ‘You’re late! No dinner for you, get upstairs’. I went upstairs and my twin brother looked at me and he goes ‘Holy shit, Jake’. I said yeah, Jack, I’m really fucking cold, my hands and my feet’. So he snuck downstairs and he came up with uh a couple of

hot facecloths. I couldn't touch them. We had to put them out the window and let them cool off before I could actually pick them up. I had to warm up with cold water is what it amounted to.

Although Michael was not abused by either of his parents, he felt they were both emotionally inaccessible. He described his situation and understanding of why and how this happened:

My sister was a very problematic kid. My mom and dad spent probably ninety percent of their time with my sister. She had been in four foster homes in the first four months of her life and she grew up with major abandonment and rejection issues. So my mom and dad spent so much time with my sister... My mom was very absent, she was a nurse... My dad was also very absent... He was always at church functions, weddings, funerals, preparing a sermon, board meetings and on and on. So I felt a feeling of abandonment and lack of safety and trust to be able to talk to my parents about my feelings and my emotions... I mean I was close to them, as close as anybody else, but yet there wasn't a feeling of safety or an ability to really talk about deep and meaningful feelings and emotions... Being raised in a family where we don't talk about your feelings, don't talk about your emotions... It was much more my mom, you know, 'don't go there'... I mean, she never specifically said 'don't talk about your feelings, don't talk about your emotions'. But she'd say 'you're making me uncomfortable', 'you're rocking the boat', 'you're kind of going into territory that we don't, we just don't talk about it in this family'... So I didn't feel safe to talk about anything... I just kind of buried it and let it be and stuffed it away and never faced it... I was raised by a minister, in a good strong Christian family yet it I wasn't taught how to have a relationship and how to bring your problems out into the light and talk about them. I've never had that real close bonding with my parents and the safety for which to be able to do that. I have it now more than I ever had, but I didn't get it back there.

Ricky's mother was seriously ill and he grew up with the understanding that not only was his mother emotionally unavailable to him and that he had to stay out of his father's way. These were his thoughts:

The cycle is supposed to be you're cared for by your parents, you care for yourself, and then you care for your parents. But I cared for my parents when I was little. I cared for my parents through my whole childhood and most of my adult life... I've been the parent since I was a child.

Phillip was in a similar situation, acting as the care-giver for his mother:

It turns things upside down where the child becomes the caretaker instead of the... you know... It's interesting this Steven Gold (author of *Not Trauma Alone*, 2001)... he says the worst cases he hears about are my children come home and nobody greets them at the door, well I don't remember ever having coming into the house and having either one of my

parents say 'I'm so happy to see you' ... the worst are ones where the children isn't loved and nurtured, which is what happened to me... By the time I was...six maybe. I had no emotional connection to them...I used to just walk away from the house...my mother took to tying me to the back of the house with a rope around my waist so I wouldn't walk away...I remember, you know, sort of cowering and hiding down the corner trying to hide from my playmates so the other kids in the neighborhood didn't see me tied up like a dog. That's why I say that at the beginning, that the sexual abuse was just a small part of the picture...I wasn't being nurtured and taken care of by them; I was being used as an instrument for them...It just never occurred to me that I should tell her or could tell her. I mean...I was her caretaker rather than her being my caretaker. And that started very early I guess.... I'm sort of assuming the reason I was giving her emotional support was because she wasn't getting it from my father. She always used to say I was the best son that a mother could ever have. I took that as a compliment (chuckling)...

Aside from either fearing both their abusive and non-abusive parents, or having them been emotionally unviable to them, several did not want to disrupt their family system because they were so isolated and dependent on them for survival. This subtheme is discussed next.

**Abuser kept them isolated and dependent/trapped.** Two participants described that their abusers kept them sheltered and extremely dependent. Five discussed feeling trapped for other reasons. Those who needed the support of their parent/abusers for food and shelter etc. stated their dependence on them acted as a barrier that kept them silent. For one, this dependence extended into his adulthood.

Garret explained that by the time he was prepared to leave home he knew very little about how to take care of himself in a practical sense. He also knew that if he ever wanted to have the chance at having a normal life he needed his parents to pay for university. He believed he was intelligent enough to successfully complete university, but he was financially and physically dependent on his parents for their support in order to make it happen and create a better life for himself. He understood that if he severed his relationship with them it would be considerably harder for to succeed in life:

So a lot of the work I've been doing...has been figuring out how to be independent and take care of myself. These were skills they didn't teach me. I wasn't prepared to be on my own. I never really had many of the building block experiences to not depend on them....

Growing up I was programmed and brainwashed to think that any help or contact with the outside, outside the nuclear family was just very dangerous. Not only dangerous, it would never help me according to my parents... They just criticize and belittle everyone else, but themselves... They would always be picking at people. My dad would say that the only people that care about you is us and that everyone else is out to get something from you or has some type of angle... My parents were pretty wealthy and lived in a very affluent community so there was some privileged associated with being tied to them... They created a dependence and a fear that I would not be able to take care of myself and that I wouldn't know how to get on in the world... I thought that they somehow knew better than me... That their reality is what mattered and that my reality didn't exist. They were trying to control me and invalidate my experience. I would say like 'I'm not happy at this high school. I really want to go to boarding school or do anything but go there' and they would say 'Well you're wrong this is the greatest thing and this is what is going to happen'.

Garrett felt confusion about his entire reality:

I was very confused how my parents presented this very public image that they were great people, dedicated to their children, how like they just presented this image kind of wholesome, decent, respectful people and behind closed doors I mean forget about it. It was very different. On some level I think that's also why I wasn't vocal because on some level they made me question my whole reality. 'Are they right and am I insane'. That was the message that was constantly, implicitly and not so implicitly, stated that my reality didn't exist.

When asked about the reasons he did not disclose his abuse sooner, Garrett stated:

Number one it was a big risk. Number two, it pretty much meant giving up everything that was familiar. Also, I had this sense of entitlement because I was so abused and felt so different from other people. My parents fostered this idea that I was somehow was better than other people... I didn't want to give that up... I mean at the core I knew it was all kind of false and I felt dirty taking their money and going for expensive dinners. Just stepping outside of that felt almost impossible because I was so broken down and conditioned to be helpless....

Similar to a desire to protect their futures, five other participants reported having the sense that they were trapped, that no one would ever help them and/or that there was nowhere better they could go to. Three men described feeling compelled to comply with their offender since they relied on them for emotional support and attention. Garrett's sense of feeling trapped stemmed from the fact that he had no age appropriate friends. He explained that his mother sabotaged any attempt he made at making friends. His lack of friends left him all but completely reliant on his parents for any sort of a social life:

My mother was a teacher and so she was always super involved in everything...I wasn't really allowed to just have an experience. It was almost like she thought she could think for me...I got accustomed to it, not that I like it, it felt really icky to hang out with my parents when I was an adolescent, but at some level they broke down my confidence to such an extent that I didn't really think that there was any way to escape this...I didn't really want that especially when I was in high school and growing up. I wanted to relate to age appropriate peers, but that just seemed completely impossible... I didn't understand why she had this obsession with me. I knew it was very screwed up. She would always say 'oh you're my favorite' or 'oh you're sensitive'. Yeah I was so sensitive because I thought my dad was going to kill me!

Others also felt trapped because they did not know they could say no to their abusers, or they physically feared their abusers. Phillip stated this about his family, "in my family you couldn't say no, you couldn't ask for what you wanted. The only way you could get anything was to be passive aggressive and eventually hope they caved in to you."

Aaron felt trapped because of the way the Catholic church has historically protected priests who are sex offenders:

How do we let an organization like that that protected these guys for so long still exist? Why has that not been dismantled? Why have they not completely torn through and gotten all the information that they secreted away to the Vatican? Why is that still allowed to happen? I believe the Catholic Church needs to be prosecuted under RICO, that's the Racketeer Influence Corrupt Organization that we used to get into the mafia because they would protect themselves with lawyers and organizations. That's how we pierced that veil.

Leon felt trapped because his abusers filled a need he had. "Sort of a pleasing, you know, if I take care of you you'll take care of me or I'll get more gifts or I'll get more admiration and support. I think that certainly was part of the dynamic".

Other components of isolation and hopelessness were discussed throughout these findings. Michael and Aaron discussed feeling too unloved, unworthy or unsafe to tell anyone. Ricky discussed how the negative attention he received from his abuser was better than no attention at all. Both he and Josh also discussed that they worried their families may ostracize them. Aaron spoke about having received societal messages about what it means to be a man; Julien spoke about not wanting to cause pain to his family. Leon felt isolated because he knew his

grandparents would never be able to comprehend what was going on for him. Jacob felt isolated because he believed no one could help him. All of these beliefs and concepts contribute to the sense of isolation and hopelessness they felt.

The next theme addressed speaks to the participant's lack of awareness or understanding of either the fact that they were being abused or the damage that their abuse was doing to them.

#### **Theme Four: Lack of Knowledge/Capacity: "I Didn't Understand"**

Several participants stated that they were either ignorant to the fact that they were even being abused, or uneducated in regard to their abuse as being sexual. They also discussed that it was not until they were more mature and around other teenagers or adults that they realized that they had been sexually abused. Others were aware they had been sexually abused, but they did not realize the significant impact it had on them until they ran into problems later in life. These subthemes: (a) unaware of the impact of their abuse; (b) unaware their abuse was sexual are discussed below.

**Unaware of the impact of their abuse.** Over half of the males interviewed discussed that growing up ignorant of the impact their abuse was a deterrent to their immediate disclosure. Several provided retrospective examples of the profound effect the abuse had on their life, but stated they did not make the connection to their abuse until much later in life.

Although he was initially unaware of it, Michael stated that his abuse changed his entire personality. He went from being a church attending, reserved teenager, to a promiscuous male who used women, alcohol, and drugs. However, at the time of his abuse, when the changes in his personality first took place, he simply thought he had come into himself as a teenager:

It made me aware of feelings that I'd not experienced before that were pleasurable. I then began to act out in ways to feel that pleasure... Within months of this experience I was acting out my sexual feelings with younger girls due to the early sexualization. I had never had any feelings or experience like that.

He came to understand and recognize the damage his abuse had done after a friend discussed his own abuse:

Initially it didn't seem like it was worth talking about. I didn't see a connection how it then led me down the road into drugs and alcohol and sexual promiscuity. I knew there was something wrong, something that had been bugging me. After my wife left me it just began a whole process of self-exploration, trying to figure out why I had been such an angry person my whole life and why I'd been such a workaholic. I knew that there had to be some kind of an explanation for the things that had happened in my life...but very rarely did I ever think about it. I mean very rarely. It had been stuffed away and avoided and I honestly didn't think that that being molested that one night would, or could, possibly result in what has become to be reality...

I actually had a buddy invite me to a men's group that they had about eight men in and they were doing a study in a series...and it was the very first night that I went...the very first night I went they were talking about the wounds and scars in men's lives and the fact that we don't typically like to talk about them, we prefer isolation. We, you know, don't face that stuff. We run, hide, deny, avoid, bury stuff and repress. That I think was the beginning of me starting to realize some of that stuff. It didn't so much pop out in my mind of the issue of being sexually molested but it was beginning of realizing that, wow, I got issues...I really didn't, for 35 years, think that it had much of an impact on me but then I began to figure out it was really the core of many of the things that had happened in my life, a root.

Aaron also never recognized the impact of his abuse:

I didn't say anything for 10 years...I cut myself off from people. I broke up with my girlfriend...I dressed in oversized clothes... I pushed myself away from my mother. I hid all the time. Anytime somebody was talking about anything serious or emotional or what's going on with you, I got out of the situation, I became very, very, very negative and completely isolated... I'm sure I was giving out a lot of cues. My mother kept asking me, but she had no idea what happened to me and so you know she just never really pursued it...I mean my mother kept saying 'You were always such a happy kid, what's wrong? What happened, why are you so sad?' And I just pushed her away. I was afraid of her finding out.

Aaron's abuse also changed how he identified sexually. Prior to being abused he had a girlfriend and was fully heterosexual. After his abuse he became confused about his sexual identity.

Garrett provided the following perspective:

It wasn't just the sexual contact it was the effects of it that I didn't understand...I graduated college. I was working corporate finance, and I had pretty severe PTSD symptoms to the

effect that for the first time in my life I physically wasn't able to perform the job or work. I knew something was always wrong, but I didn't quite understand what was wrong with me. Growing up, I could always do well in school and kind of perform the next task, but then, I physically couldn't go into work. My job was to report to female marketing managers and that activated all the PTSD. I read about it on the internet and recognized the symptoms, but I knew there was something else beyond that.

