

RESEARCH ARTICLE

Adult Survivors' Perceptions of Parents' Responses to Child Sexual Abuse Disclosure: Helpful and Unhelpful Responses

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ABSTRACT

Child sexual abuse (CSA) can lead to a host of adverse outcomes, and disclosing it can be an important part of the healing process. Most research in this area focuses on children who disclose, yet survivors often delay disclosure until adulthood, typically because of worries about parental responses. To strengthen awareness of perceived helpful and unhelpful parental reactions to adult child sexual abuse disclosure, this study presents results of a grounded theory investigation of adult survivors' ($N=15$) perceptions of their parents' responses to CSA disclosure. Results centre on the survivors' views of parents' reactions, questions, behaviours, positionality and follow-up actions in response to the disclosure. Participants also shared how the familial context shaped responses and ongoing parent–child discussions following disclosure. The resultant grounded theory highlights relational processes that hindered or strengthened the parent–child relationship. Findings provide insights for family therapists and researchers.

Not including unrecorded cases, around the world, approximately 20% of women and 14% of men report being sexually abused in childhood (World Health Organization 2024). Child sexual abuse (CSA) is the involvement of a person under the age of 18 in sexual activity that the child does not fully comprehend, does not or is unable to consent to or is not developmentally prepared for and cannot consent to (Centers for Disease Control and Prevention 2022). Many survivors of CSA never disclose the abuse or delay disclosing it until later in life (Paine and Hansen 2002). Fear of others' responses is one of the biggest barriers to CSA disclosure (Collin-Vézina et al. 2015; Hershkowitz et al. 2007), and survivors are often most worried about the responses of their parents (Hershkowitz et al. 2007). Though parents can play a critical role in the CSA disclosure process, survivors' perceptions of parental responses are rarely a focal point of research. This study was designed to contribute to the literature on the experiences of adult survivors who disclosed CSA to a parent or parent figure.

1.1 | CSA Disclosure and Parents' Responses

There are known barriers to CSA disclosure (Brits et al. 2022). Survivors report fear of being blamed, rejected, disbelieved or punished for the abuse (Alaggia 2010; Collin-Vézina et al. 2015; Timraz et al. 2019). Survivors also describe family stigmatisation as a barrier to disclosure (Brits et al. 2022; Collin-Vézina et al. 2015). Concern about the impact on the relationship with one's parents can also influence a survivor's desire to withhold disclosure (Alaggia and Kirshenbaum 2005; Brennan and McElvaney 2020). Authors of a systematic review of CSA disclosure research concluded that when survivors contemplate whether or not to disclose abuse, these perceived barriers often outweigh facilitators (Alaggia et al. 2017).

Unfortunately, survivors' fears are not unfounded. A study of children's disclosure of CSA to their parents concluded that most parents' responses were classified as involving anger or

Practitioner Points

- Parents' responses to CSA disclosure can strengthen or hinder the parent–child relationship.
- Helpful responses include expressions of affection, empathy, appreciation and a desire to protect the survivor.
- Harmful responses include those that are dismissive, blaming, shaming or interrogative.
- Even if initial conversations hinder the parent–child relationship, it may not be too late to repair. Ongoing conversations can mend connections.
- Results are preliminary, stemming from a U.S.-based sample. More research is needed for generalizability.

child blaming, with 81% of parents' responses categorised as unsupportive if the CSA disclosure was delayed (Hershkowitz et al. 2007). Another study of women survivors of CSA found a number of unhelpful responses, including denial, minimization, disbelief, lack of supportive action and physical punishment (Timraz et al. 2019).

There are also factors that facilitate CSA disclosure, and these can vary depending on the age of the survivor. For children, law enforcement involvement, peer influence and a need for direction may heavily influence disclosure (McGill and McElvaney 2023). Adults, on the other hand, may have different motivations to disclose. Albeit limited, most research involving adult survivors of CSA focuses more on barriers than facilitators. However, one study found that persistent emotional responses of guilt and shame influenced adults to disclose CSA (Goodman-Brown et al. 2003). The hope for emotional support, help, and guidance was an additional reason survivors opted to disclose to their parents (Tener and Murphy 2015). Another study of adults who disclosed found that many believed it would aid in their healing, but that was dependent on their level of social support (Jonzon and Lindbald 2004).

Parents are often the recipients of CSA disclosure (Malloy et al. 2013), and the quality of the parent–child relationship is a factor considered when deciding whether to disclose to them (Brennan and McElvaney 2020). A study including 204 suspected survivors of CSA found that 69% of participants reported having disclosed to a parent (Malloy et al. 2013). Much of the CSA disclosure literature, however, is oriented around children who disclose (Elliott and Carnes 2001; Hershkowitz et al. 2007). This is relevant because survivors of CSA often delay reporting until adulthood (Paine and Hansen 2002). The lack of research on the perspectives of adult CSA survivors who have disclosed to their parents is an important gap in the literature.

