

## **Negative reactions of Uganda's parents towards the disclosure of child sexual abuse and perceived psychosocial consequences on survivors**

**\*Florence Turyomurugyendo<sup>1</sup>, Janestic Mwende Twikirize,<sup>1</sup> Eddy J. Walakira & Cecilie Revheim.<sup>2</sup>**

<sup>1</sup> Department of Social Work and Social Administration, Makerere University, Kampala, Uganda;

<sup>2</sup> Department of Sociology and Social Work, University of Agder, Norway.

### **ABSTRACT**

Disclosure of child sexual abuse is the first step toward receiving social and systemic support. While parents are important recipients of disclosure, there is limited evidence regarding their reactions and how survivors perceive them. This study describes parents' reactions that survivors consider as negative and the psychosocial consequences associated. A case study utilizing qualitative research methods was adopted. Narrative inquiry was used to collect data from 14 purposively-selected participants. Six in-depth interviews were held with key informants and 2 focus group discussions with community members. Data was analysed using themes and quotes. Survivors reported that their parents verbally abused them, sent them away from home, forced them to keep the abuse a secret, and denied them education after learning about the abuse. Participants associated the reactions with accumulation of anger, feelings of rejection and loss of self-esteem. Parents' reactions are influenced by a complex web of factors including the struggle to manage their pain, frustration and disappointment as a result of their child's abuse. In this regard, service providers particularly social workers ought to provide knowledge to young people on where to seek professional help and engage in awareness creation at the family and community level to support parents to provide constructive support to children exposed to abuse.

Keywords: child sexual abuse, reactions, disclosure, psychosocial consequences

### **Introduction**

Sexual abuse and coercive sex are pressing concerns globally (Moletsane & Theron, 2017). Evidence reveals that over 35.6% of women worldwide have experienced some form of sexual or physical abuse; either non-partner sexual abuse or intimate partner sexual abuse, or both (WHO, 2017). According to the global and regional estimates of violence against women, the highest lifetime prevalence of non-partner sexual abuse was reported in the African

*\*All correspondence to: [fturyomurugyendo@gmail.com](mailto:fturyomurugyendo@gmail.com);  
[florence.turyomurugyendo@mak.ac.ug](mailto:florence.turyomurugyendo@mak.ac.ug)*

region (45.6%) followed by South East Asia (40.2%) while the lowest prevalence was reported in Europe (27.2%), (WHO, 2013). In Uganda, children continue to be exposed to sexual abuse from relatives, neighbours and strangers. Child Sexual Abuse (CSA) includes unwanted and inappropriate sexual solicitation of, or exposure to a child by an older person; genital touching or fondling; or penetration in terms of oral, anal or vaginal intercourse or attempted intercourse (World Health Organization, 2003).

The recent national Violence Against Children (VAC) survey in Uganda found that 35.5% of females and 16.5% of males 18–24 years old had experienced sexual abuse under the age of 18 years (Ministry of Gender Labour and Social Development (MGLSD), 2018). Of the children aged 13–17 years, one in four girls (25%) and one in ten boys (11%) reported sexual abuse in the year preceding the study. In Luuka district, a rural district where this study was conducted, more than 40% of females have experienced childhood sexual abuse before the age of 15 years (Uganda Bureau of Statistics (UBOS), 2018). While many children in Uganda are exposed to sexual abuse, only 10.1% of the females and 6.4% of the males have sought services for sexual abuse (MGLSD, 2018). Furthermore, 51% of CSA survivors have not disclosed the abuse to anyone (UBOS, 2018). The term “disclosure” in this study is used to refer to the act of a child reporting or telling someone about the sexual abuse regardless of their intentions.