Josh was having difficulty understanding why he was making such poor progress in therapy after six years. It was not until his memories returned to him that he began to understand the damage his abuse had done and make sense of things in his life:

Something shook loose...I actually was like, 'wow, I remember this. This really happened. Why I have not been thinking about this? Why have I not been thinking about this all these years? Why have I not put all of this together?... I had no clue, I just wanted to survive the best I could and I figured if I could just pretend it didn't exist and make it go away, that everything would be okay.'

Allen described his moment of revelation:

I knew it was wrong, but it was just kind of like, a secret. I remember the first time I really realized how wrong it was when friends at high school were talking about the girl stuff; getting girlfriends and losing their virginity and stuff. My first experience was with my sister and that's when I realized that's all fucked up.

Others knew they were being abused, but lacked the capacity to defend themselves due to their youth. Four participants reported that their abuse began when they were so young that they did not remember ever not being abused. While most recognized that they were being physically abused they initially had no idea that what they were experiencing was sexual. This is the subtheme examined next.

**Unaware their abuse was sexual.** Three interviewees stated that they had no idea that what had happened to them was sexual abuse until much later in life. Two reported having led very isolated lives; they simply had too few friends to compare notes with. They also described their abuse as beginning very early in life and stated that they simply assumed that what they were doing with their offender was normal. Anthony was one of these males. He described the way he learned the reality of his abuse:

I've always found treatment to be helpful...I was in treatment with a therapist and I don't know what she asked me, but I apparently answered her in terms of having to do with bathing as a child. Then she identified that as sexual abuse...I was in total confusion because I didn't know what she was talking about...I didn't specifically say to the therapist 'I was sexually abused', I described a common behaviour in my household...I didn't know what was happening between my father and me was sexual. To me it was just bathing.

He explained that from his youth, his father used to insert his fist into his anus during bath time and penetrate him anally. He described how this experience was so normalized that he was simply unaware it was abuse until his therapist brought it to his attention:

Up until the age of 53 I had pornographic photographs of myself that my father had taken. I never realized they were pornographic. I had some inkling that they were important. I showed them to my therapist at the time who confirmed what they were pictures of, and then I ripped them up. But I had had them for years...

Leonard's abuse also began early and occurred so regularly he also did not think that what was going on was out of the ordinary:

I mean it happened often enough, that it was just oh ok, well...ok... you know... Mom wants to feed me Drambui and Dug's over... By the time I got a couple Drambui's in me I was drunk and I couldn't remember what I was doing anyway...Yeah, it never even crossed my mind, until I was 11 almost 12. Until I sort of had the realization that it wasn't right! It just never crossed my mind...If it was something out of the ordinary like I've got other uncles, so if one particular uncle had abused me, I would have realized it was out of the ordinary. Not having another mother, I've got no comparison, so I just assumed that well... everyone else does this ... I didn't like it, but I didn't like eating vegetables either.

Garrett was 27 before he recognized his abuse was sexual in nature:

I mean I knew other stuff. Like I was in study abroad my senior year and I just felt completely different than other people. Like I just couldn't relate to these people so I started reading a lot of R.D. Laing and a lot of books about family dynamics. So at that point I realized something was off. I didn't recognize the sexual abuse but I realized something was not working...I didn't really understand what was going on...I mean I knew enough to know that something was very, very wrong. I just didn't know how to describe it.

Others knew that they were being sexually abused, but did not confide in anyone to protect their family reputation or to protect their families from information they thought would be too hard for them to handle. This is the final theme examined.

### **Theme Five: Protecting the Family “I Didn’t Want to Cause a Stink”**

Nine participants discussed having not shared the information of their abuse with anyone, including a non-abusive parent or a trusted person in the community either to (a) protect their family’s reputation and maintain their sense of family, or (b) their parent from information they believed would be too hard for them to handle. These subthemes are examined below.

**Protecting the family’s reputation or the idea of family.** Nine participants discussed wanting to maintain the illusion that their family did not have problems with abuse, or to maintain their family as a unit. Michael feared what may happen to their family’s reputation or sense of wholeness if he disclosed:

I didn’t want to cause a stink...the issue of bringing it up and talking about it with family and with other people. The embarrassment... it definitely was protection of the family. My father was the minister at a very prominent church...He and my parents were friends. My dad’s church was a thriving congregation and having been raised not to talk about your feelings and your emotions I just kind of let it be... I just felt like if I said something it would cause all kinds of commotion...and I wouldn’t be believed. It would be an embarrassment to the family and to my father in his position as a pastor.

Gordon, who grew up in a Southern Baptist community also did not want to destabilize or upset his sense of family:

Nobody wants to piss off so and so...or you don’t want to break this part of the family up and have this part of the family not speaking to you. Even though nobody’s in that harmonious of a relationship, you just don’t want to break up the family, especially over something as taboo as that. You know you can’t un-ring that bell once it’s been rang.

He also did not want to burden or upset his mother who was a single parent at the time of his abuse. “In all honesty, I would have never disclosed to her because I knew how bad it would have hurt her in my adolescent years as I grew up, I never told her until I was in my thirties”. He protected her by waiting until she was more financially stable and until she had remarried and had someone to take care of her emotionally before disclosing to her.

Allen feared what might happen to his family if he made a disclosure:

I was more worried...that my father would get arrested and taken away...sent to jail and that it will hurt mom because it would break the family up...I certainly didn't want to lose my siblings...Family's supposed to take care of each other, you're supposed to pretend everything's wonderful.

Aside the fear of breaking up their family, or ruining their reputations, seven participants worried the information would be too hard for their parent(s) to handle.

**Too hard for parents to handle.** Over half of the males in this research reported they placed the protection of other family members above their own personal safety. Protecting parents from information they thought would be too hard to hear was a reason for non-disclosure reported by seven participants:

I would stay away from him...only my only sister noticed that I was not too close or friendly with him. She took me aside and asked me about it. I don't know if I told her right away or if I make a story to protect myself or protect the family...My loving family. It's like I couldn't create pain. I had to hold it in, acting like nothing happened...I would be the one creating pain for my family...We're a very polite family, we always say, 'show respect to the priests, show respect to the adults'...My mom was a teacher so it was very important. The whole community knows her, knows us. So even at school I had to behave in a certain way, be an example to the other students...I still recall my mom's reaction when I told... She said it was I took a slammer hedge and hit her in the forehead...

Although as an adult Julien wanted to expose his abuser, in the end, he chose to continue to protect his family by keeping the matter private for the sake of their reputation. Ricky worried about disappointing his father and severing his relationship with him. "I know from my experience with my father within his religion, he doesn't think it's possible than anybody does these other things... I knew his religion and it affected him...First off, the idea of two guys having sex, is utterly repugnant to him."

Leonard described why in his 20's he still had never told his father about the abuse he suffered at the hands of his mother:

So my dad had been an alcoholic for years, and when I was 21 he quit drinking. Totally voluntarily...I was so happy and I was so proud of him, but I had also just reached the point that you know what my dad deserves to know, but I can't tell him because he might start drinking again... I just didn't want him to start drinking again. It was slowly killing

him...

He explained that up until that point he had been pretending that everything was normal. He stated that it was not until he became a father himself that he made the decision to finally confront his mother. After the confrontation she ran out of the house and committed suicide in this woods. This impulsive act, coupled by the media attention it drew, forced Leonard to tell his grandmother about the abuse. Prior to that he had protected her from this information which he believed would be incomprehensible to her:

My grandmother just – doesn't want to believe that these things even exist. It doesn't compute for her. It took a couple of times of sitting down with her to explain it to her, to even tell her what happened. She didn't understand, she's like 'but she was your mother?' 'Yes'...But she did this'. 'But that doesn't make sense?' So she really didn't understand. It took several people to explain it to her.

Josh also felt like he needed to protect his father in part because of his father's poor health:

I knew on a visceral level, reactive, instinctively, that telling my father would hurt him and potentially kill him. I actually have a sense that I'm not being melodramatic because he had had a heart attack, and ever since...we'd been doing everything very gently. Tip toeing around my father...There was the fear it was at that time he was already on heart attack number eight...or nine. I certainly didn't want to aggravate that. My father, his message was clear. I don't want to talk about it. I don't want to think that anything like this happened.

### **Summary of Findings**

The participants in this study reported deep-rooted and complex barriers that existed across multiple domains and over their entire lifetime. While some grew up unaware of their abuse due to memory loss, dissociation, or purposefully trying to forget, others were more aware. They lived in fear and isolation, acted out, or remained confused. Their responses to childhood, adolescent and adult abuse varied from person to person. Each experienced physiological responses, made emotional decisions, and/or utilized psychological defence mechanisms to cope with their traumatic experiences.

The most predominant theme found in this research was that of either involuntary or

voluntary memory loss associated to that what they perceived to be unbearable circumstances. Significantly, over half of the participants reported involuntary loss of some or all memories of their abuse. They reported having little to no recollection of certain periods of time in their lives when the abuse was happening. In its most extreme form, three participants reported they developed dissociative identity disorder which helped them manage their traumatic experiences. A fourth developed a conversion disorder which disappeared shortly after his memories returned. A fifth reported having only “flashes” or “glimpses” of his initial abuse, while another reported having no memory of his childhood. Alternately, two participants reported purposefully trying to forget their abuse, and ultimately being successful at temporarily forgetting their abuse.

Apart from having memory loss, several participants explained that their abuse was simply too difficult to discuss. Others stated they had ‘tested the waters’ to see if they could trust someone to respond favorably and the test had ended badly for them. Conversely, several felt very strongly that they could not disclose at all. They did not trust anyone enough to tell them or feared that any attempt at intervention may lead to worse consequences. Interviewees spoke commonly of there being no point, that no one would help them. Several felt trapped, worried their abuse would be too hard for others to handle, didn’t know who to tell, or had disclosed and were met with secondary abuse.

Feelings of isolation and hopelessness were also discussed amongst all of the participants. Likewise, each participant reported strong feelings of shame, guilt and/or confusion which acted as a deterrent to their disclosure. Seven participants reported they were confused about their sexuality after their abuse. Eight worried they might be in trouble or blamed themselves for the abuse having taken place or for not stopping it. Five stated their abuse was so normalized that they thought it was their role to be used as a sex object.

Approximately half of the men indicated that lack of knowledge in regard to the impact their abuse had, and/or a lack of awareness that they were in fact victims of sexual abuse, were barriers to their disclosure. Nearly three quarters wanted to protect their parents' reputation as being perfect or to protect them from information they believed would be too hard for them to handle.

## Chapter VI: Discussion

The purposes of this study were to gain a better understanding of the barriers to disclosure men and boys face after experiencing sexual abuse, and to gain an understanding of the cognitive processes males often engage in when considering a disclosure. These barriers are important to understand to encourage help-seeking behaviour among males. The present chapter discusses the findings of this research and compares it with the current literature. It answers the questions: “How do boys, and later men, who experienced childhood sexual abuse, perceive others may react and respond if they disclosed their abuse?” “How do these perceptions or beliefs make victims of CSA react and respond?” “What are the decision-making processes that male victims of CSA engage in when considering whether or not to disclose their abuse to either a care provider, person in a position of authority, or supportive friend?” and “What were the environmental, cognitive and emotional contexts associated with this decision-making process?” The findings of this research suggest that each reason for non-disclosure – whether it was physical, physiological, emotional, rational or fear-based – was a natural response to the trauma they had endured. They also validate previous findings and further what is known.

Previous seminal literature examining trauma has identified that trauma can affect brain development, memory, mood, personality, attachment and social functioning (van der Kolk, 2007, Twardosz & Lutzker, 2010). It also specifies that children who have endured traumas, such as CSA, commonly become hyper-vigilant and hyper-aroused. They experience differing degrees of dissociation, triggers, depression and anxiety. Furthermore, they commonly withdraw, become reclusive, act out, or undergo drastic personality changes (van der Kolk, 2007). No matter what their ages, CSA victims are commonly confused, unsure of themselves and bothered by intrusive thoughts. They feel unsafe and fear being judged or rejected by others

Many struggle to relate to others and suffer from anger and addiction issues, suicidal ideation and other interpersonal difficulties (Alaggia & Millington, 2008; Fradkin, 2012, and Lew, 2004).