Research has outlined many lasting effects of disclosure responses on survivors (Glover et al. 2010; Hall et al. 2023; Jouriles et al. 2022; Palo and Gilbert 2015; Romano et al. 2019). Researchers of a quantitative study involving college students found lower levels of parental support and lower ratings of self-worth among those who reported a history of CSA compared to those who did not (Guelzow 2002). Perceived hurtful responses

have also been associated with higher rates of revictimization (Brenner and Ben-Amitay 2015), post-traumatic stress symptoms (Glover et al. 2010), disordered eating (Everill and Waller 1995), adverse physical health symptoms (Palo and Gilbert 2015) and familial relationship strain (Kilroy et al. 2014). The risk for these negative outcomes underscores the importance of parents' responses to CSA disclosure.

1.2 | The Present Study

The experiences of adult survivors who have disclosed CSA to a parent are often overlooked in the literature. This empirical gap is particularly salient for systemic family therapists aiming to help survivors of CSA. To further knowledge in this area, this study addressed the question using a United States-based sample: 'When disclosing CSA to a parent or parent figure, how do adult survivors perceive their parents' responses?' Findings can be used to increase awareness of helpful and harmful parental responses to CSA disclosure and guide family therapists' work in this area.

2 | Method

A grounded theory methodology was used to understand the lived experiences of adult CSA survivors who disclosed CSA to a parent. The approach was exploratory and descriptive, and the purpose was to gain insight into the phenomenon (Charmaz 2009). Grounded theory methodology was selected due to the theoretical gap regarding survivors' perceptions of their parents' responses to CSA disclosure. The methodological approach allowed for the development of a conceptual model of the processes associated with a phenomenon (Charmaz 2009). The grounded theory protocol involving conducting data collection concurrently with data analysis was advantageous for a study seeking to increase understanding by building theory. Recursively, the analysis informed the data collection, and the data collection informed the analysis (Charmaz 2009). The rigour of the grounded theory methodology was another reason the approach was selected.

2.1 | Participants

Participants included adult survivors who disclosed CSA to a parent or parent figure. A total of 15 survivors ($N=15$) participated in the study (See Table 1). Participants resided in various U.S. states, including Arizona, Florida, Michigan, Nevada, Ohio, South Carolina, Tennessee and Wisconsin.

2.1.1 | Recruitment

To be eligible to participate in the study, survivors were required to identify as someone who (a) was over the age of 18, (b) experienced CSA, (c) disclosed the CSA to a parent or parent figure in adulthood and (d) spoke English. Eligibility was confirmed via self-report prior to the interview. To recruit participants, purposive, convenience and snowball sampling strategies were used. Study information was posted at therapy

TABLE 1 | Participant demographic characteristics.

Characteristic	<i>n</i>	Percentage
Gender identity		
Man	1	7
Woman	13	86
Non-binary	1	7
Age		
20–29	2	13
30–39	5	33
40–49	3	20
50–59	3	20
60–69	1	7
70–79	0	0
80+	1	7
Race and ethnicity		
Black or African American	1	7
Hispanic, Latino or Spanish origin	3	20
White	9	59
Multiple races	1	7
Other (European-American)	1	7
Survivor sexual orientation		
Asexual	1	7
Bisexual	4	26
Heterosexual	7	46
Lesbian	1	7
Queer	1	7
Prefer not to say	1	7
Perpetrator relationship		
Familial perpetrator	13	87
Non-familial perpetrator	2	13

clinics, on social media platforms, and by instructors of undergraduate classes at Florida State University. To protect participant privacy, participants were not asked to indicate how they learned about the study. Subjects received a \$20 e-gift card for participation. The Florida State University IRB approved the study procedures.

2.2 | Procedures

All participants completed the consent process and a demographic questionnaire prior to the interview. The study involved potentially sensitive topics related to CSA disclosure. Study risks included possible discomfort when answering questions and the possibility of mandated CSA reporting. To

minimise these risks, participants received mental health resources and contact information for support if needed. The first author conducted semi-structured interviews with participants via Health Insurance Portability and Accountability Act (HIPAA) compliant Zoom video conferencing. Interview questions were open-ended and adapted as the study progressed, congruent with grounded theory methodology (Charmaz 2009). Examples of topics included participants' relationship with their parent(s), the initial disclosure experience, their emotional reactions to parental responses and any subsequent changes in the parent-child relationship. Follow-up questions were added based on participants' responses to explore emerging themes. After each interview, the first author wrote memos to form initial impressions and help solidify themes in the later stages of coding (Charmaz 2009). Interviews ranged from 45 to 80 min, were recorded and transcribed verbatim. Transcripts were deidentified. Data were collected until saturation was reached.

2.3 | Data Analysis

Grounded theory analysis was used to identify a central theory surrounding survivors' perspectives of their parents' responses to CSA disclosure. Coding was completed concurrently with the interview process to reflect grounded theory methodology (Charmaz 2009). Three trained research assistants participated in the coding process, which consisted of word-by-word and segment-by-segment open coding completed by pen and paper. Then, data were transferred into Dedoose, a qualitative coding software, and the research team conducted the second phase of coding: a focused and selective phase that used significant and frequent initial codes to sort, synthesise, integrate, and organise large amounts of data (Charmaz 2009). Once no further categories emerged from the data, theoretical codes identifying possible relationships between the categories were solidified (Charmaz 2009).