Fear of negative reactions especially perceived responsibility, fear of not being believed, stigma associated with the abuse, shame and guilt are some of the main barriers to disclosing sexual abuse (UBOS, 2018; Ssanyu et al., 2022). Although various factors may be useful in predicting children’s recovery following disclosure of sexual abuse, parental support has received considerable attention. How people in the child’s immediate environment like parents respond to disclosure, and the perceptions they hold and express to them affect their psychological outcomes (Attrash-Najjar & Katz, 2023).

Some studies have reported that higher levels of parental support correspond with more emotional and psychological recovery from sexual abuse (Palo & Gilbert, 2015). Positive parental support was associated with improved child functioning in domains such as general psychopathology, depression and self-image (Wamser-nanney et al., 2019). Positive reactions by parents have been linked with recovery, maintenance of positive self-esteem and post-traumatic growth in the aftermath of sexual abuse, for both males and females and hence it is a great protective factor. Afifi and MacMillan, (2011), reported that children who received nurturing and cognitively stimulating parenting had experienced normal psychological development.

On the contrary, negative responses from parents such as blaming the survivor

and controlling their behaviour have been associated with child-reported depression. Unsupportive, disbelieving and hostile responses are believed to be traumatic and can lead to long-term mental health symptoms (Feiring et al., 2002). Post disclosure parental response has been associated with severity of trauma-related symptoms among children (Gries et al., 2000). In a quantitative study by Feiring et al., (2002) involving adolescents, it was found that those who disclosed sexual abuse experienced more psychological distress compared to those who did not disclose the abuse. Disclosure of CSA has been associated with stressful experiences for parents which may attract negative reactions. The events that follow disclosure such as police investigations, testifying in court, seeking medical services, and conflict with the family especially if it is familial abuse are unexpected and traumatising (Cyr et al, 2014).

These events are associated with secondary traumatisation that emerges from the complex processes that proceed with disclosure which impacts parents' response negatively. In a study conducted by Bolen and Lamb, (2004) involving 92 mothers to whom sexual abuse was reported, almost three-quarters of mothers demonstrated some form of doubt toward their child's allegations in the initial period following disclosure. Guyon et al., (2021) have described how negative reactions from close relatives particularly parents negatively affect the coping process in the context of sexual abuse. Negative responses may be exacerbated by the unequal gender norms and practices that characterise the social ecologies in which girls negotiate their lives, hence it is imperative that disclosure is understood within the context in which it happens.

The social-ecological model developed by Bronfenbrenner in 1979 emphasizes the interaction between the child's social and physical ecologies, from caregivers to neighbourhoods, accounting for proximal and distal factors as influential in determining the successful development and children's resilience to adversity (Bronfenbrenner & Ceci, 1994). This model acknowledges resources in the child's environment such as; having supportive relationships, access to quality education, as well as the enabling cultural heritage as important in facilitating recovery from abuse (Moletsane & Theron, 2017). Evidence has revealed that the psycho-social health of survivors is profoundly influenced by contextual factors, particularly parental relationships. As Ungar et al., (2013, p. 352) noted, "the characteristics of both the individual and the system have the power to influence psychological development".

The ecological analysis of sexual abuse acknowledges the importance of the social contexts in which survivors live, the cultural norms that govern life, power relations and the structures that support survivors (Pessoa et al., 2017).

It emphasizes the situations and environments that contribute to fostering vulnerability and recovery from abuse. According to the theory, different ecologies such as the family, community, institutions and the support and resources that they offer are crucial when thinking about recovery in the context of sexual abuse (Clark, 2021). Previous studies such as those of Ullman & Peter-Hagene, (2014) have focused on examining social reactions to disclosure, mainly highlighting the difference between positive and negative reactions, limiting our understanding of whether different types of reactions have the same effect. A recent study has examined the associations between social reactions to disclosure and sexual outcomes (Therriault *et al.*, 2020).