Past research highlights that exposure to CSA forces people to change how they view themselves and the world around them (McFarlane & De Girolamo, 2007). It also identifies that males place a portion of their self-worth on their ability to handle situations and then return to their previous state of equilibrium. When they become dysregulated and disoriented, their sense of self-worth is negatively impacted (Alaggia, 2005; Fradkin, 2012). This indicates that males' emotional responses are greatly impacted by their own physiological reactions to traumatic situations and their ability to soothe themselves. Emotions are also impacted by the degree of support they feel from their environment and the nature of the abuse itself (Rothchild, 2000).

The results of this research support these findings and provide additional insight. Similar to the results of previous studies, participants in this research identified that they lived in fear of being blamed, judged, labelled, re-traumatized or made to live in worse conditions. They struggled to trust others, experienced shame, guilt, confusion, suicidal ideations, isolation, hopelessness and a diminished ability to concentrate. In addition, participants in this research also reported that experiencing memory loss was a reason for non-disclosure. In fact, memory loss was the sub-theme discussed the most and by the greatest number of participants in this research.

Over half of the participants reported having significant lapses in memory. A few stated it was the predominant reason for their non-disclosure. These results are consistent with those of Alaggia (2004) who examined patterns and processes that promote disclosure in an attempt to "understand issues that interfere with disclosure" (Alaggia, p. 1216). Alaggia's research also identified memory loss as a reason for non-disclosure among over half of her male and female

participants. Involuntary memory loss and dissociation are common responses to trauma (Rothchild, 2000; van der Kolk, 1988/2007; van der Kolk, van der Hart and Marmar, 2007; Levine & Kline, 2006). Participants in this research believed their memory loss occurred as an adaptive physiological response to the trauma they experienced, one their body used to cope with life-events that would have otherwise been intolerable.

**Comment [k2]:** This is new

Apart from experiencing involuntary memory loss, a few participants reported that they purposefully and successfully willed themselves to forget their abuse. Among those who did not report memory loss, most recognised the decision about whether or not to disclose was a life-long struggle (Hunter, 2011; and Alaggia, 2005). Many suffered from depression, anxiety, guilt, and feelings of isolation following their abuse experiences. Some lived in states of dysregulation and dissociated. Worry about their mental stability may have caused them to further decompensate and develop negative core beliefs about themselves (van der Kolk, 2007). All of these conditions were reported to have been developed as a result of the trauma they experienced.

Several participants in this research recognized that their abuse had a profound effect on their nature, character, social development and functioning. For some, the change to their personalities was profound and was reported to be due in part to a lack of awareness of the impact of their abuse. Conversely, others were more aware of its impact. These males lived with a sense of hopelessness and isolation, eagerly anticipating when they would be old enough to get away from their abusers. Retrospectively, some identified that they used alcohol and social withdrawal as coping mechanisms to help them manage their traumatic experiences. These findings are consistent with the findings of previous researchers Rothchild (2000) and van der Kolk (2007), who advised that abuse can have a significant impact on a victim's personality,

development and functioning. Similarities to the reports of Gartner (2000b), who indicated that males often adopt attitudes of hyper-masculinity and guard their secret through acting out sexually, were also identified. A few participants reported that they became extremely sexually active after their abuse. Some even began engaging in further abusive style sexual relationships.

Evidence also emerged in support of the findings of Bullock and Beckson (2011), who conducted a review of the literature examining male victims of sexual assault and involuntary arousal. Similar to their findings, several participants in this research advised that they had been physically aroused during their abuse. Their arousal occurred despite their lack of emotional preparedness, understanding or willingness to participate in the initial abuse. A few reported being paralyzed with fear when their perpetrators first approached them and confused by their subsequent arousal and ejaculation. Their enjoyment of the physiological arousal later led them to experience confusion regarding their sexuality and about having trusted their abuser prior to their abuse having taking place.

Consistencies with the reports of Lanning (2010) were also found. Lanning identified that a majority of those abused by people outside of their immediate family reported that their perpetrators used grooming tactics to win their trust prior to abusing them. Perpetrators typically befriended their victim's parents first. They then introduced their male victims to masculine principles including sports or rough play, provide them with alcohol and pornographic images to lessen their resistance, and then abuse them (Logan, 2006; Terry & Freilich, 2012). Participants in this research reported similar patterns. All of the initial non-familial perpetrators identified in this study were known to their victim's parent(s). Most had befriended their parent(s), then offered support or friendship to their children, and then abused them.

Similar to McDonald and Tijerino's (2013) research which indicated that many male

victims were violated by family members, a majority of the participants in this study were also abused by family members. Approximately half were violated by a biological parent. Others were abused by male and female cousins or an uncle. The remainder were abused by someone considered to be a family friend or someone known to their parent. Although some were abused a second time by someone they did not know, none were abused in the first instance by strangers.

Nasjelti (1980) reported that the fear of being considered 'unmanly' for not being able to protect oneself and the fear of being labeled as 'homosexual' acted as barriers to disclosure. Although at some point most of the participants in this study felt responsible for their abuse having taken place, only a couple specifically discussed feeling weak or unmanly for not having stopped their abuse sooner. Similarly, though several felt confused about their sexuality, only a few discussed feeling worried about being labelled as 'homosexual' or feared that their abuse may have made them gay. Others felt strongly that their abuse had not affected their heterosexuality. Similarly, a fear that familial incest was indicative of mental illness was also a shared indication, though it appears to have occurred to a lesser degree in this study. However, unlike the findings of Nasjelti, none of those abused by their mothers reported feeling responsible for "seducing" their mothers. However, one was confused about his ability to engage in sexual relations with his mother and two were confused about comments their mothers had made to them. The males abused by their mothers did not want to share the details of their abuse with others in part because they believed that since their fathers did not help them, no one else would be likely to help them either. Similar to the finding of Fradkin (2012) and van der Kolk (2007), who also discussed CSA victim's inability to trust others as a barrier to disclosure, most participants in this study stated they could not trust anyone enough to disclose. Some went to great lengths to hide their abuse for this very reason.

Aside from these consistencies with past research, one inconsistency was also noted. Alaggia (2005) found that forty two percent of her participants had disclosed their abuse during childhood, whereas none of the males in this research (whose abuse began before age 10) made disclosures until later in life (though some did not initially recognize their abuse as sexual abuse). Alaggia also identified the fear of being labelled homosexual as a significant barrier. There was only minimal mention of this by the present participants. However, over half admitted experiencing confusion in regard to their sexuality after having been abused by a male offender.

The first question this research specifically intended to address was: 1) How do boys, and later men, who experienced childhood sexual abuse, perceive others may react and respond if they disclosed their abuse?

When males consider disclosing, they first reflect on how they perceive others will react or respond to them. Participants in this research indicated that they worried they would be negatively judged by their family and/or friends if they disclosed their abuse. They were concerned others would treat them differently, pity them, look down upon them, or abandon them. Over half of the participants in this research worried they would be ostracized, abandoned or blamed for not stopping their abuse sooner, for “allowing” their abuse to have taken place, or for having “participated” in homosexual acts. Some feared their masculinity and sexuality would be questioned. They also worried that they would be deemed to be “perverted” or “crazy”, one worried he might be thought of as a future offender. Having a diminished sense of self-worth after being abused can lead victims to believe they are not worthy of assistance, or that no one will help them. These findings are similar to the reports of Alaggia and Millington (2008), Fradkin (2012) and Lew (2004), who discussed feelings of inferiority and a fear of being

negatively judged could act as antecedents to non-reporting.

Over half of the participants in this research presumed that they would not be believed. The same number worried that if they made a disclosure that nothing would be done to help them. Some simply did not believe anyone could or would actually help them if they disclosed. Others questioned if they could not tell their parents, whom could they tell? These findings are similar to the reports of Nasjelti (1980), who also found that boys feared that either nothing would be done or that they would not be believed, and Jensen, Gulbrandsen, Mossige, Reichelt and Tjersland (2005), who found that children feared that their experiences would be trivialized, or that things would “get out of control” if they did disclose (p.1408 -09). Over half of the participants in this study worried that they would face worse consequences if they disclosed. This reality was confirmed by those who tested the waters of disclosing and were physically beaten for attempting to seek help. Similar outcomes were reported by participants in this research who stated that their initial disclosures were minimized or ignored. A few were blamed for cooperating with their abusers and others were met with secondary abuse by the person they disclosed to.

Of those who had at least one non-abusive parent, several perceived that their non-abusive parent was either emotionally unavailable or that they would be unwilling or unable to assist them. Some feared interventions may cause their parents to be sent to jail and their siblings to be separated. They feared what may happen to them if they were placed in foster care and believed that things could get worse for them if others tried to intervene. Most assumed their family life would be seriously disrupted or that their disclosure would ruin their family’s reputation. Over half also feared the information of their abuse would be too hard for their parents to handle. They worried that learning about their abuse would cause their parent to decompensate, resort to

the use of alcohol, or have a heart attack.

These findings are consistent with those of Hunter (2011) who also identified barriers to disclosure as: lack of positive family environment, culture, fear of punishment, fear the abuser will move on to other victims, fear of not being believed, feelings of responsibility, self-blame, shame, confusion about homosexual desires, fear about being labeled as 'homosexual' and fear of what might happen within the family. Hunter also established that male disclosures are often not well-received, encouraged, supported nor believed.

The second question this research sought to answer is: 2) How do these perceptions or beliefs make victims of CSA react and respond?

Over half of the participants in this study identified that the anticipated negative responses of others acted as a strong deterrent. They identified that although they had at least one parent who was not sexually or physically abusive, since that parent was emotionally unavailable to them, they each remained silent until much later in life. Several of these males internalized their parent's lack of capacity to support them and thought of themselves as unworthy, unlovable, responsible, damaged, broken or otherwise flawed (Gartner, 2000a; Pinto-Gouveia & Matos, 2011). Most coped by either dissociating, isolating, avoiding and/or attempting to numb themselves from the pain. Others buried their memories, often times while tolerating further abuse.

In the end, all but a small minority made the decision that disclosing their abuse was a bad idea (Nasjleti, 1980). Most were too overwhelmed with emotions of fear and/or thoughts of not being believed or abandonment. They worried that exposing their abuse, intimate thoughts and vulnerabilities to another person would completely destroy them (Barrell & Jourard, 1976; Valerio, 2011) and made the decision to remain silent. Most waited until adulthood when they

felt stronger, more supported and were less reliant on others for emotional, physical and financial support. Conversely, some chose to view their abuse as less distressing than it was (Gartner; Fradkin, 2012) or made the decision not to not think about it.

Alternately, feelings of guilt, shame and worry that they would be negatively judged by others caused some participants to build emotional walls around their experiences that were too painful to share. Having these feelings contributed to their desire to remain silent and caused some to withdraw socially (Alaggia & Millington, 2008; Fradkin, 2012; Lew 2004; van der Kolk & McFarlane, 2007). The sense of isolation and lack of awareness of any other males ever experiencing or discussing sexual abuse also contributed to their desire to remain silent. Anxiety, fear, helplessness and hopelessness about their future also likely contributed to the development of pathologies including DID, anxiety disorder, PTSD and clinical depression (Perry & Szalavitz, 2007; Rothchild, 2000). Feelings of shame, guilt and confusion were discussed by all participants to one degree or another.

The third question this research sought to answer was: 3) What are the decision-making processes that male victims of CSA engage in when considering whether or not to disclose their abuse to either a care provider, person in a position of authority, or supportive friend?

Prior to making a disclosure, several participants considered whether or not they believed making a disclosure would benefit them or if it would make their situation worse. During this deliberation process, just under half made the decision to test the waters by disclosing lesser information to see how others would respond. In the end, after having received a negative response, over half made the decision that there was no point in disclosing. They believed that no one would be willing or able to help them and remained silent until they were well out of their abusive environments. This process is consistent with the approach and avoidance theory of

disclosure (Omarzu, 2000).

Of those who were close to their family members, each considered carefully what they thought their individual family's response may be. They also considered the pain they may cause to their family members and the possible negative outcomes within their family. Furthermore, they considered what disclosing might do to their sense of family, to their family as a unit, and/or to their family's reputation in the community. In the end, each decided that the pain or damage they may cause would be worse than the relief they may feel by disclosing, and each chose to remain silent for a period of time. A majority remained silent in part to protect their sense of family or their family's reputation, or to protect a parent from information they thought would be too hard for them to handle.

Among those who had close friends, each considered whether or not they felt their friends would reject or abandon them, pity them, or treat them differently if they learned about their abuse. Those abused by males also considered whether they might be labelled as homosexual and/or rejected for having engaged in sexual acts with other males.