Memo-writing was utilised consistently throughout data collection to revisit the data, define relationships, and identify gaps (Charmaz 2009). Each time a research team member worked with the data, they wrote a memo. Member-checking, taking ideas back to participants for their confirmation (Charmaz 2009), was also conducted to ensure their experiences were accurately represented. All participants ($N=15$) consented to follow-up contact for the purpose of member checking. Once the analysis process was completed, participants were emailed the findings and invited to verify, clarify or elaborate upon the findings. Feedback received was unanimously supportive of the findings and integrated as appropriate.

2.3.1 | Reflexivity

Engaging in reflexivity is another necessity of qualitative research as it allowed the researcher to assess the extent to which interests and positions influenced inquiry (Charmaz 2009). Personal characteristics (e.g., age, race, gender, class, sexuality, education) likely had some impact on the data collection and analysis. The researchers include two licenced marriage and family therapists who have experience working with survivors

of CSA and one social worker with a research agenda on youth in foster care, some of whom have experienced CSA. All of the authors are women and [blinded].

3 | Results

The results describe adult survivors' perceptions of parental responses to CSA disclosure and the relational impact of those responses over time. Findings are organised into two primary sections that illustrate how specific response characteristics shaped survivors' relational experiences following disclosure: responses that hindered the relationship and responses that strengthened the relationship. Within each section, parental responses are further categorised into five subthemes: statements, questions, behaviours, positionality and follow-up actions.

3.1 | Responses That Hindered the Relationship

Aspects of hindered relationships included cutting ties, communicating less frequently, developing rigid boundaries, losing trust, withholding further disclosures, becoming reactive to one another, harbouring feelings of resentment and physically or emotionally distancing from the relationship. Most participants ($n = 12$) reported at least one indicator of a hindered relationship. Survivors also described harmful parent responses that hindered the parent-child relationship following disclosure. These responses were grouped into five subcategories: *harmful statements*, *harmful questions*, *harmful behaviours*, *harmful positionality* and *harmful follow-up actions*.

3.1.1 | Harmful Statements

Survivors reported three types of harmful statements that exhibited a lack of empathy for survivors' experiences: *dismissive*, *blaming* and *shaming*.

3.1.1.1 | Dismissive Statements. Statements categorised as dismissive either denied the survivor's experience or made comparisons to personal trauma. Examples of denying the survivor's experience included telling them the CSA did not happen, claiming they fabricated the CSA or stating the survivor remembered the situation incorrectly. These parents expressed their disagreement with the survivors' experience, such as one survivor who shared:

I told my mom what my dad did and she did not agree. My mom said, 'I've been married to him for years and I would have known if something like that happened. He was a religious man. He would never do that.'

Likewise, another survivor described her feelings towards hearing her mother respond, 'I believe you *believe* that happened':

I felt rejected, like she wasn't trusting me. She was implying that I was crazy and that it wasn't

factually true. That I must have made it up because she clearly didn't, or couldn't, believe me. She was basically implying that I had fabricated this idea out of nowhere, which felt incredibly dismissive. I just felt rejected. I'm her child and I felt like she was choosing my abusive father over me.

Survivors reported feeling dismissed when their parents made statements comparing their own trauma to the survivors'. These parents downplayed the impact of CSA on the survivor. One survivor shared her father's response: 'My dad said the words, "Bad things happen to all of us as kids, but you get over it." That's what felt unsafe about my dad's response and deters me from sharing any specific details with him'. Similar to others who were dismissive, this parent suggested the survivor's experience was common.

3.1.1.2 | Blaming Statements. Response statements that placed blame or responsibility on the survivor were also viewed as harmful to the parent-child relationship. These parents expressed anger towards the survivor for allowing the CSA to happen, not stopping it sooner, withholding disclosure or causing friction in the family. One survivor reported her father claimed the disclosure was an attempt to 'tear the family apart'. Another survivor described her mother's initial response of anger: 'She [her mother] was angry with me at first. She said, "I raised you better. If someone was touching you, you were supposed to come tell me"'.

In many cases, blaming statements not only hindered the parent-child relationship but also increased survivors' self-blame. A survivor described how she internalised her mother's blaming response to disclosure: 'It made me feel that maybe there was something wrong with me. I thought, maybe I wanted it'.

3.1.1.3 | Shaming Statements. Shaming statements projected feelings of disgrace, embarrassment or humiliation onto the survivor. One survivor identified labelling as the most impactful aspect of her mother's disclosure response:

She used the word 'sick'. I thought, 'I totally agree with you,' because it's a sick situation. It makes you feel dirty and mentally messed up a little. That was a hard word. I think that's what hit me the most.

Other parents responded with shaming statements that prompted the survivor to keep the CSA a secret. One survivor elaborated on how this response prevented her from seeking help: 'They kept it to themselves and told me to keep it to myself, so therapy was never sought'. Shaming statements were reported to stunt survivors' post-traumatic growth. Statements that were dismissive, blaming, and shaming also harmed the parent-child relationships.

3.1.2 | Harmful Questions

It is worth noting that some survivors requested less questioning, and others desired more. Nevertheless, survivors considered various questions to be harmful. Most questions perceived

as harmful were paired with other harmful responses. For example, a survivor explained feeling resistant when her mother inquired about details due to her preexisting harmful response: 'From that point, she [my mother] already felt the way that she felt. Why would I even want to give her details to make it worse?' Harmful questions were consistently reported as possessing *interrogative* qualities. Interrogative questions, especially when paired with other harmful responses, were perceived as harmful to the parent-child relationship.