A related study has attempted to assess child-parental relations after disclosure in developed countries (Wamser-Nanney, 2019) while other studies have focused on the treatment-seeking behaviour of survivors of sexual assault (Palo & Gilbert, 2015). Studies like Jemal, (2012) have focused on the psychosocial consequences of sexual abuse but did not focus on whether survivors disclosed the abuse, the reactions they received, and the effects of such reactions on the psychosocial outcomes. Ullman, (2021) also reported that different types of positive and negative reactions were associated with different coping skills and psychological symptoms, creating the need to move beyond the positive and negative responses discourse. It is in this regard, therefore, that, exploring reactions that invoke poor psychological outcomes is necessary and pertinent.

Based on interviews with adult survivors of CSA, this article seeks to generate localised, context-specific knowledge that reflects the experiences of survivors who disclose abuse to their parents in a rural community in a low-income country, Uganda. This study aimed to describe parents' reactions to disclosure that survivors perceived as negative and the associated psychosocial consequences.

## **Method**

### *Study design and area*

A case study design utilizing qualitative methods was adopted to investigate experiences of disclosure of CSA. Qualitative methods were adopted in this study because previous research on psychological outcomes of sexual abuse has been dominantly quantitative (Godbout *et al.*, 2014). It was also necessary for a considerably deeper understanding of the thoughts, feelings, knowledge, and experiences of participants (Patton, 2002). This study was conducted in Luuka District, in the Eastern region of Uganda. Luuka District was selected because it has been ranked among districts with high sex-related crimes with more than 40% of women having experienced childhood sexual violence before the age of 15 years (UBOS, 2021).

*Sampling procedure*

Fourteen adult female survivors of child sexual abuse were interviewed. Female survivors who experienced penile penetration sexual abuse as described by Faller, (2003) between the ages of 13 and 17 and had disclosed before turning 18 years were interviewed. This age category was preferred to avoid recall bias. Purposive sampling was used to select survivors. Participants were recruited through community service networks in Luuka district which included governmental and non-governmental institutions. Recruitment forms detailing the subject of the study were distributed to organisations. Organisations distributed the forms and survivors who were willing to participate were advised to contact the researcher on the phone numbers that were contained in the forms. Participants who contacted the researcher were assessed for eligibility and those who met the criteria were consented and interviewed.

The participants for Focus Group Discussions [FGDs] were drawn from community members with the help of the Local Council 1 (LC1) chairperson. The LC1 chairperson heads a body of locally elected officials who run a village which usually consists of between 50 and 70 households, housing between 250 and 1,000 people. With the help of the LC1 chairperson, 16 adults were selected to participate in FGDs each comprising 8 participants. Furthermore, six service providers (social workers, health workers, and police) were selected using a purposive sampling technique to participate in in-depth interviews. These participants were selected because they play child protection roles including addressing sexual abuse hence they were knowledgeable about disclosure and response to sexual abuse. In total, the study involved 36 participants.

*Data collection*

Data for this study was collected between January to May 2023. Data from 14 survivors of sexual abuse was collected using the narrative inquiry method. Narratives help to reconstruct and situate data about the experiences of survivors and can also provide good evidence about the everyday lives of research subjects and the meanings they attach to their experiences (Elliott, 2005). The psychological discourse that associates recovery with being intrapersonal made this approach relevant to this study. Narratives were used to obtain stories about events and lived experiences after disclosure of abuse. The researcher was able to go deeper into intriguing topics raised by participants during the conversation. All participants allowed their narratives to be recorded after explaining to them the need for audio-recording the conversations. Digital recorders were used in addition to field notes that were taken by the research assistant. On average narrative interviews lasted 70

minutes. To preserve anonymity, Pseudonyms chosen by the participants were used.

In-depth interviews were also held with service providers, particularly social workers, police, health workers who were purposively selected from organisations responding to CSA. In-depth interviews facilitate collection of rich and detailed information on specific issues of concern that can lead to constructive suggestions (Shneiderman, 2005). In-depth interviews lasted between 40-55 minutes. Two Focus group discussions each comprising 8 participants were held with 16 adult community members and lasted about 90 minutes. This study adhered to ethical requirements of confidentiality and obtained informed consent from participants. All participants verbally consented and signed consent forms before the interviews started. This study was approved by the Makerere University School of Social Sciences Research Ethics Committee as protocol number MAKSSREC 02.2024.634 and the Uganda National Council for Science and Technology as protocol number SS1720ES.