The final question this research sought to answer was: 4) What were the environmental, cognitive and emotional contexts associated with this decision-making process?

Environmentally, of those who were residing in homes with their abuser, each described having a non-sexually abusive parent that was physically abusive, emotionally neglectful or otherwise emotionally unavailable to them (Hunter, 2011). Cognitively, since most of them held out little hope of intervention, they coped by counting the years until they could be free from their abusive homes. A few stated that they remained silent in part to protect their family's reputation within their religious community. Others remained silent due to feelings of shame, guilt and confusion. Emotionally, several felt prevented from discussing their abuse since their

family had a reputation to maintain. Spiritually, some who had been active in their faith prior to their abuse became resentful because their abuser had been strongly connected to their belief system. Most lost faith in God for having ‘allowed’ their abuse to occur.

Sorsoli, et al. (2008) identified personal, relational and sociocultural obstacles as barriers. Similar results were found in this research. Participants in this research identified personal obstacles, including a lack of cognitive awareness, intentional avoidance, emotional readiness, safety, and shame. Emotional and relational barriers included that they did not feel ready to disclose their abuse and they worried about their emotional safety should they disclose. In childhood, they reported feeling shame about having had their experiences. Later, they felt guilt for not having stopped their abuse sooner and confusion over their sexual identities. Common relational barriers observed included: the fear of negative repercussions such as the breakdown of their families or the loss of necessary support systems. Several participants feared a disclosure would make their situations worse and that they would not get the help they needed. Others felt it would simply be too hard for others to hear about.

Socio-culturally, Sorsoli et al (2008) also reported that their participants experienced a “double bind” of shame and reluctance to share their histories “while simultaneously expressing shame for not telling earlier” (Sorsoli et al., p. 341). Similarly, a few males in this research stated they too had been caught in a shame-filled double bind. They had remained silent in part because of messages they had received about what it means to be a man. Their fears of disclosure included worry about being seen as a victim, weak, or homosexual, however, these same males also perceived themselves as weak, guilty and responsible for not stopping their abuse sooner. Though having waited a period of one year was a prerequisite for participation in this research, overall very few actual experiences of disclosure were made in the participants’

youth and early adulthoods. Furthermore, participants in both studies also stated that it did not occur to them that they could tell, or that their abuse was considered sexual, indicating that their lack of awareness hindered their disclosure. Also similar to the findings of Sorsoli et al., those that had disclosed were met with “disastrous” results.

Cumulatively, the findings in this study represent the ongoing process of struggle that males face when considering disclosure and must be viewed through the lens of the trauma that each experienced. Although not discussed as a reason for non-disclosure, several participants advised that they developed a mental illness that they believed to be a direct result of the sexual traumas they each experienced. (Eight participants were diagnosed with post-traumatic stress disorder (PTSD), three developed dissociative identity disorder (DID), and one was diagnosed with a conversion disorder.) To understand the impact that CSA has on a male’s ability and desire to disclose, non-disclosure must be understood as a symptom of trauma, and disclosure must be understood as a process of learning to trust all over again, or perhaps for the first time. Furthermore, the symptoms of their trauma must not only include how the abuse affected them physiologically, but how it tainted the way they feel about themselves and how they view others around them.

Answers to the question of why these males wait so long to expose their abuse is explored next.

**Why do males wait so long?** Overall, the length of time waited to make a disclosure after their abuse stopped varied between one and 59 years. A few participants attributed the bulk of their wait-period to memory loss issues that resolved themselves much later in life. When they were away from their abusive relationship and in safer places their memories came back to them. Several others had memory loss for shorter periods of time, could recall only glimpses of their abuse, developed dissociative identity disorder, or were simply too traumatized to want to

discuss their abuse with anyone.

A majority remained silent in part because they were confused about their degree of participation and feared being blamed, labelled or socially rejected. They also feared for their safety and/or felt completely hopeless and isolated. Others remained silent out of fear that their lives were in jeopardy if they disclosed, or because they were completely dependent on their abusers both physically and financially. They believed no one else could help them and worried that their situations could be made worse if they sought help. A few could not believe that their abuse went on undetected and wondered why no one tried to help them. They became instilled with a sense of hopelessness that anyone would ever help them which also contributed to their silence.

Over half of the participants in this research reported that strong feelings of shame associated to not having stopped the abuse sooner or for the abuse having taken place acted as barriers to them. Shame has a disruptive interpersonal impact on a victim's sense of wholeness. It is deeply rooted in self-esteem and intimacy, which is greatly impacted during abuse. A majority reported feeling shame and guilt for having been physiologically aroused, or for being a burden to their families. When this shame transferred to their identity, they began to believe they were shameful (Brown, 2012). To avoid feelings of shame, some withdrew from friends and family (Alaggia & Millington, 2008; Fradkin; van der Kolk). Others withdrew out of fear they might accidentally disclose (Alaggia, 2005). A few drank or used illicit drugs to help them forget their abuse, and waited years to make their eventual disclosure. These findings are consistent with the reports of Gartner (1999) and Sorsoli et al. (2008) who also discussed shame, guilt and confusion over sexual orientation.

Some remained silent because they feared that if they disclosed to their parents the burden

would be too much for them to bear. After observing their parents' negative responses to strong emotions in the past, they learned they were not capable of handling them and made the decision to protect them rather than burden them further. Similarly, a few worried that disclosing to their parent(s) might cause them to decompensate. They needed their parent(s) to remain strong and provide them with stability or they would fall apart. Since they already lived in high states of distress, the risk of losing what helped to keep them together was considered too great. Conversely, several stated that they never said anything to anyone, in part because they didn't realize how badly their abuse had affected them and also because they had chosen to try and block it out.

While each of the reasons reported for having not disclosed their abuse as a child was valid for them at that time, these reasons changed or developed into additional, or new and more complex, reasons as they matured. Most of those who were not obstructed by involuntary memory loss became consumed with shame, guilt, and confusion. They remained silent in part because they did not want to chance being rejected by their peers or families, or to protect their family's reputation.

Several participants also explained that they grew up in "different times", when male abuse was not discussed or even known to exist. Addis and Mahalik (2003) stated that men are less likely to seek help or disclose problems unless they see others doing the same. Consistent with this, although a few did disclose to friends, they did so only after hearing them discuss their abuse first. Unfortunately, the avoidance of communication about painful situations, though seemingly helpful in the moments for managing situations, can have detrimental effects on a person's ability to thrive and grow (Greenberg & Watson, 2008; Weston, 2005). Avoidance versus processing of strong emotions, coupled with confusion, may have led several of the

participants to become depressed or angry and live in isolation. Although they had initially avoided discussing their abuse, each male in this study eventually did make a disclosure to someone prior to participating in this research. What prompted their disclosures is reported next.

**What prompted them?** Participants in this research had many different reasons for why, when and where they finally disclosed. Among those initially living with their abusers, just under half waited to make disclosures until they were more physically mature, no longer dependant on their abusers, away from that environment, and well established in supportive relationships. Some reported that when they reached adulthood they made the decision to disclose. They stated that intense fear and anger triggered by becoming a parent for the first time, or feeling guilt or shame for simply caring for their infant children, prompted them to disclose. Others made disclosures when they were faced with a crisis such as having their memories suddenly return to them. One disclosed after his abusive mother committed suicide and he felt the need to explain the reasons why to his grandmother.

Consistent with the findings of Sigurdardottir, Halldorsdottir, and Bender (2012) who found that males only made disclosures after hitting rock bottom and when faced with the decision of discussing their abuse or committing suicide, a few participants made disclosures because they felt like they may implode or take their own lives if they didn't. Others did so because they knew they needed to stop using self-destructive coping mechanisms. Some made disclosures because they finally felt safe enough to do so, or because they wanted someone significant in their life to understand why they were behaving so strangely or aggressively.

Consistent with the results of Hunter (2011), one participant who was a father stated that the anger he felt in adulthood was a strong motivator affecting his eventual disclosure. He disclosed to the authorities to put legal sanctions in place to stop his parent/offender from having

access to his children should something happen to him and his wife. This same male reported he had also told his previous sexual partners in order to explain why he had what he felt was an unusually high sexual appetite, and to explain why he sometimes woke up screaming. He also eventually told some of his friends to explain why he hated his mother so badly. Another discussed his abuse with a counsellor because he hated feeling guilty about changing his daughter's soiled diapers. One disclosed to his brother unintentionally when he thought his brother knew he'd been victimized.

Several participants stated they began seeing a therapist for reasons other than to discuss their abuse. They disclosed their abuse only after several years of learning to trust them. A few were initially unaware they were being sexually abused and either had their memory recall prompted by a therapist, or had a therapist enlighten them that what they had experienced was sexual abuse. These lengthy time delays signify how difficult it can be for males, even when they are seeking help, to discuss their abuse for the first time.

**What has this study added to the literature?** Past studies examining disclosure have predominantly focused on how and when adults disclose or the emotional cost of not telling. While the sexual abuse of males has increasingly been documented, little research has specifically examined why males so seldom report their abuse (Sosoli et al., 2008). Nor has there been much research that specifically targeted their reasons for non-disclosure or examined why males take so long to make disclosures, and what prompted their eventual disclosure among those who do (O'Leary & Barber, 2008). This research provides information and insight into the specific yet deep-rooted emotional, physiological and socio-cultural barriers boys and men face when considering disclosing. It offers understanding in regard to their thought processes and struggles, and highlights reasons for their ambivalence. Moreover, it offers insights into how

their struggles changed as they matured, and also as society evolved. It also provides insights into why, when and how males eventually come to disclose.

Furthermore, this research helps to combat a few myths. Two myths that are refuted are: that male sexual abuse rarely occurs outside institutional settings, and that it is less damaging than female abuse. None of the males in this study were in institutions when they were abused, and all of the victims in this research suffered profoundly from their abuse. Several underwent significant changes to their personality, sexuality and sexual identity as a direct result of their abuse. Others suffered significant on-going physiological distress. Some were so distressed they habituated to the experience or became so traumatized they dissociated. Others buried their memories entirely and developed pathologies. Additionally, this research revealed clearly that these men could be any man in our society – a lawyer, doctor, teacher or millworker; perhaps an uncle, a cousin, a son, or the man living next door.

It also refutes a third myth that men who have endured sexual abuse during childhood will become abusers in adulthood (Sigurdardottir, Halldorsdottir, & Bender, 2012). No males in this research reported fearing they may become an offender, and only one reported fearing others may perceive he would become an offender. This finding may be attributed to an increase in social awareness that males are also capable of being victims, and acknowledgement that being a victim does not automatically predispose males to become offenders. Growth in the literature on this topic may be the combined effects of increased awareness of males as victims, increased knowledge about help-seeking behavior, increased openness to discussing personal issues, and by the fact that we are becoming a more open and accepting culture generally.

### **Considerations and Future Research**

Past research on male victims focused on the lifetime struggles and consequence of being

victimized, what helped them to disclose, the process of disclosure, and the influences that affected their eventual disclosure. Some was conducted as a joint effort or bi-product of other research on females or placed a restriction on the participants that they must be succeeding in at least one area of their life. Most were not designed to specifically and exclusively target the male experience of non-disclosure. This research did specifically target the reasons why males do not disclose and their cognitive processes during their period of non-disclosure. Pre-requisites included that they had waited at least one year to disclose, were willing to discuss their reasons for non-disclosure, and that they had been a victim of at least one contact sexual offence.

Since the majority of participants for this project came from the same venue, a conference for male survivors of sexual abuse, and the others came from an institution supporting male survivors, the men interviewed were interested, invested and engaged in the issue of male survivors, whereas many male victims may choose not to be. It is likely that victims who choose not to disclose may not want to be involved in the progressive movement toward acceptance of males as victims. Also, those who remain unaware of the impact of their abuse, or of the resources that are now available for men, may have different perspectives, experiences and thought processes in regard to their non-disclosure experience. Males from more diverse cultural backgrounds and ethnographic environments may also have differing reasons for non-disclosure.

It is also important to highlight that the contextual view of this study was reflective in nature. All of the participants' interpretations and views of the struggles and barriers they faced were reported from their historical perspective, but with their current knowledge and understanding. For some, the abuse they suffered took place decades ago. It is possible they may have failed to remember, recognize or understand some of the reasons they did not previously disclose. They may see their reasons for non-disclosure through a slightly differently lens now,

perhaps with more or less emphasis on certain features than what they felt at the time of their abuse, based on their present worldview.