3.1.2.1 | Interrogative Questions. Parents who asked interrogative questions sought information about the CSA or the survivors' choices. Survivors reported feeling uncomfortable with their parents' requests to relay details surrounding the CSA, especially because the survivors were adults and the abuse had passed. One survivor outlined this reasoning:

It's completely different if they're a child. I feel like, if they're a child, outside help needs to be brought in as soon as it is safe and possible. Maybe it would be good to press for details then. But as an adult, unless the parent is concerned about that perpetrator abusing more children, I don't think it's appropriate for details to be asked.

Survivors reported feeling upset when parents asked why the survivor chose to withhold disclosure. A survivor explained her reaction to her mother asking why the disclosure did not happen sooner: 'I felt guilty. When I told her and she responded that way, I felt like I messed up and had shared something with my mom that she wasn't supposed to know'.

3.1.3 | Harmful Behaviours

Parents exhibited behaviours that were viewed as harmful to the parent-child relationships. These behaviours included *disengaged behaviours* and expressing *passive-aggressive mannerisms*.

3.1.3.1 | Disengaged Behaviours. Most survivors who perceived disengaged parent responses reported feeling their parents' lack of caring. These parents did not address or acknowledge the survivors' disclosure, such as one survivor who explained her mother's disengaged response: 'I told her [my mother] and she just discarded it; did not care, did not respond. She never really leaned in. It was just met with nothing'. Another survivor noted how their father changed the subject quickly without acknowledging the disclosure: 'After that he [my father] said, "Let's just go to the bar to have drinks and talk." It felt like I had just told him I passed my class. It was nothing'. This reaction led to a relationship cutoff between the survivor and the parent.

Other parents with disengaged behavioural responses seemed to exhibit this behaviour due to feeling shocked or not knowing how to respond, such as a parent who responded to the disclosure by saying: 'What am I supposed to do?' A survivor explained his disappointment with his parent's inability to respond with validation, 'She didn't stop to unpack anything. She just said, 'Oh, I had no idea!' She was dumbfounded. I don't know what I expected. I

wanted some kind of validation, and I just didn't get it'. Whatever the reasoning behind the disengaged behaviour, survivors who received this response all reported it as invalidating and harmful.

3.1.3.2 | Passive Aggressive Mannerisms. Some survivors reported parents responding with angry or passive-aggressive mannerisms. These reactions lacked verbal communication and were interpreted through parents' body language. For example, one survivor explained her father's reaction: 'He was sort of steaming, fuming, and breathing in a clenched jaw, snorting kind of a way'. Some survivors had conflicted perceptions towards this response, as it was less harmful than other verbal reactions they received. This reaction was found to be unproductive to the disclosure experience and damaging to the parent-child connection.

3.1.4 | Harmful Positionality

Parents' positionality had the most pronounced impact on whether their response was perceived as harmful or helpful. For parents who portrayed a harmful positionality, helpful response characteristics were almost always disregarded. Harmful parent positionality involved the parent being *self-focused* and *not believing the survivor*.

3.1.4.1 | Self-Focused Positionality. Across all survivor accounts, portraying a self-focused positionality was perceived as a harmful parent response. Parents with a self-focused positionality oriented the disclosure experience around themselves rather than the survivor. Examples of this included the parent blaming themselves, being defensive, struggling to emotionally regulate, being preoccupied with the personal consequences of disclosure and using the disclosure to confirm feelings towards others involved.

One survivor reported regretting her disclosure after hearing her mother's response: 'Her overall response was "I fucked up as a parent, I wasn't there to protect you."' Another survivor echoed this viewpoint when discussing her mother's defensiveness: 'I think she [my mother] took it personally because she valued and prided herself on being a good mother. She went into defensive mode'. When a parent responded with self-blame or defensiveness, survivors felt obligated to set aside their experience to validate or comfort the parent.

Survivors felt similarly when their parents were unable to regulate their emotions during the disclosure. A survivor described her mother's reaction: 'I just remember her crying because she had been sexually abused as a child. It seemed like she felt really ashamed that she didn't know'. This survivor explained how her mother's response caused her to withdraw:

Every time I've talked to her about stuff, she gets upset with me. It kind of makes me withdraw. I don't want to hurt her. Which is why; I've been raped a few times, and I would never tell her those things.

These responses created a dynamic in which survivors felt responsible for their parents' emotions, diverting attention away from the disclosure.

Another type of self-focused positionality was the parent being preoccupied with the personal consequences of the disclosure. These parents were upset with the survivor for disclosing the CSA. One survivor reported on the harmfulness of his father's response: 'His initial response was, "Do you know what kind of position this puts me in?" Which is one of the worst things they can say'. For parents who responded by being preoccupied with the consequences, participants were survivors of incest.

Lastly, some survivors reported being displeased by their parents using the disclosure to support personal feelings about others involved, such as when one parent learned the CSA occurred in their former partner's home:

One thing I did not anticipate is that it [the CSA disclosure] validated a lot about her [my mother's] relationship with and understanding of my dad and his partner. Then it almost became weird. Like, 'your trauma validates me, so now it's about me.'

Regardless of execution, disclosure responses were considered harmful when parents prioritised their own feelings or experiences over the survivor's.