#### *Data analysis*

Interview transcripts were analysed using thematic analysis (Braun and Clarke, 2006). This was followed by, a continuous thorough reading, sifting, sorting, grouping, and re-grouping of the data to gain an understanding of the salient features of the situation in this case reactions to disclosure and psychological outcomes (Bryman, 2008). The first step of the analysis involved the coding procedure which included breaking down the verbatim into meaningful units related to the same concept, categories and themes using inductive reasoning processes. After determining how information fits logically with one another, main themes were developed, each containing sub-themes of the research. In this way, the transcripts guided the themes rather than the researchers having pre-set aspects to look for.

## **Results**

### *Demographic characteristics of participants*

The demographic characteristics of participants such as age at the time of abuse, age at the time of the interview, marital status, and relationship with the perpetrator were captured. Most participants (n=9) were sexually abused by people known to them while (n=5) were abused by strangers. Table 1 below presents further details about the participants.

Table 1: *Demographic characteristics of participants*

<b>Pseudonyms</b>	<b>Age at time of abuse</b>	<b>Current Age of participant</b>	<b>Current Marital Status</b>	<b>Relationship with Perpetrator</b>
<b>Aidah</b>	16	24	Single	Stranger
<b>Brenda</b>	16	25	Single	Employer
<b>Caroline</b>	14	22	Single	Neighbour
<b>Catherine</b>	17	22	Single	Intimate Partner
<b>Clare</b>	13	22	Single	Family member
<b>Gorreti</b>	16	19	Single	Uncle
<b>Hana</b>	14	35	Married	Relative
<b>Kelen</b>	17	27	Married	Stranger
<b>Patricia</b>	15	21	Single	Stranger
<b>Shamim</b>	17	21	Divorced	Intimate Partner
<b>Shantel</b>	14	19	Single	Stranger
<b>Sharon</b>	14	18	Single	Father
<b>Shivan</b>	16	23	Single	Family friend
<b>Suzan</b>	17	24	Single	Stranger

*Source:* Field data 2023

Based on the research questions of this study, two substantive themes emerged from the interviews with participants. The main themes that survivors reported were negative reactions by parents after disclosing the abuse and negative psychosocial consequences. Under each theme, several sub-themes are presented to elaborate on the lived experiences of study participants.

### **Negative reactions by parents**

Participants reported that relationships with their mothers negatively changed when they learnt about the abuse. They reported that the mothers became abusive, and discriminative, sent the survivors away from home, and denied them education. These sub-themes are further described below;

#### *Verbal abuse and discrimination*

Participants associated verbal abuse following disclosure with personal attribution and blame for their sexual abuse. Some participants reported that their parents received disclosure with overwhelming emotions characterised by anger. Participants such as Patricia who was raped together with her sister Aidah by two strangers at 3:00 am when they were returning home from a night club reported that they were blamed by their mother for facilitating their sexual abuse. Patricia's emotions reflected feelings of disappointment as she narrated:

She was disappointed, she even called us cursed children, she hated us.... she told us to leave her home. But leave and go where? Any time

I would annoy her, she would go and collect all my clothes and throw them outside saying that I have to leave (Patricia)

Perceptions of blame were also experienced by survivors who were delayed to disclose until they developed health complications such as symptoms of HIV/AIDs and pregnancy. Verbal abuse by parents was perceived to blame survivors for not having taken action to stop the abuse or report the abuse immediately. Clare conceived and acquired HIV/AIDs from the abuse but she did not disclose the abuse until she realised that she was pregnant. She interpreted her mother's actions as a punishment for delayed disclosure and blamed her for being responsible for her health condition. Constant verbal abuse puts survivors at the risk of breaking down emotionally causing feelings of regret and rejection. Even when participants were verbally abused, some survivors have learnt to cope with the abuse through a survival mechanism as Clare narrated:

We go through a lot like your mother abusing you all the time and you feel like running away from home. My mom used to abuse me a lot, but I was strong, I did not run away from home. I accepted her as my mother. I never retaliated when she quarrelled or abused me. I knew she did it for a purpose, she was frustrated (Clare)

Participants felt that their mothers used disclosure to hurt them which left them helpless. Catherine had just met with her boyfriend who raped her and relocated. She conceived from the rape but she could not trace her boyfriend. She narrates how she could not find peace at home due to verbal abuse from her mother: "I didn't have peace at home, my mother would always abuse me, even when I gave birth, the situation worsened".

Discussions with community members revealed that sexual abuse of children is blamed on parents as it demonstrates parents' inability to perform their social roles of protecting the children from abuse. Sexual abuse is blamed on the female gender which reflects dominancy by the male gender, an attribute that is rooted in the patriarchal culture prevalent in Uganda. Discussions with key informants highlight social practices of apportioning blame to mothers of survivors:

when she came back with the pregnancy, they talked about her, they talked about her mother, they were like your mother always boasts about protecting her children but she has failed with her kids so the mother felt inferior in the community (FGD community members)

The societal expectations and shame associated with sexual abuse were mentioned as contributing to negative reactions from parents including encouraging survivors to keep quiet about the abuse. Due to verbal abuse,

some survivors are left wishing that they could obtain alternative shelter and withdraw from the abusive home environment.

One day I will leave and I will never come back so that she can stay there alone. If I could just get where to go, and I leave this house for a moment. I will have survived; I will not even look back (Shivan)

The findings indicate that negative reactions such as verbal abuse, contribute to feelings of guilt and make the family unconducive for children to recover. Society norms that victimise survivors make it difficult for them to tap and benefit from community resources hence increasing vulnerability to abuse.

#### *Sent away or chased from home*

Participants stated that their mothers sent them away from home to marry their perpetrators. The immediate health consequences of the abuse such as unwanted pregnancy were highlighted as a key stimulus for this reaction. Pregnancies among children are socially undesirable but the stigma may reduce when the child is married off before the pregnancy becomes visible. The reactions also point to the timing of disclosure as most survivors disclosed months after the abuse after experiencing health consequences such as pregnancy and HIV/AIDs. Patricia, Catherine and Caroline who were raped by strangers, intimate friends and neighbours respectively were chased from their parents' homes when their mothers learnt about the rape and the pregnancies that resulted from the abuse.

when she [mother] got to know that I was pregnant she first chased me from home 'Go to your husband [perpetrator]' but I didn't know who my husband was, I didn't know where he lives because I got pregnant by accident, I was raped, I didn't know the owner of the pregnancy. She chased me and told me 'Go to your husband who made you pregnant' even now I don't stay at home, my mother chased me ... I have nowhere to go (Patricia)

Being chased from home meant that survivors had to search for their perpetrators or find somewhere else to live. It also implies that they had to live without one or both biological parents when they were children which increased their vulnerability. The findings reflect a strong influence of social norms on the way sexual abuse is responded to. For instance, among the Basoga where this study was conducted, it is culturally not accepted for the girl to conceive and give birth at her parents' home. Such societal values may trigger the decisions by parents to send away survivors to the perpetrators of rape. Participants who were sent away by their mothers reported difficulty in meeting basic needs and struggled to take care of themselves and the children born out of rape. Survivors associated the response with exposure to immense stress and feelings of helplessness.