Given that past research highlights a clear reluctance to seek help, a study specifically examining the perceived benefits of non-disclosure is needed. Males in this study indicated that the thought of having people look at them differently, treat them differently or abandon them, based on the knowledge that they had been victims of CSA, was devastating to them. A study specifically focusing on the perceived positive aspects of remaining silent may provide further information about how victims use non-disclosure as a means to maintain their sense of dignity after having been violated. Alternately, a study specifically examining the perceived and actual consequences of reporting may also be useful to further the knowledge base.

Finally, a retrospective study examining males abused between the ages of 15 to 18 exploring the impact of abuse on perceived sexual identity (as observed by them), both pre and post abuse, may be helpful for understanding confusion and the effects of abuse on sexual identity. It may also highlight the impact of abuse on sexuality.

### **Practical Implications**

Several participants in this research offered their opinion in regard to what may have helped them to disclose earlier. Included among these suggestions was that they would have needed to be educated not just about sexual issues, but also about sexual abuse. Furthermore, since their abuse started early, they would have needed this education early in life. **Practically, this indicates that when parents or teachers are discussing sexual education, they foster open lines of communication to encourage children to be able to share their experiences. They cannot assume that someone else is teaching children about these issues or that they will learn them instinctively. Placing the burden to prevent abuse through creating awareness in children is not**

ideal. Although we cannot frighten children, we need to develop ways to protect them more effectively. Given the research which indicates that one in six males and one in three females is abused prior to the age of 18 – coupled with findings of this research indicate that creating better avenues for disclosure be encouraged. Information about common grooming techniques used by offenders is important for parents and adults to better understand. In sexual education programs it is important to ensure that the topic of appropriate relationships be included. Information about what to do if they are exposed to inappropriate conduct, including whom to tell in their communities, should also be included within sexual education discussions.

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Participants in this research stated they would have needed to know there were reliable resources that could and would help them and they needed to know they would be safe. As children, some would have needed to be physically removed from their abusive home environments and made to feel safe before they ever would have disclosed their abuse. This begins by having helping professionals (teachers, nurses, doctors, police officers, counsellors, etc.) be consistent and persistent in following through with discussions about abuse and what resources are currently in place to assist children when they suspect a child is being abused. Awareness must be created through providing psycho-education in university programs and professional training in regard to common or typical responses to CSA. This psycho-education must include information about how children may act out, isolate or test them through making lesser disclosures first to see if they can trust the person, and that children who don't groom themselves appropriately or always wear the same clothing may be being abused or neglected. Information must be provided about what to do when they receive partial disclosures. This includes that they must make careful observations, practice patience and build trust with those they suspect may be being abused, and that they must create environments of safety in order to

assist them with making disclosures. Education must also include information about how sexual abuse can happen to children from any cultural, socio-economic status or religious background.

Outside of educating children earlier and helping professionals more thoroughly, we must also work to educate others in society about male abuse. We simply must talk about it. We must share information about the prevalence of male abuse and about the long-term, damaging effects that it has on male victims and on their future ability to both have and sustain relationships. Similarly, we must also strive to reduce or eliminate the shame experienced by adult male victims by failing to support gender biases that suggest males are not, cannot, or should not be victims. We must help males to understand that they are entitled to all of the same rights and emotions as females. That they have the right to choose where, when and with whom they have their first sexual experiences, and that if they are approached by family members, or older people attempting to coerce them into engaging in sexual acts prior to having their own knowledge, understanding and desire to engage in them, it is considered abuse, just as it would be if they were female.

This research highlights the reality that abused children often fail to disclose to helping professionals who are attempting to intervene. A currently accepted response by professionals who attempt to intervene when they suspect there is a child being abused, is not to ask pointed or exploratory questions. They refrain to preserve the integrity of the investigation and the possibility of laying charges, and to prevent false claims of abuse. This was the case for two participants in this research. (One participant stated he believes he would have spoken about his abuse if he had known what the psychologist was interested in knowing, and if he had known that what he was experiencing at home was sexual abuse. The other stated he would not have disclosed since he did not trust that his psychologist could help him.) Helping professionals

commonly refrain from asking closed or pointed questions to avoid false disclosures. While false claims of abuse are problematic, greater emphasis must be placed on the overall mental health and physical safety of the children they are seeking to protect. In the interest of rescuing sexually exploited children, professionals must place less weight on preserving charges and preventing false claims and more emphasis on protecting the child's long-term welfare.

Victims of sexual assault, especially those who are confused about what happened to them and their level of responsibility, cope with the emotional aftermath of their abuse experience in many different ways. Many seek to have positive corrective experiences that manifest in the form of promiscuity or sexual acting out. This is done often to prove to themselves and others that they are heterosexual and/or that they were not harmed by their abuse. Some do the opposite; they essentially re-create the events, possibly even with their same offender to 'prove' to themselves that they were not raped, but rather willing participants in control of their abusive situations. They do so since the idea of being a victim is socially and subjectively unacceptable for males. As care providers, we must recognize and educate victims in regard to these as symptoms and common responses to sexual trauma. Taking these important steps could help males feel safer to get the help they need sooner.

Currently, there appears to exist a fear of discussing the issue of arousal both inside and outside the professional agenda. Perhaps the fear is that any statements made will be misinterpreted or taken out of context and lead to misunderstandings. These fears are believed to deter helping professionals from discussing arousal. However, providing psycho-educational information about arousal in response to trauma can reduce the fears and confusion felt by victims. Although professionals may fear that by discussing arousal that occurs during abuse they are supporting a rape fantasy, what must be reconciled is that fantasizing about being

submissive to someone you are attracted to and wanting to have a sexual relationship with, is a pleasurable idea for most. These types of fantasies are natural and far removed from the reality of what happens in abusive situations. In real life when victims are assaulted they are not willing participants and the acts committed against them are traumatizing not pleasurable.

The findings of the present study suggest that psychologists, counsellors and therapists, must understand that even as adults, males often do not recognize that what they experienced was abuse, nor do they recognize the significant impact it had on their lives. Regrettably, common perceptions that males hold about what a victim looks like, and what rape is, also greatly affect males' ability to see themselves as victims. Other common reasons males discount themselves as possible victims include their size, strength, and the fact that as adults they are commonly the initiators of sexual activities. When broaching the subject with clients, care providers must be careful with the language they use. Many psychological terms are loaded with subjective messages. For example, gendering the word sexual assault to male sexual assault infers that it is so rare as not to really be a problem. Similarly, the labelling of male-on-male rape implies that at least one of the perpetrator or victims was homosexual and is misleading. As Fuchs (2004) states researchers have found that:

even when rape is defined as 'gender-neutral,' it is still assumed that male sexual violence can only be perpetrated by homosexual males; thus, reducing rape to its sexual connotation. Yet, the majority of research indicates that male victims are more likely to be raped by heterosexual men than homosexual men (p. 105).

This research also provides information that currently male victims of sexual abuse often have a two-fold experience of shame. They experience shame about having been abused and shame at the thought of disclosing their abuse. Psychologist, researcher and public speaker Brene Brown (2012) differentiated shame as the feeling, "I am bad" or "I am somehow not good enough". She explains that shame is "a fear of disconnection", whereas guilt is: "I did something

wrong” (Brown, 2012). Shame triggers a fear of rejection and is felt from the inside out (Brown). Victims even experience shame when no one was watching. Such was the case for many participants in this research who looked inward, saw negative observations of themselves and believed that everyone would see them in this same manner, as damaged, devalued and diminished goods.

Kaufman and Raphael (1996) relay shame as one of the most powerful and disturbing human emotions, the experience of which involves seeing oneself as both painfully diminished and overly transparent to others. Because it is so distressing, people often try to hide it from view, escape or even deny that it exists. Kaufman and Raphael explain that shame often feels impossible to discuss since it is self-validating. In the moment that people feel shame, they also feel they deserve to feel badly. In this manner, shame causes CSA victims to re-experience the shame that they so desperately longed to escape (Brown). Such was the case for participants in this research. The silence they lived with seems to have reinforced, strengthened and even validated their shame.

Shame is an experience of the self by the self. It causes people to feel deeply divided both from themselves and others. According to Brown, feeling devalued can then lead to a sense of inadequacy, which again triggers shame. The emotion is “related to having let oneself down” (van der Kolk & McFarlane, 2007). Participants in this research supported Brown’s (2012) idea that victims are often made to feel lesser or inferior. They are devalued by their offenders, who isolate them and use them for their own sexual, physical or emotional gratification. They are alienated first by their abusers who do not generally concern themselves overly with their emotional or physical needs, then by themselves for becoming damaged.

In the context of a therapeutic environment, helping professionals can encourage male

disclosures through providing psycho-educational information about the prevalence of male abuse, understanding common physiological responses to sexual abuse and addressing some of the psycho-social barriers males face. Discussing typical social responses to early male sexualisation, same sex abuse and victim labelling may reduce the sense of isolation males often feel. It may also help facilitate disclosures. Similarly, exploring the purpose behind common destructive coping mechanisms like substance abuse, sexual acting out, anger, avoidance and criminal activity may help therapists recognize the possibility of sexual abuse. When helping professionals fail to engage with clients about issues associated to their shame it re-engages their shame. “What cannot be openly expressed is perceived as too shameful to speak about” (Kaufman & Raphael, 1996. p. 10).

For a short period, there was a succession of male public figures that made disclosures, which may have created safety, awareness and opportunities for other males to feel safer to follow suit. However, the pace of these has since fallen off (Hartill, 2014), and male rape is still largely not discussed. Rather, it is concealed by the victims themselves and suppressed by our society that is not yet prepared to discuss it. Rape and sexual assault and violence also remain undetected by therapists who fail to recognize or consider males as victims.

One participant in this research disclosed that when he attempted to discuss his abuse with his therapist, the therapist minimized it as child’s play, “something all children do”. Where it remains, therapists must come to fully appreciate the concept that just like with female victims, cooperating with an offender does not equal consent. When victims do not have the emotional maturity or mental capacity to understand what they are consenting to, they cannot give consent. This concept applies irrespective of their physical or emotional response to their offenders, or their physiological response to abuse.

Although it is more commonly accepted now that men are raped in prison, and that ill-intentioned coaches or priests succeed in abusing young boys, the ideas of incest and acquaintance abuse are still concepts that are hard for many to grasp. Accepting that an adult male might be sexually assaulted outside of an institution is also a hard concept for many to comprehend since the very idea of male abuse still breaches many 'standards' of masculinity. Subsequently, as was the case with a few participants in this research, male victims are often doubted, blamed, criticized, mocked and shamed into silence, often well before ever having considered or attempted any sort of disclosure.

We do live in a slightly more accepting and aware era since people today are far more open to discussing sexual matters and matters of abuse than in years past; however, we still have a long way to go. Male rape is still the subject of many jokes, minimized and ignored. Nonetheless, compared to 40 years ago, when researchers first began examining males as victims, there has been forward momentum. First, in general, children's needs and rights are held in higher regard, and legislation is starting to change to reflect this. As of May 2013, just five months prior to this data being collected, Alberta instituted the Children's First Act – a children's charter of rights that now dictates that society has a moral position to protect children, but it must be implemented for it to work. Second, the laws in Canada, the United States and Europe have also changed to include males as victims, and to include anal rape as a form of rape.

### **Researcher Reflections and Conclusion**

The present project highlighted the complexity, magnitude, prevalence and multi-dimensional barriers to disclosure that boys and men face in modern western culture. It highlighted both individual and common struggles that differ depending on their environments, relationships to their abusers, and their pre and post abuse support systems. What is clear is that

the reasons males do not disclose are deeply rooted and span across every area of their lives - past, present, and future.

Putting faces and names to the abuse victims in this project was difficult. As a former police officer, I was used to investigating child sexual exploitation cases; however, the victims generally remained anonymous to me. Nonetheless, creating the opportunity for these men to help professionals to help them was rewarding. Hearing and seeing what these men have overcome or are working to overcome, and considering the massive barriers they faced, gave me hope. Going forward, psychologists will have great difficulty breaching the same barriers that male survivors face. However, open public discussions on these matters can help significantly. Research shows that men do not typically want to be seen as atypical. They do not want to discuss that which has not already been discussed. Creating venues where it is socially acceptable for males to talk about their abuse experiences and their feelings about their abuse experiences is key. It is through this method only that males will begin to feel safe enough and supported enough to come forward and have opportunities to heal and thrive.