3.1.4.2 | Not Believing the Survivor. Nine of the survivors reported at least one parent not believing CSA occurred. Survivors found this harmful, and despite any helpful responses, a hindered relationship followed the disclosure. One survivor explained that her father decided not to believe the CSA. Consequently, the relationship resulted in a cutoff.

3.1.5 | Harmful Follow-Up Actions

Harmful follow-up actions consisted of the parent *telling others* about the CSA disclosure, *never readdressing* the conversation, and *dwelling on the CSA*. These actions were not typically executed at the moment of disclosure; however, survivors consistently reported them as impactful to them and the parent-child relationship.

3.1.5.1 | Telling Others. Survivors considered it harmful when their parents told others about the CSA disclosure without the survivor's consent. The category of telling others included reaching out to the perpetrator, disclosing the CSA to friends or family, and communicating indirectly through others. For example, one survivor explained the consequences of her mother contacting the perpetrator: 'I felt like she [my mother] was telling on me. After that, he [the perpetrator] contacted me and there was war'.

Many survivors reported being displeased by a parent disclosing to others, and one survivor explained: 'She [my parent] sent a message to everyone in my entire family, including people that I had not told or planned on telling'. This survivor expanded: 'It felt like she had eviscerated me in front of my entire family. I felt a lot of fear and hurt'. When parents told others about the survivor's CSA, survivors felt deprived of their autonomy around disclosure.

3.1.5.2 | Never Readdressing. Some survivors reported feeling disappointed that the disclosure was never readdressed. Follow-up conversations were especially desired among survivors who received harmful or uninvolved parent responses. Survivors who described harmful reactions repetitively mentioned the lack of further conversation after the initial disclosure. One survivor stated: 'It seemed like that conversation was a day late and a dollar short. It kind of just stopped right there and was never brought up again'. This survivor later said: 'I wouldn't mind if someone asked me, "How are you doing about that?". Maybe a follow-up would be nice'.

3.1.5.3 | Dwelling on the CSA. In contrast to some survivors' requesting more follow-up, others reported parents dwelling on CSA as harmful. These parents did not move on from the disclosure and probed about the CSA frequently. One survivor said: 'I don't really want attention on that [the CSA] anymore. I guess she's worried about it, but I just want to move on'. She elaborated:

I don't mind if she asks about it every once in a while, it just seems to be anytime I see her or spend time with her. I just want to forget about telling anyone. I know that sounds weird. I want people to know that it happened, but I also don't want them to look at me and be like 'Oh, that's what happened.'

As highlighted by this survivor, dwelling on the CSA could limit the survivor's healing.

3.2 | Responses That Strengthened the Relationship

Survivors described strengthened relationships involving communicating more frequently and openly, developing healthy boundaries, fostering feelings of safety and trust, future support seeking from one another, and deepening the physical or emotional bond. Parent responses that strengthened relationships were divided into five subcategories: *helpful statements*, *helpful questions*, *helpful behaviours*, *helpful positionality* and *helpful follow-up actions*.

Many parents whose responses were included in this theme exhibited some undesired response qualities. Even still, these parental responses ultimately resulted in a strengthened relationship due to having overwhelmingly helpful response characteristics. For parents who had generally helpful responses, harmful components of their responses were commonly disregarded. Findings included in this theme were cumulatively reported as helpful to the relationship, despite variation among parents who responded with both harmful and helpful qualities.

It is also important to note that relational processes following disclosure were not always linear. Some parents provided initial responses that hindered the relationship but, through further discussion, provided helpful responses. Parent-child relationships were flexible in their ability to shift between being hindered and strengthened with ongoing CSA discussions.

3.2.1 | Helpful Statements

Parent response statements that survivors considered helpful were *affectionate*, *empathetic*, *appreciative* and *protective*. Helpful statements were often received by survivors as supportive and comforting.

3.2.1.1 | Affectionate Statements. Affectionate statements conveyed warmth and fondness towards the survivor. These statements fostered an emotional connection. Affectionate statements included declarations of love and pride for the survivor. One survivor explained:

For me to break my silence and them [her parents] to say, 'We love you just as much as we did before.' It was exactly what I needed. It was validating for me, it made me realize, 'Actually, this [the CSA] wasn't my fault!'

Survivors reported it as helpful when parents expressed being proud of the survivor. One survivor reported feeling 'validated' and 'recognized' when a parent figure responded with: 'I'm so proud of you. I've seen the changes that you made. I've seen the person you've grown into over the last 4 years'.

3.2.1.2 | Empathetic Statements. Empathetic statements typically included the parent apologising or expressing sorrow for the survivor having experienced CSA. For example, a survivor explained their mother's response: 'Her [my mother's] response was very supportive. She said, "I'm so sorry this happened to you. I wish I could take this away from you."' Empathetic responses were mentioned as helpful by almost all survivors.

3.2.1.3 | Appreciative Statements. Appreciative statements exhibited gratitude or recognition to survivors for disclosing the CSA. One survivor described her mother's gratitude:

I finished talking and she [my mother] has done it so many times now, she said, 'Thank you.' I said, 'For what?' and she said, 'For helping me understand and explaining it to me. I know that must be painful for you.'

Survivors felt appreciation was especially important for survivors who disclose in adulthood because disclosing as an adult is not required and does not impact the CSA occurrence.