Because it is a known community practice to force sexual offenders to marry the survivors, most survivors could not trace the offenders after the abuse because most of the perpetrators changed location in fear of being apprehended and forced to marry. Caroline and Catherine who were raped by their intimate friends whom they had just met were sent away to go and get married but they could not trace the perpetrators. Caroline said: "My parents had told me to go to the man [the perpetrator], so when I went and reached there, I was told he had escaped. My father didn't want me home". Catherine also reported the same experience: "My parents told me to go and look for the father of the child, I didn't have the boy's number, I didn't even have a phone, I had nowhere to go". Participants felt they were being pressured by their parents to leave and get married to their abusers.

Discussions with community members revealed that survivors of sexual abuse are likely to develop unhealthy sexual behaviours when they do not get married after the abuse. This implies that some parents forced children to marry as a mechanism to tame their sexual behaviour as reported:

When a girl is raped, they continue sleeping with other men, they refuse to go back to school... they become hard to manage. It becomes better when she continues and gets married to the man responsible so that she does not continue misbehaving and disgracing the family (FGD Participant)

These findings imply that survivors of sexual abuse may adopt maladaptive coping strategies like engaging in active sexual relations which may in turn contribute to further abuse. Sexual abuse was also linked to discrimination and stigma in the community which limits the survivors' chances of getting married in the future hence this could explain reactions from parents as community members reported: "Even if you are a beautiful woman but as long as you are raped you will have lost value". Survivors of rape were believed to be of less value and yet socially it is expected that a girl is supposed to leave her parents' home and get married which limits the chances of survivor to get marriage partners

#### *Denied school fees*

Participants reported actions by their mothers that limited their opportunities and were disempowering. Withdraw of education meant that survivors were now mature enough to engage in income-generating activities to sustain their welfare. Denying them education was also viewed as a strategy to push survivors into marriage with their perpetrators. At the time of experiencing the sexual abuse, some participants such as Caroline, Patricia, Suzan and Aidah were in school. However, the support was stopped after the abuse as parents argued that it is a waste of money to pay for girls who had lost value due to rape. Caroline was in Primary five at the time she was raped by a

motorcycle rider at 8:00 pm as she was coming from the market, she conceived and got a miscarriage in the first trimester. Her parents withdrew the support towards her education: "I was still in school and when I got pregnant, they stopped paying my school fees....my father said 'now you, they have started raping you, studying will end there' so I didn't go back to school". Similarly, Aidah could not be supported to obtain an education:

Now, I tried so hard to tell my mother to take me back to school but she refused.... she refused because she realized the other [sister] was pregnant. She said she no longer wants and said that we are spoilt.... 'do I have the money to waste on you, you curse?' (Aidah)

Such reactions were associated with feelings of guilt and were viewed as a form of punishment for their negligence. Aidah revealed that dropping out of school was hurting because she lost her friends which she believed contributed to bad thoughts about herself and felt lonely. Discussions with community members reported that sexual abuse is blamed on parents especially mothers for failing to protect and nurture their children well and could lead to a negative reaction from the parents to the survivors.

#### *Parents advised the survivors to keep the abuse a secret*

Treating sexual abuse as a secret made survivors feel that their experience of CSA was being minimised by their parents. Participants felt that trivialising sexual abuse was likely to lead to avoidance of conversations around the abuse and would expose them to further abuse. Participants felt their parents were taking control of their decision-making power and prioritising the desire to preserve the family image at the expense of their experiences. In a bid to avoid shame to the entire family, some survivors were advised to keep quiet about the abuse. Suzan, Gorreti and Sharon who were raped by their uncle and father respectively were encouraged by their parents not to report the abuse to any other person. Sharon disclosed the abuse to her mother and grandmother on the day when she was raped, while she expected her mother to take action for instance reporting the matter to the police, she was shocked when she was advised to keep quiet about the abuse.