### References

- Abel, G., Becker, J., Mittelman, M., Cunningham-Rathner, J., Rouleau, & Murphy, W. (1987). Self-reported sex crimes of nonincarcerated paraphilics. *Journal of Interpersonal Violence*, 2(1), 3–25. doi:10.1177/088626087002001001
- Addis, M. E., & Mahalik, J. R. (2003). Men, masculinity, and the contexts of seeking help. *American Psychologist*, 58(1), 5–14. doi:10.1037/0003-066X.58.1.5
- Alaggia, R. (2004). Many ways of telling: Expanding conceptualizations of child sexual abuse disclosure. *Child Abuse and Neglect*, 28, 1213–1227. doi:10.1016/j.ciabu.2004.03.016
- Alaggia, R. (2005). Disclosing the trauma of child sexual abuse: A gender analysis. *Journal of Loss and Trauma*, 10, 453–470. doi:10.1080/15325020500193895
- Alaggia, R., & Millington, G. (2008). Male child sexual abuse: A phenomenon of betrayal. *Clinical Social Work Journal*, 36, 265–275. doi:10.1007/s10615-007-0144-y
- Alaggia, R., & Mishna, F. (2014). Self psychology and male child sexual abuse: healing relational betrayal. *Clinical Social Work Journal*, 42(1), p. 41-48, doi: 10.1007/s10615-013-0453-2
- Artime, T. (2014). Men's acknowledgement of their sexual victimization experiences. *Psychology of Men and Masculinity*, 15(3), 313–323. doi:10.1037/a0033376
- Baker, A. W., & Duncan, S. P. (1985). Child sexual abuse: A study of prevalence in Great Britain. *Child Abuse and Neglect*, 9, 457–467. doi:10.1016/0145-2134(85)90054-7
- Baljon, M. (2011). Wounded masculinity: Transformation of aggression for male survivors of childhood abuse. *Person-Centered & Experiential Psychotherapies*, 10(3), 151–164. doi:10.1080/14779757.2011.599512

- Bancroft J. (2002). Sexual arousal. In: Nadel L, editor. *Encyclopedia of cognitive science. Nature Publishing*; p. 1165–8.
- Bancroft, J. (1979). Psychophysiology of Sexual Dysfunction, in *Handbook of biological psychiatry* 359 (Herman M. van Praag ed., M. Dekker, 1979).
- Bancroft, J. (1993). Impact of Environment, Stress, Occupational, and Other Hazards on Sexuality and Sexual Behavior *Environmental Health Perspectives, Supplement (2) 101, 101-10*.
- Barrell, J., & Jourard, S. M. (1976). Being honest with persons we like. *Journal of Individual Psychology*, 32, 185–193. Retrieved from <https://utpress.utexas.edu/index.php/journals/journal-of-individual-psychology>
- Blumer, H. (1969). *Symbolic interactionism: Perspective and method*. Englewood Cliffs, NJ: Prentice-Hall.
- Bogdan, R., & Biklen, S. (1998). *Qualitative research for education*. Needham Heights, MA: Allyn & Bacon.
- Bordo, S. (2000). *The Male Body: A new look at men in public and in private*. New York, NY: Farrar, Straus & Giroux. Institute of General Semantics.
- Boyd, J., & Beail, N. (1994). Gender issues in male sexual abuse. *Clinical Psychology Forum*, 64, 35–38. Retrieved from <http://www.clinicalpsychologyforum.co.za/>
- Brackenridge, C. (2003). Dangerous sport? Risk, responsibility and sex offending in sport. *Journal of Sexual Aggression*, 9(1), 3–12. doi:10.1080/1355260031000137922
- Braun, V., & Clark, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*. Vol. 3, 77-101.
- Brown, Brene (2002) *Listening to Shame*. Ted Talk, TedxHouston.

- Bullock, C., & Beckson, M. (2001). Male victims of sexual assault: phenomenology, psychology, physiology. *Journal of the American Academy of Psychiatry and the Law Online*, 39:197–20.
- Burstyn, V. 1999. *The rites of men: Manhood, culture and the politics of sport*. London, ON: University of Toronto Press.
- Burt, D. L., & DeMello, L. R. (2002). Attribution of rape blame as a function of victim gender and sexuality, and perceived similarity to the victim. *Journal of Homosexuality*, 43, 39–58.
- Carreiro, D. (2016, May 02). Veteran Winnipeg police officer researches child sex trade for solutions: Officer ‘passionate’ his research of sex trade survivors will help stop exploitation. CBC News. Retrieved from:  
<http://www.cbc.ca/news/canada/manitoba/veteran-winnipeg-police-officer-researches-child-sex-trade-for-solutions-1.3559949>
- Colton, M., Roberts, S., & Vanstone, M. (2010). Sexual abuse by men who work with children. *Journal of Child Sexual Abuse*, 19, 345–364. Retrieved from <http://www.ncbi.nlm.nih.gov/pubmed/20509081>
- Corby, B. (2000). *Child abuse: Towards a knowledge base* (2nd ed). Buckingham, UK: Open University Press.
- Coxell A., King, M., Mezey, G., Gordon, D. (1999). Lifetime prevalence, characteristics, and associated problems of non-consensual sex in men: cross sectional survey. *British Medical Journal*, 318, (7187), p. 846-850.
- Coxell A., King, M., Mezey, G., Kell, P., (2000). Sexual molestation of men: interviews with 224 men attending a genitourinary medicine service. *International Journal of STD and AIDS*, 11(9), 574-578.

- Creswell, J. (2013). *Qualitative inquiry & research design: Choosing among five approaches*. Thousand Oaks, CA: Sage.
- Creswell, J. (2008). *Research design: Qualitative, quantitative, and mixed method approaches*. Thousand Oaks, CA: Sage.
- Crotty, M. (2012). *The foundations of social research: Meaning and perspective in the research process*. London, UK: Sage.
- Cutajar, M., Mullen, P., Ogloff, J., Thomas, S., Wells, D., & Spataro, J. (2010). Suicide and fatal drug overdose in child sexual abuse victims: A historical cohort study. *Medical Journal of Australia*, *192*(4), 184–187. Retrieved from <https://www.mja.com.au/>
- D'Andrea, W., Stolbach, B., Ford, J., Spinazzola, J., & Van der Kolk, B. (2012). Understanding interpersonal trauma in children: Why we need a developmentally appropriate trauma diagnosis. *American Orthopsychiatric Association*. doi:10.1111/j.1939-0025.2012.01154.x
- Davies, M., & McCartney, S. (2003). Effects of gender and sexuality on judgments of victim blame and rape myth acceptance in a depicted male rape. *Journal of Community and Applied Social Psychology*, *13*, 391–398. doi:10.1007/BF02104099
- Dorias, M. (2002). *Don't tell: The sexual abuse of boys*. Montreal, QC: McGill-Queens University Press.
- Doucette, C. (2013, July 22). Theo Fleury helped change society's view of child sex abuse victims. *Sun News*. Retrieved from <http://www.sunnewsnetwork.ca/sunnews/straighttalk/archives/2013/07/20130702-082952.html>
- Dube, S., Anda, R., Whitfield, C., Brown, D., Felitti, V., Dong, M., & Giles, W. (2005). Long-term consequences of childhood sexual abuse by gender of victim. *American Journal of Preventative Medicine*, *28*, 430–438. doi:10.1016/j.amepre.2005.01.015

- Feminism. (2001). In *Random House Webster's unabridged dictionary* (2nd ed.). New York, NY: Random House.
- Fradkin, H. (2012). *Joining forces: Empowering male survivors to thrive*. New York, NY: Hay House.
- Fradkin, H. (2013, February 11). *Breaking the silence: Offering hope, healing & support for male survivors of sexual victimization*. Presentation at workshop for Helpers of Male Survivors That Experienced Sexual Victimization, Edmonton, AB, Canada.
- Fuchs, S. (2004). Male sexual assault: Issues of arousal and consent. Gadamer, H. (Eds.). (1975). *Truth and method*. New York, NY: Continuum.
- Gartner, R. B. (1999). Relational aftereffects in manhood of boyhood sexual abuse. *Journal of Contemporary Psychotherapy*, 29(4), 319–353. doi:10.1023/A:1022982806437
- Gartner, R. B. (2000a). Cinematic depictions of boyhood sexual victimization. *Gender and Psychoanalysis*, 4, 253–289. doi:10.1300/J236v03n02\_01
- Gartner, R. B. (2000b). Sexual victimization of boys by men: Meaning and consequences. *Journal of Gay and Lesbian Psychotherapy*, 3(2), 1–33. doi:10.1300/J236v03n\_01
- Gold, Steven (2001). *Not trauma alone: Therapy for child abuse survivors in family and social context*. Philadelphia, PA: Brunner/Routledge.
- Goldberg, H. (1977). *The hazards of being male: Surviving the myth of masculine privilege*. New York, NY: New American Library.
- Government of Canada. (2013): *Statistics Canada* [website]. Retrieved from <http://www.statcan.gc.ca/start-debut-eng.html>
- Greenberg, L., & Watson, J. (2008). *Emotional focused therapy for depression*. Washington, DC: American Psychological Association.

- Greenspan, E. L. (2010). *Martin's annual criminal code*. Aurora; ON: Canadian Law Book.
- Griffin, P., & Genasci, J. (1990). Addressing homophobia in physical education: Responsibilities for teachers and researchers. In M. Messner & D. Sabo (Eds.), *Sport, men and the gender order: Critical feminist perspectives* (pp. 211–222). Champaign, IL: Human Kinetics.
- G. Guest, K. MacQueen & E. Namey. (2011). *Applied thematic analysis*. Thousand Oaks, CA: Sage
- Halverson, H. (1940). Genital and sphincter behaviour of male infants. *Pedag Sem J Gen Psych* 1940;56:95–136.
- Hartill, M. (2009). The sexual abuse of boys in organized male sports. *Men and Masculinities*, 12(2), 225–249. doi:10.1177/1097184X07313361
- Hartill, M. (2014). Exploring narratives of boyhood sexual subjection in male-sport. *Sociology of Sport Journal*, 31, 23-43. doi.org/10.1123/ssj.2012-0216
- Heide Mundorf, E.S. (2013): *Childhood Abuse Survivors' Experience of Self over the course of Emotion Focused Therapy for Trauma: A Qualitative Analysis* (Unpublished doctoral dissertation provided by author). University of Windsor Scholarship at UWindsor. Windsor, ON.
- Holmes, G. R., & Offen, L. (1996). Clinicians' hypotheses regarding clients' problems: Are they less likely to hypothesize sexual abuse in male compared to female clients. *Child Abuse and Neglect*, 20, 493–501. doi:10.1016/0145-2134(96)00031-2
- Hopper, J. (2012). *Neuroscience, mindfulness & yoga for transforming trauma*. Presentation at the Summer Institute on Men, Trauma and Change, The Men's Project, Ottawa, ON, Canada.

- Huckle, P. (1995). Male rape victims referred to a forensic psychiatric service. *Medical Science and the Law*, 35, p. 187-192.
- Hunter, S. (2011). Disclosure of child sexual abuse as a life-long process: Implications for health professionals. *The Australian and New Zealand Journal of Family Therapy*, 32(2), 159–172. doi:10.1375/anft.32.2.159
- Janssen E, Vorst H, Finn P, Bancroft J. (2002). The Sexual Inhibition (SIS) and Sexual Excitation (SES) scales: Measuring individual differences in the propensity for sexual inhibition and excitation in men. *Journal of Sex Research*, 39(2), 127–32. doi:10.1080/00224490209552130
- Jensen, T., Gulbrandsen, W., Mossige, S., Reichelt, S., & Tjersland, O. (2005). Reporting possible sexual abuse: A qualitative study on children's perspectives and the context for disclosure. *Child Abuse & Neglect*, 29, 1395–1413. doi:10.1016/j.chiabu.2005.07.004
- Kane, M. J., & Disch, L. J. (1993). Sexual violence and the reproduction of male power in the locker room: The Lisa Olson Incident. *Sociology of Sport Journal*, 10(4), 331–352. Retrieved from <http://journals.humankinetics.com/ssj-back-issues/ssjvolume10issue4december/sexualviolenceandthereproductionofmalepowerinthelockerroomthelisaolsonincident>
- Kassing L., Beesley D., & Frey L. (2005). Gender role conflict, homophobia, age, and education as predictors of male rape myth acceptance. *Journal of Mental Health Counselling*, 27(4): 311–328.
- Katz, J. (2014, January 16). *Leading change*. Presentation at Workshop for Alberta Counsel of Women's Shelters, Edmonton, AB, Canada.