3.2.1.4 | Protective Statements. A protective statement communicated the desire to safeguard, defend or advocate for the survivor. This was commonly expressed through the parents wishing they could have protected the survivor. Rather than blaming the survivor for withholding disclosure, these parents portrayed remorse and regret for their pain. A survivor teared up while explaining her father's response to her disclosure:

He [my father] got really emotional and cried about it. He said, 'I wish I had known. I had no idea that was happening. I would have taken you.' It felt better knowing he wished he could have done something

even though he couldn't, he got emotional about it. My dad is not an emotional person, so it felt like he actually cared.

3.2.2 | Helpful Questions

Though some survivors desired less questioning, many reported perceiving questions as helpful. Survivors found it supportive and comforting when parents responded to the disclosure by asking a question that expressed concern. These questions explored the well-being of the survivor. For instance, one survivor described how she perceived her mother's concern: 'She [my mother] was supportive. She asked if I was doing okay'. When questions were perceived as coming from a place of concern, survivors found them helpful.

3.2.3 | Helpful Behaviours

Certain parent behaviours were found to be helpful to the parent-child relationship. The behaviours that survivors considered helpful included the parent *listening* and *providing physical comfort*.

3.2.3.1 | Listening. Parents who exhibited listening cues during the disclosure made survivors feel heard and validated. One survivor explained this: 'They [my parents] just kind of sat, let me talk, and listened'. This survivor reported the disclosure strengthened their bond: 'It was shortly after that that I moved in with them [my parents]'. Another survivor pointed out her mother's non-verbal cues that communicated her listening: 'She looked at me, it's really hard to describe, but the feeling that I got from that look was that 'It'll be okay, we've got you.' I felt supported'. Listening was found to be extremely helpful to the disclosure experience.

3.2.3.2 | Providing Physical Comfort. Physical comfort seeking was reported by many survivors. Although many described hugging as helpful, there was variation among survivors' preferences surrounding the initiation of the hug. Several survivors reported feeling comforted by a hug, but wishing their parents had asked permission. One survivor explained: 'She [my mother] initially started crying and hugged me. It did feel nice during that conversation'. This survivor expanded: 'I would have liked for her [my mother] to seek consent to touch me. Ultimately, I liked it [the hug]. It was therapeutic to be able to cry and have her hold me, but I didn't initiate that'.

3.2.4 | Helpful Positionality

Whether parental responses were determined to be harmful or helpful was highly dependent on positionality. When parents portrayed a helpful positionality, survivors were more tolerant of harmful response characteristics. Helpful parent positionality included the parent being *survivor-focused* and *believing the survivor*.

3.2.4.1 | Survivor-Focused Positionality. Parent responses that focused on the survivor's experience rather than their own were reported as helpful. Examples of this included withholding expressions of doubt, postponing discussions around personal

feelings, and prioritising the survivor's well-being. One survivor explained her mother delayed processing her feelings:

She [my mother] has been very supportive, especially in the initial response. She didn't talk about how she felt until a few weeks later when I asked. In that initial moment, she just felt really bad for what I had gone through and been struggling with.

The consensus among survivors was that despite the challenges associated with withholding personal feelings, it is necessary during the initial disclosure experience.

3.2.4.2 | Believing the Survivor. In all cases that resulted in a strengthened parent-child relationship, parents believed the survivor. This category was foundational to strengthened relationships; therefore, being believed was often inherent and lacked elaboration. One survivor explained her relief when her mother believed her: 'She [my mother] believed me. It felt like a weight had been lifted off my shoulders because my dad didn't believe me or want to listen. Having my mom do the opposite made me feel relieved and at ease'.

3.2.5 | Helpful Follow-Up Actions

Follow-up actions were reported as significant to the disclosure experience, even though they were not typically executed during initial disclosure. Helpful follow-up actions consisted of the parent *respecting boundaries*.

Relationships were enhanced when parents responded to the disclosure by adjusting and respecting the survivor's boundaries. One survivor explained how supportive this felt: 'They [my parents] have been incredibly supportive, my mom especially. With me expressing what I need and boundaries, she made those adjustments, and we've navigated that together'. Another survivor echoed this experience when describing her parent's response to a boundary: 'Although it's something I know that people would crave, a hug would have made me feel uncomfortable. While they [my parents] were not particularly respectful about boundaries most of the time, in that moment, they got it'. Though boundaries fluctuated among participants, survivors emphasised the importance of honouring boundary preferences following the disclosure.

3.3 | Familial Context

The familial context influenced how disclosure responses were interpreted and how responses impacted the parent-child relationship. In essence, contexts had the potential to make responses more or less impactful. Examples of the familial context that impacted the disclosure included *baseline relationships*, *familial perpetrators* and *parental disclosure as an adult*.

3.3.1 | Baseline Relationships

The parent-child relationship prior to disclosure influenced how the parent's disclosure response was interpreted. For example, if a relationship was distant, a harmful response may

not have further hindered the relationship but rather validated the existing distance. A survivor explained how their parents' responses confirmed previous feelings: 'I harbor resentment towards them [my parents] for other things and that just adds to it. I resent them for other things, so having them handle the abuse disclosure like that was the cherry on top'. Several survivors reported that regardless of how their parents responded, they felt animosity towards them for the lack of protection in childhood. Baseline relationships did not necessarily prevent disclosure experiences from being helpful but did influence the survivors' receptivity to their parents' responses.