She told me to keep quiet that it is shaming to the family; that it would affect the reputation of their family...She only told me not to report the case. I first kept quiet then later I went and reported it to the police. When my grandmother learnt that I had reported at the police station she called my father and told him about it and he fled (Sharon)

Parents advised the survivors to keep the abuse a secret especially where the perpetrator was a relative or when there were no significant physical consequences from the abuse. The social worker at Rape Hurts Foundation narrated: "Some parents also keep these things a secret especially when they

see that the child doesn't have any serious injuries, because of fear to be shamed in the society and the girl may be traumatized for life".

Keeping quiet about the abuse was linked to disempowerment of survivors as mothers demonstrated control of the subsequent actions and decisions following disclosure. Survivors believed that they were not supported and disclosure affected their relationships negatively especially when they reported the abuse to the police which parents interpreted as disrespectful.

### **Psychosocial consequences of parent's reactions**

Three sub-themes emerged from the study regarding the psychosocial consequences among survivors. Most participants reported developing anger as a result of emotional torture, developed feelings of worthlessness and rejection, and loss of self-esteem.

#### *Developing and accumulating anger as a result of emotional torture*

The results indicate that survivors who experience negative reactions from parents may present signs of anger which affects their ability to live harmoniously with their family members. Participants reported developing anger which they sometimes displaced to the weak household members, especially children. Participants reported that the anger they accumulated greatly affected their social life and forced them to withdraw from their family members. The results point to the fact that when survivors are abused and discriminated against by their mothers, they develop hate for themselves and feel as if they are being blamed for the abuse. The negative reactions were found to have ripple effects as the psychological problems that survivors suffer may directly affect the children under their care. Participants such as Suzan reported that she would get overwhelmed and transfer her anger onto her son: "You get annoyed and withdraw... I had anger issues I would get my baby and throw him over there...you hate yourself, people make you feel like you are responsible for the abuse".

Furthermore, the results indicate that survivors who conceive from the abuse are likely to suffer emotional torture which may result in anger as one of the social workers narrated the experiences of Patricia who approached her for counselling: "The insults were about the girl getting pregnant when she was still at her parents' home ... she would break emotionally whenever they would tell her about that yet for her, she knows it was not consensual". The regular abuse by parents and reminding the survivors about the abuse was associated with self-blame which caused anger.

#### *Feelings of worthlessness, no value and rejection by their families*

Participants received reactions that they felt were aimed at disgracing them and cutting their ties with their entire family. The results indicate that negative treatment by mothers such as discrimination and verbal abuse can influence

the perceptions about oneself and the meaning they attach to their lives. Negative reactions make the survivors see themselves as not having the same rights and value as other family members. This was attributed to the stigma and discrimination they experienced from their parents. Suzan reported that the verbal abuse from her stepmother raised sad feelings which made her cry most of the time: "I felt so bad and saw myself as useless and worthless but I was crying for my baby boy". The negative treatment like being denied education affects the care and the bond that children initially had with their parents and abused children may withdraw threatening family cohesion. Reactions involving attempts to chase the survivors from home to get married to the perpetrators were associated with betrayal and rejection by their close ones which was emotionally traumatising.

Aidah reported feeling rejected by her own family specifically the mother who attempted several times to chase her from home and stopped her from using household items: "She doesn't want me to touch anything belonging to her... a basin, soap, she doesn't want". The social workers also cited experiences of discrimination and rejection reported by Clare who was undergoing skills training at the time of the interview:

There is stigma and discrimination. There is one girl who was raped from where she had gone to work and when she came back home, the parents also sent her away, she was traumatized, she was hurt that where she expected to have a home and live peacefully, they have instead neglected her (Social Worker, Rape Hurts Foundation)

Negative reactions and accusations by parents aroused sad feelings which negatively affected the psychological well-being of survivors.

#### *Loss of self-esteem*

The findings show that poor treatment by parents may have a toll on how survivors think about themselves and may be preoccupied with negative thoughts and feelings about themselves. Poor parental treatment may be associated with hatred. Some participants like Aidah reported that they contemplated eloping from home even when they did not have a safe space to go to as he reported: "I will just leave and I will never come back so that she stays with those she loves". Eloping from home implies that the survivors may have to live in the care of other people and may deprive them of parental care and love. Negative reactions affected their sense of belonging as Catherine Narrates: "You lose self-esteem; you feel as if you don't belong among your siblings".