- Kennedy, S. (2006). *Why I didn't say anything: The Sheldon Kennedy story*. Toronto, ON: Insomniac Press.
- Lane, J., & Addis M. (2005). Male gender role conflict and patterns of help seeking in Costa Rica and the United States. *Psychology of Men & Masculinity*, 6(3), 155–168.  
doi:10.1037/1524-9220.6.3.155
- Langfeldt, T. (1990). Early childhood and juvenile sexuality, development and problems. In M. E. Perry (Ed.), *Handbook of sexology childhood and adolescent sexology*, 7. The Netherlands: Elsevier Science Publishers, B.V. (Biomedical Division); p. 179–200.
- Lanning, K. (2010). *Child molesters: A behavioral analysis for professionals investigating the sexual exploitation of children*. In cooperation with the Department of Justice Federal Bureau of Investigations. Retrieved from <https://www.ncjrs.gov/App/Publications/abstract.aspx?ID=255886>
- Leonard, E. D. (1996). A social exchange explanation for the child sexual abuse accommodation syndrome. *Journal of Interpersonal Violence*, 11, 107–117.  
doi:10.1177/08862609601100100
- Levin, R., & van Berlo, W. (2004). Sexual arousal and orgasm in subjects who experience forced on non-consensual sexual stimulation – a review. *Journal of Clinical Forensic Medicine*, 11, 82-88. doi: 10.1016/j.jcfm.2003.10.008
- Levine, P., & Kline, M. (2006). *Trauma through a child's eyes: Awakening the ordinary miracle of healing. Infancy through adolescence*. Berkley, CA: North Atlantic Books.
- Lew, M. (2004). *Victims no longer: The classic guide for men recovering from sexual child abuse*. New York, NY: HarperCollins.

- Lincoln, Y. S., & Guba, E. G. (1985). Establishing trustworthiness. In Y. S. Lincoln & E. G. Guba (Eds.), *Naturalistic inquiry* (pp. 290–331). Beverly Hills, CA: Sage.
- Lisak, D. (1994). The psychological impact of sexual abuse: Content analysis of interview with male survivors. *Journal of Traumatic Stress, 7*(4), 525–548. doi:10.1007/BF02103005
- Lisak, D., Hopper, J., & Song, P. (1996). Factors in the cycle of violence: Gender rigidity and emotional constriction. *Journal of Traumatic Stress, 9*, 721–743.
- Logan, M. (2010, February 22). *Wolves in sheep's clothing: Most child molesters blend into their background*. Retrieved from <http://mloganhalo.blogspot.ca/2010/02/wolves-in-sheeps-clothing-most-child.html>
- Matos, M., Pinto-Gouveia, J., & Costa, V. (2013). Understanding the importance of attachment in shame traumatic memory regulation to depression: The impact of emotion regulation process. *Child Psychology and Psychotherapy, 20*, 149–165. doi:10.1002/cpp.786
- McDonald, S., & Tijerino, A., (2013). *Male survivors of sexual abuse and assault: Their experiences*. Research and Statistics Division, Department of Justice Canada. Retrieved from [http://www.justice.gc.ca/eng/rp-pr/cj-jp/victim/rr13\\_8/rr13\\_8.pdf](http://www.justice.gc.ca/eng/rp-pr/cj-jp/victim/rr13_8/rr13_8.pdf)
- McFarlane, A. & van der Kolk, B. (2007). Trauma and its challenge to society. In van der Kolk, B., McFarlane, A., & Weisaeth, L. (Eds). *Traumatic stress: The effects of overwhelming experiences on mind, body and society*. New York, NY: The Guildford Press.
- McFarlane, A. & De Girolamo, G. (2007). The nature of traumatic stress and the epidemiology of posttraumatic reactions. In van der Kolk, B., McFarlane, A., & Weisaeth, L. (Eds). *Traumatic stress: The effects of overwhelming experiences on mind, body and society*. New York, NY: The Guildford Press.

- McIntosh T., Vallano M., Barfield R., (1980). Effects of morphine, beta-endorphin and naloxone on catecholamine levels and sexual behavior in the male rat. *Pharmacology, Biochemistry and Behavior*. 13, (3) 435– 41. doi:10.1016/0091-3057(80)90251-8
- McLean, I. (2012). Male victims of sexual assault. *Best Practice and Research Clinical Obstetrics and Gynecology*, 27(1), 39-46. doi:10.1016/j.bpobgyn.2012.08.006
- McLeod, J. (2001). *Qualitative research in counselling and psychotherapy*. Thousand Oaks, CA: Sage.
- Mead, G. (1956). *On social psychology: Selected papers* (A. Strauss Ed.). Chicago, IL: University Press.
- Mezey, G.C, & King, M.B (2000). *Male Victims of Sexual Assault* (ed 2). New York, NY: Oxford University Press.
- Merriam, S. B. (2002). *Qualitative research in practice: Examples for discussion and analysis*. San Francisco, CA: Jossey-Bass.
- Merriam, S.B. (2009). *Qualitative research: A guide to design and implementation*. San Francisco, CA: Jossey- Bass.
- Moustakas, C. (1994). *Phenomenological research methods*. Thousand Oaks, CA: Sage.
- Nasjleti, M. (1980). Suffering in silence: The male incest victim. *Child Welfare*, 59(5), 269–279. Retrieved from Ebscohost database.
- Nauright, J., & Chandler, T. (Eds.). (1996). *Making men: Rugby and masculine identity*. London, UK: Frank Cass & Co.
- O’Leary, P., & Barber, J. (2008) Gender differences in silencing following childhood sexual abuse. *Journal of Child Sexual Abuse*, 17(2), 133–143. doi:10.1080/10538710801916416

- Omarzu, J. (2000). A disclosure decision model: Determining how and when individuals will self-disclose. *Personality and Social Psychology Review*, 4(2), 174–185.  
doi:10.1207/S15327957PSPR0402\_05
- Perry, B., & Szalavitz, M. (2007). *The boy who was raised as a dog and other stories from a child psychiatrist's notebook: What traumatized children can teach us about loss, love, and healing*. New York, NY: Basic Books.
- Pescosolido, F. J. (1988). Sexual abuse of boys by males: Theoretical and treatment implications. In S. M. Sgroi (Ed.), *Vulnerable populations: Sexual abuse treatment for children, adult survivors, offenders, and persons with mental retardation* (vol. 2; pp. 85–109). Lexington, MA: Lexington Books.
- Peterson, Z., Voller, E., Polusny, M., & Murdoch, M. (2011). Prevalence and consequences of adult sexual assault of men: Review of empirical findings and state of literature. *Clinical Psychology Review*, 31, 1-24. doi: 10.1016/j.cpr.2010.08.006
- Piquero, A., Leeper-Piquero, N., Terry, K., Youstin, T., & Nobles, M. (2008). Uncollaring the criminal: Understanding criminal careers of criminal clerics. *Criminal Justice and Behavior*, 35(5), 583–599. doi:10.1177/0093854808314361
- Pronger, B. (1990). Toronto, ON: University of Toronto Press.
- Redmond, D., Kosten, T., & Reiser, M., (1983). Spontaneous ejaculation associated with anxiety: psychophysiological considerations. *American Journal of Psychiatry*, 140, 1163–1166.
- Resnik, H. (1997). Eroticized repetitive hangings: A form of self-destructive behavior, in *Sexual dynamics of antisocial behavior* (Louis B. Schlesinger & Eugene Revitch eds., Charles C. Thomas 2d ed.).
- Rothbard, J. & Shaver, P. (1994). Continuity of attachment across the life span. In Sperling, M.,

- & Berman, W. (Eds), *Attachment in adults: Clinical and developmental perspectives*. New York, NY, US: Guilford Press
- Rothchild, B. (2000). *The body remembers: The psychophysiology of trauma and trauma treatment*. New York, NY: W.W. Norton.
- Scarce M., (2001). *Male on male rape: the hidden toll of stigma and shame*. Cambridge, MA: Perseus Publishing.
- Shalev, A. (2007). Stress versus traumatic stress. From acute homeostatic reactions to chronic psychopathology. In van der Kolk, B., McFarlane, A., & Weisaeth, L. (Eds). *Traumatic stress: The effects of overwhelming experiences on mind, body and society*. New York, NY: The Guildford Press.
- Sigurdardottir, S., Halldorsdottir, S., & Bender, S., (2012). Deep and almost unbearable suffering: consequences of childhood sexual abuse for men's health and well-being. *Scandinavian Journal of Caring Science*; 26, 688–697. doi: 10.1111/j.1471-6712.2012.00981.x
- Singer, K. (2010). *Evicting the perpetrator: A male survivor guide to recovery from childhood sexual abuse*. Holyoke, MA: Neari Press.
- Sorsoli, L., Kia-Keating, M., Grossman, F. (2008). "I keep that hush-hush": Male survivors of sexual abuse and the challenges of disclosure. *Journal of Counselling Psychology*, 55(3), 333–345. doi:10.1037/0022-0167.55.3.333
- Spiegel, J. (2003). *Sexual abuse of males: The SAM model of theory and practice*. New York, NY: Brunner-Routledge.
- Statistics Canada (2014) <http://www.statcan.gc.ca/daily-quotidien/140528/dq140528a-eng.htm>
- Storr, W. (2011). The rape of men. *The Observer*. Pgs. 38-41

- Strauss, A., & Corbin, J. (1998). *Basics of qualitative research: Techniques and procedures for developing grounded theory* (2nd ed.). Thousand Oaks, CA: Sage.
- Sullivan, J., & Beech, A. (2002). Professional perpetrators: Sex abusers who use their employment to target and sexually abuse the children with whom they work. *Child Abuse Review, 11*, 153–167. doi:10.1002/car.737
- Sullivan, J., & Beech, A. (2004). A comparative study of demographic data relating to intra- and extra-familial child sexual abusers and professional perpetrators. *Journal of Sexual Aggression: An International, Interdisciplinary Forum for Research, Theory and Practice*. doi:0.1080/1355260041000166778
- Teram, E., Schacter, C., Stalker, C, Hovey, A., & Lasiuk, G. (2006). Towards male centric communication” Sensitizing health professionals to the realities of male childhood sexual abuse survivors. *Issues in Mental Health Nursing, 27*(5), 499–517. doi:10.1080/01612840600599994
- Terry, K., & Freilich, J. (2012). Understanding child sexual abuse by catholic priests from a situational perspective. *Journal of Child Sexual Abuse, 21*(4), 437–455, doi:10.1080/10538712.2012.693579
- The Refugee Law Project: A Center for Justice and Forced Migrants. Retrieved from <http://www.refugeelawproject.org/nmpdc.php>, February, 12, 2013.
- Turner, D. S. (2003). Horizons revealed: From methodology to method. *International Journal of Qualitative Methods, 2*(1). Article 1. Retrieved May 13, 2005 from [http://www.ualberta.ca/~iiqm/backissues/2\\_1/html/turner.html](http://www.ualberta.ca/~iiqm/backissues/2_1/html/turner.html).
- Turner, S. (2004). Surviving sexual assault and sexual torture, in Mezey G. &, King, M., eds. *Male victims of sexual assault* (ed 2). Oxford, UK: Oxford University Press.

- van der Kolk, B.(1988). The trauma spectrum: The interaction of biological and social events in the genesis of the trauma response. *Journal of Traumatic Stres.1*, 273-290.
- van der Kolk, B. (2003). Neurobiology of childhood trauma and abuse. *Child and Adolescent Psychiatric Clinics of North America. 12*(2), 293–317.  
doi:10.1016/S1056-4993(03)00003-8.
- van der Kolk, B. (2007). The complexity of adaptation to trauma self-regulation, stimulus discrimination, and characterological development. In van der Kolk, B., McFarlane, A., & Weisaeth, L. (Eds). *Traumatic stress: The effects of overwhelming experiences on mind, body and society*. New York, NY: The Guildford Press.
- van der Kolk, B., McFarlane, A. (2007). The black hole of trauma. In van der Kolk, B., McFarlane, A., & Weisaeth, L. (Eds). *Traumatic stress: The effects of overwhelming experiences on mind, body and society*. New York, NY: The Guildford Press.
- van der Kolk, B., van der hart, O., & Marmar, C. (2007). Dissociation and information processing in post-traumatic stress disorder. In van der Kolk, B., McFarlane, A., & Weisaeth, L. (Eds). *Traumatic stress: The effects of overwhelming experiences on mind, body and society*. New York, NY: The Guildford Press.
- van der Kolk, B., McFarlane, A., & Weisaeth, L. (Eds). (2007). *Traumatic stress: The effects of overwhelming experiences on mind, body and society*. New York, NY: The Guildford Press.
- Watkin, B. & Bentovim, A. (2000). *Male children as adolescent victims; A review of current knowledge*. In Mezey, G.C, & King, M.B. *Male victims of sexual assault* (ed 2). New York, NY: Oxford University Press.