3.3.2 | Familial Perpetrators

Of the participants, 87% ($n=13$) were abused by a familial perpetrator. Some survivors noted that having a familial perpetrator may have presented challenges to the parental response, especially when the parent had a relationship with the abuser. Furthermore, most hostile parent responses were exhibited by parents who were either currently married to or were a parent of the perpetrator.

3.3.3 | Parental Disclosure as an Adult

Many survivors referenced the context of disclosing CSA as an adult and noted its different purpose than that of child survivors. One survivor explained:

As a child, it is definitely an, 'I'm in active danger. I want protection.' I didn't think I could get that from my parents, so I didn't disclose. As an adult, I'm in charge of my protection now. I know I'm safe and that's not a reason to have to disclose. It's more for validation, healing, and wanting them to be part of that process.

Survivors felt that because adult survivors sought validation and support rather than protection from their parents, some placed more emphasis on the responses' emotional aspects. This desire was also reported by survivors who lacked a relationship with their parent in childhood:

It's been really restorative and healing for me. There's this old brain part of me that's like, 'I have mom. I'm safe. I'm okay.' Which is weird because of the history of our relationship, her really not being present when I was a child.

Survivors sought parental comfort, regardless of baseline relationships or other familial contexts. Though some relationships were already distant, disclosure occurred. This suggests that survivors were still hopeful of their parents' responses, despite the familial context.

3.4 | Theoretical Process

Survivors reported parent responses that were generally harmful or helpful, and the resulting impact of these responses on the

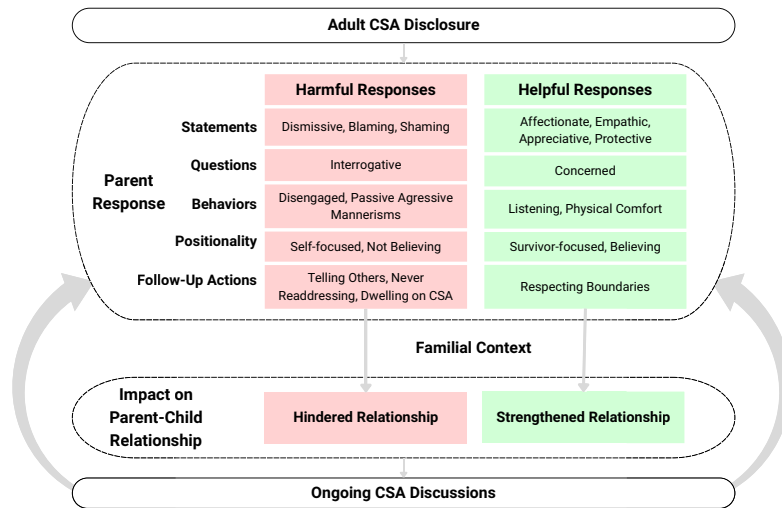


FIGURE 1 | Relational processes throughout adult CSA disclosure to a parent.

parent–child relationship. This process, however, was not linear. Follow-up discussions surrounding the CSA were reported to be just as impactful as the initial discussion. Some survivors reported initially receiving a harmful response, and that the parent–child relationship was hindered for multiple years as a result. Nonetheless, when they had further conversations with their parents about the CSA, if those discussions involved more helpful response characteristics, many survivors reported that the relationship became stronger than before the disclosure. Conversely, some survivors reported feeling that although their parents' responses were initially helpful, further conversations that included harmful response characteristics resulted in a hindered relationship. This highlights how the CSA parental disclosure process is cyclical and evolving. The process is illustrated in Figure 1.

4 | Discussion

Survivors often wait to disclose CSA to their parents until years after the abuse has occurred, and harmful responses from parents have been associated with a variety of negative consequences (Brenner and Ben-Amitay 2015; Hershkowitz et al. 2007; Malloy et al. 2013; Palo and Gilbert 2015). To increase survivors' feelings of safety, there is a need to increase awareness of the CSA disclosure process. Although there is research on barriers to disclosure, as well as influential actors considered when deciding whether to disclose, there is significantly less research on the disclosure process (Tener and Murphy 2014). This study contributes to the literature by identifying specific harmful and helpful parental responses to adult CSA disclosure. Study findings can guide therapists working with families when CSA has been disclosed.

Participants in this study shared that parents' responses to CSA disclosure were impactful and that specific responses hindered or strengthened the parent–child relationship. Statements that harmed relationships were those that were dismissive, blaming or shaming. Questions that came across as interrogative were also problematic. Non-helpful behaviours included parental disengagement or passive-aggressive mannerisms. The overall positionality of parents during CSA disclosure also mattered.

Instances when parents made the disclosure about themselves or disbelieved that CSA occurred were described as hurtful. Lastly, negative follow-up responses included telling others about the CSA without the permission of the survivor, never re-addressing the disclosure, or dwelling on it. Findings of hurtful responses are congruent with existing literature demonstrating how responses to CSA disclosure can cause survivors to harbour strong feelings of anger towards their parents (Hunter 2015) and inhibit future support seeking (Jouriles et al. 2022).

On the other hand, helpful responses from parents included statements that expressed affection, empathy, appreciation, and a desire to protect the survivor. Questions were seen as helpful if they came from a place of concern. Participants appreciated behaviours, such as listening and providing physical comfort, particularly when seeking the survivor's consent to do so. When parents took a survivor-focused positionality, believed the survivor and respected the survivor's boundaries, it positively contributed to the parent–child relationship. Previous literature on disclosure responses also underscores how crucial it is to believe survivors of CSA (Goodman-Brown et al. 2003; Knott and Fabre 2014; Smith et al. 2000).

Notably, although most participants reported that there were both harmful and helpful qualities of parents' responses, the overall tone was consequential. Specifically, if parents gave mainly harmful responses, especially with regard to the position they took in their responses (e.g., made it about themselves, did not believe the survivor), helpful response characteristics were typically downplayed. Conversely, if parents displayed mostly helpful responses, the survivor was able to move past the non-helpful aspects of their response. There is potential for optimism in these findings: although there may be no perfect parental response to CSA disclosure, if one's overall sentiment is one of compassion and concern, there is some room for mistakes. If parents prioritise exhibiting more helpful responses than unhelpful ones, survivors may be more accepting of their parents' overall responses.

Decades of research demonstrate how CSA can leave survivors and their families suffering from a variety of long-term negative consequences (Brenner and Ben-Amitay 2015; Palo and Gilbert 2015;

Kilroy et al. 2014). Despite this, insufficient action has been taken to develop evidence-informed intervention recommendations for parents and systemic family therapists in instances of CSA disclosure. Family therapists can use this study's findings to structure sessions with parents and their adult children who disclose CSA, to help them navigate the complex experiences of both parties, prepare parents to respond supportively, and guide conversations towards healing. For instance, therapists can coach parents to demonstrate effective communication skills while respecting the survivor's boundaries. We can provide upfront psychoeducation on active listening, equipping parents with techniques such as pausing before responding, using body language that conveys that they are listening, asking open-ended questions, paraphrasing for clarity, and resisting the urge to give unsolicited advice. Therapists can help parents express themselves in ways that convey their care and concern. Indeed, these are the responses that participants found helpful in the disclosure process. Results of this study suggest facilitating positive communication can benefit the parent-child relationship and healing process.

Importantly, findings also imply that even when initial conversations hindered the parent-child relationship, it may not be too late to repair. Many participants reported ongoing CSA conversations that enhanced the parent-child connection, even years after experiencing a hindered relationship due to CSA disclosure. These findings highlight the relational and nuanced nature of disclosure responses, as what is perceived as helpful or hindering can vary depending on the survivor, the relational context, and the timing of disclosure. Disclosure is not a single event but a process that may be revisited and continue to evolve over time. For those working with survivors, parents, and families experiencing hardship related to CSA disclosure, providing psychoeducation around helpful and harmful responses and the potential relational impacts could support individuals to revisit CSA discussions needed to make relational repairs.

4.1 | Limitations and Future Directions

While this study contributes to the literature, it is not without limitations. The nature of qualitative research inhibits findings from being generalizable to the population as a whole. Relatedly, the study occurred in the United States (U.S.) and, therefore, the social and health services contexts and U.S. cultural contexts influenced aspects of this research. Future research can expand this work with samples from other countries. The study sample also lacked diversity (e.g., gender, ethnicity, sexual orientation). Due to limited representation, demographic differences (e.g., gender) could not be elaborated upon. Additionally, because most participants reported CSA perpetrated by a family member, parental responses may have been influenced by the familial context. Although this aligns with research indicating that approximately 90% of child sexual abuse is committed by someone known and trusted by the child or the child's family members (Centers for Disease Control and Prevention 2024), further work is needed to quantify these findings and assess whether they hold true for individuals from different backgrounds or in other contexts. For instance, research suggests that gender may influence parental reactions to CSA disclosure (Ullman and Filipas 2005). Researchers could investigate the extent to which gender and sexual identity impact a survivor's perception of parent disclosure response.

Additionally, the context of the CSA was not the primary focus of this study, yet contextual factors are a significant aspect of CSA (e.g., Jonzon and Lindbald 2004; McGill and McElvaney 2023; Tener and Murphy 2015). Future research should explore the influence of context (e.g., relationship to the perpetrator, age of CSA) on the parental disclosure process. Controlling for the baseline parent-child relationship quality when quantitatively assessing relational changes over time would also be valuable. Finally, researchers should continue to investigate positive parental responses to CSA disclosure. Although the present study identified helpful parental responses, they were less prominent than harmful ones. Further research in this area could provide added guidance to parents and helping professionals.

5 | Conclusion

We sought to understand the unique experiences of adult survivors who disclosed CSA to a parent or parent figure using grounded theory qualitative methods. Findings illustrate relational processes through which adult survivors perceive their parents' responses to disclosure, as well as the impact that disclosure responses had on their relationship. An important takeaway is that even in instances where parents' responses included some undesired response qualities, if their overall positionality was one of support and care, the survivor perceived their response as helpful, even in instances when the parent came back to the discussion later with more positive response qualities than originally displayed. These findings can inform parent education, clinical intervention, and future research focused on the CSA disclosure process.

Data Availability Statement

Research data are not shared.

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