- Watkins, B., & Leonardtovim, A. (1992). The sexual abuse of male children and adolescents: A review of current research. *Journal of Child Psychology and Psychiatry*, 33(1), 197–248. doi:10.1111/j.1469-7610.1992.tb00862.x
- Watkins, B., & Leonardtovim, A. (2004). Male children and adolescents as victims: a review of the current knowledge, in Mezey G. & King, M., eds. *Male victims of sexual assault* (ed 2). Oxford, UK: Oxford University Press.
- Weston, J. (2005). *Interruption of emotional experience in psychotherapy*. (Unpublished doctoral dissertation). York University, Canada. In Greenberg, L., & Watson, J. (2008). *Emotional focused therapy for depression*. Washington, DC: American Psychological Association.
- Widor, A. (1996). Fact or fiction?: Role-reversal sexual harassment in the modern workplace. *University of Pittsburgh Law Review*, 58, p. 225. Database: LexisNexis Academic: Law Reviews.
- Yancey, C., Hansen, D., & Naufel, K. (2011). Heterogeneity of individuals with a history of childhood sexual abuse: An examination of children presenting to treatment. *Journal of Childhood Sexual Abuse*, 20, 111–127. doi:10.1080/10538712.2011.554341
- Zerbe Enns, C., (1993). Twenty years of feminist counseling and therapy: From naming biases to implementing multifaceted practice. *The Counseling Psychologist*. 21(1), 3-87. doi:10.1177/0011000093211001

## Appendix A:

### Research Study: Antecedents of Non-disclosing Among Adult Male Survivors of Sexual Abuse

**Are you an adult male survivor of sexual abuse?** Did you wait at least one year before telling anyone? Perhaps you have **never told** anyone about your experience?

**Are you interested in participating in a research study about why males do not regularly report their experiences of sexual abuse?**

I am a Ph.D. student with experience working with adult male survivors of childhood sexual abuse. I am researching the barriers that **prevent males from reporting sexual abuse** in order to assist helping professionals to better meet the needs of male victims. Participants will be asked to participate in two **confidential** interviews, each 1-2 hours in length. Initial interviews will be in-person, while second interviews may be completed over the phone.

**For more information or if you are interested in participating, please contact Kelli Palfy at [palfy@ualberta.ca](mailto:palfy@ualberta.ca) or 780.242.4055.**

This study has been approved by the University of Alberta Research Ethics B

Kelli Palfy (Research Study)  
[palfy@ualberta.ca](mailto:palfy@ualberta.ca) 780-242-4055

## Appendix B:

Research Study: Antecedents of Non-disclosing Among Adult Male Survivors of Sexual

Abuse

**Are you an adult male survivor of sexual abuse?** Did you wait at least one year before telling anyone? Perhaps you have **never told** anyone about your experience?

**Are you interested in participating in a research study about why males do not regularly report their experiences of sexual abuse?**

I am a Ph.D. student with experience working with adult male survivors of childhood sexual abuse researching the barriers that **prevent males from disclosing sexual abuse**. This research is being conducted to assist helping professionals to better meet the needs of male victims. To participate in this research you would be required to contribute in two **confidential** interviews, each 1-2 hours in length. Initial interviews will be in-person, while second interviews may be completed over the phone.

**For more information or if you are interested in participating, please contact Kelli Palfy at [palfy@ualberta.ca](mailto:palfy@ualberta.ca) or 780.242.4055.**

[This study has been approved by the University of Alberta Research Ethics Board](#)

(REB 1).

### Appendix C: Information Letter

**Research Study:** Antecedents of Non-disclosing Among Adult Male Survivors of Sexual Abuse

**Researcher:** Kelli Palfy MA, Ph.D. Student, University of Alberta, (780) 242- 4055.  
Email: palfy@ualberta.ca

**Research Supervisor:** Dr. Robin Overall, Associate Dean of Students, University of Alberta.

*To Participant:*

You are invited to participate in research being conducted by Kelli Palfy, MA, a 3<sup>rd</sup> year Ph. D student at the University of Alberta. This study is being conducted in part to fulfill the dissertation requirement for the Doctor of Philosophy degree in Counselling Psychology. The purpose of this study is to explore why adult male survivors do not disclose sexual abuse in order to gain an in-depth understanding of the barriers male survivors face through answering the key questions: 1) What are the barriers that prevented you from reporting your experience(s) of being sexually abused. 2) Did you ever attempt to tell anyone you were being abused either by your words or actions 3) Please explain any times you attempted to disclose. 4) Was there anything else that you needed? 5)What got in your way? These questions are being researched in part to assist helping professionals better meet the needs of male victims.

***Your participation in this study is completely voluntary and you are free to withdraw your involvement at any time without prejudice.***

Data will be collected through the completion of two confidential interviews that will be approximately one to two hours in length. Interviews will be semi-structured and based upon a guided list of questions. The first interview will be completed in-person and within a private professional setting. Second interviews may be held in person, over the telephone. Both interviews will be audio-recorded for future transcription.

All information collected (i.e., audio and transcriptions) will be stored in a locked manner that will not associate your name to the data. Your privacy, confidentiality and anonymity will be ensured. Any research personnel that may be involved in this study will sign a confidentiality agreement and will comply with the University of Alberta Standards for the Protection of Human Research Participants <http://www.ualberta.ca/~unisecr/policy/sec66.html>.

Given the importance of this research, the findings of this study may be reported in academic journals and presented at conferences. Your name and other identifying information will not be used in any presentations or publications of the study results. The plan for this study has been reviewed for its adherence to ethical guidelines and approved by the Research Ethics Board (REB1) at the University of Alberta.

***If you have any questions or would like more information regarding this study or if you wish to be involved in this study, please contact me at (780) 242- 4055 or email me at palfy@ualberta.ca to indicate your interest.***

Thank you for considering your participation in this study.

Sincerely,

Kelli Palfy B.Sc., MA.  
Department of Education Psychology  
University of Alberta  
Edmonton, Alberta, Canada

## Appendix D: Semi-Structured Interview Guide

*Note: These guiding interview questions are intended to be open ended and will be mainly used to elicit participant accounts of experiences of barriers to reporting their experiences of sexual abuse. Follow-up questions will be asked to obtain more detail and allow for personal experiences and meaning to be shared. The following questions may not necessarily be discussed in this order during the interview process.*

### **Participant questions.**

- 1) Can you tell me a little bit about what you think that I need to know about your experience of being sexually abused?
  - 2) Tell me about what led you to decide to disclose or not disclose your abuse?
  - 3) Help me to understand what impacted your decision-making process?
  - 4) Can you tell me about any factors that discouraged you from disclosing?
- Supplemental questions may include:
- 5) If you did make a disclosure what helped you to do this?
  - 6) To whom and when did you make the disclosure(s)?
  - 7) Prior to your disclosure or the discovery of your abuse did you ever try to tell anyone about your abuse or try to alert someone to your situation through your actions, words or behaviors?
  - 8) Tell me about any attempts to disclose that you made.
  - 9) How long after your abuse was it before you tried to disclose or succeeded in disclosing to someone?
  - 10) What other supports did you need that would have helped to disclose?
  - 11) What was your motivation to participate in this interview?
  - 12) Has anything such as the recent media attention given to male CSA survivors affected your decision to disclose? If so, what was it that influenced you?
  - 13) Is there anything we have not discussed that is important to understanding your experience? If so, please describe.
  - 14) What does the word 'survivor' mean to you?

### Appendix E: Consent Form

**Research Study:** Antecedents of Non-disclosing Among Adult Male Survivors of Sexual Abuse

**Researcher:** Kelli Palfy MA, Ph.D. Student, University of Alberta, (780) 242- 4055. Email: palfy@ualberta.ca

**Research Supervisor:** Dr. Robin Everall, Associate Dean of Students, University of Alberta. Email: reverall@ualberta.ca

Thank you for your interest in this study. The purpose of this research is to understand the reasons boys and men do not disclose their histories of sexual abuse. This information could benefit other male survivors and those interested in helping them.

I understand that:

- I am being asked to participate in two interviews lasting approximately one to two hours each.
- These interviews will be audio-taped and transcribed.
- I will be provided opportunity to clarify anything I discussed in the first interview or offer additional information to the researcher during my second interview.
- All information collected (i.e., audio and transcriptions) will be stored so that my name is not associated with it. My privacy, confidentiality, and anonymity will be ensured.
- Transcripts and audio recordings will be secured in a locked filing cabinet under sole control of the researcher.
- Any transcriber involved in this study will sign a confidentiality agreement and will comply with The University of Alberta Standards for the Protection of Human Research Participants <http://www.ualberta.ca/~unisechr/policy/sec66.html>.
- Given the importance of this research, the results of this study may be reported in academic journals and presented at academic conferences. My name and other identifying information will not be used in any presentations or publications of the study results.
- The plan for this study has been reviewed. It meets the ethical guidelines and was approved by the Research Ethics Board (REB 1) at the University of Alberta.
- For questions regarding participant rights and ethical conduct of research, I may contact the REB at (780) 780-492-0459 or via email at reoffice@ualberta.ca, web address: [www.reo.ualberta.ca](http://www.reo.ualberta.ca).

While we do not anticipate unmanageable distress, some people find that talking about their experiences of non-disclosure reminds them of low points in their lives. In the case that this



**Appendix F: Demographic Information****Research Study: Antecedents of Non-disclosing Among Adult Male Survivors of Sexual Abuse**

Current Age: \_\_\_\_\_

Age when your sexual abuse began: \_\_\_\_\_

Were you sexually abused more than one time? \_\_\_\_\_

Age when your sexual abuse ended: \_\_\_\_\_

Were you sexually abused by more than one person? \_\_\_\_\_

Length of time before you told anyone about the abuse you sustained: \_\_\_\_\_

### **Appendix G: Transcriptionist Confidentiality Agreement**

**Research Study:** Antecedents of Non-disclosing Among Adult Male Survivors of Sexual Abuse

**Researcher:** Kelli Palfy MA, Ph.d Student, University of Alberta, (780) 242- 4055. Email: palfy@ualberta.ca

**Research Supervisor:** Dr. Robin Everall, Associate Dean of Students, University of Alberta. Email: reverall@ualberta.ca

In my role as a research consultant, I \_\_\_\_\_, agree to respect the anonymity of the participants in this study by:

1. Keeping all of the research information shared with me confidential by not discussing or sharing the research information in any form or format (i.e., emails, audio files or transcripts) with anyone other than the researcher Kelli Palfy or supervisor Dr. Robin Everall.
2. Keeping all research information in any form or format (i.e., emails, audio files or transcripts) secure while it is in my possession.
3. Returning all research information in any form or format (audio files or transcripts) to the researcher, Kelli Palfy when I have completed the research tasks.
4. Erasing or destroying all research information in any form or format regarding this research project that is not returnable to the researcher, Kelli Palfy (i.e., email attachments or other information stored on computer hard drive).

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Printed name	Signature
Date	

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Researcher as Witness	Signature	Date
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**Table 1 List of all Themes/Subthemes Identified:****Fear Response**

- Loss of memory
- Fear of being blamed
- Abuse was too difficult to discuss
- Attempted disclosure ended badly
- Feared of worse consequences
- Fear of not being believed
- Fear of their perpetrator

**Shame/Guilt/Confusion**

- Worry about image
- Felt responsible
- Evidence of physiological arousal
- Sex was a taboo subject
- Felt like a burden
- Enjoyed the relationship part
- Confused about sexuality

**Isolation/Hopelessness**

- No point in disclosing; no one would help
- Non-sexually abusive parent was emotionally unavailable/abusive
- Abusers kept them isolated dependent/ trapped

**Lack of Knowledge**

- Unaware of impact of their abuse
- Unaware their abuse was sexual

**Protecting the Family**

- Protecting the family's reputation or idea of family
- Too hard for parent to handle