Verbal abuse by parents was taken to mean negligence on the side of the survivor, consenting to the abuse, failing to protect themselves from the abuse and irresponsibility on their part. The findings point to the need to sensitise parents to accept and support survivors regardless of the events that contribute

to the abuse. Catherine explained: "The parents are very harsh, you cannot explain to them that you were raped, there is a need to sensitize the parents so that they can know that we didn't get raped because we wanted". The same feelings were reported by social workers at Rape Hurts Foundation: "Abusing and insulting them, like telling them 'look at you that is the reason why you were even raped', it affects their coping". Regaining self-esteem in the aftermath of sexual abuse is a key indicator of recovery, however, this has been affected by the verbal abuse and feelings of rejection experienced by survivors.

## **Discussion**

This study interrogated the implications of parents' reactions to disclosure of child sexual abuse particularly, reactions perceived as negative. This knowledge is important in guiding interventions to provide social support in the context of sexual abuse. In line with the study aim, the findings highlight the central role that negative reactions by parents can have on the psychosocial well-being of survivors. Negative reactions by parents such as verbal abuse, indeed presented a risk that survivors experienced which caused psychological harm to them. The negative reactions by parents attract unpleasant emotions. Participants felt angry, experienced low self-esteem, felt rejected by their families, were discriminated against and felt worthless. These feelings provoked anger, guilt, shame and self-blame which affects their psychosocial wellbeing.

These findings were in agreement with Kaiser & Sinanan, (2020) who reported that survivors felt ignored by their close ones, felt disempowered, and rejected. In a study by Gagnier & Collin-Vézina, (2016) conducted in Canada, most participants had at least one negative disclosure experience. Similar effects are reported by Guyon et al., (2021) who reported that perceived negative reactions of rejection, disbelief, blame, and violence were found to hinder survivors' recovery and lead to victimization.

Studies such as that of Ullman & Peter-Hagene (2014) have suggested that an ecological perspective is needed to better understand the impact of disclosure responses on recovery outcomes including psychosocial attributes. This perspective implies that the social context of abuse disclosures must be studied to understand the nature of reactions and guide the development of treatment and intervention strategies. The findings of this study are in line with this perspective. Parents' reactions are influenced by a complex web of factors including the struggle to manage their pain, frustration and disappointment as a result of their child's abuse. Contextual factors such as the unhealthy social expectations rooted in patriarchal attitudes, female gender roles influence reactions to disclosure. Similar findings were reported in a related study that linked the pressure to keep sexual abuse a secret to cultural

norms that categorise sexual abuse to be a taboo and a shameful act (Easton et al., 2014).

Parents' reactions are influenced more by the social cultural norms that prescribe blame for sexual activity on the female gender rather than the male gender. Likewise, the findings in Carol & Wambui (2009) showed that even when one is a victim from a legal point of view, within the social-cultural context, sexual activity and misbehaviour are attributable to only the female gender. Social cultural norms around pregnancy and parenthood including defined gender roles, sexuality, virginity, and family honour, influence how parents react to disclosure. Similarly, Guyon et al., (2021), reported that the rape culture where women are often portrayed as provoking the abuse leads survivors into being held responsible for CSA events. Therefore, reactions by parents were influenced by contextual factors at different social ecologies.

The findings of this study have significant policy and practice implications for social work in Uganda. The negative reactions by parents point to the importance of professional support. Children may be at high risk of developing mental health problems if they do not receive adequate support from trained personnel. Professionals may be able to avoid system-induced trauma by providing a safe space for children to disclosure, unlike parents. These findings are in line with a study involving adolescent participants which reported that professional counselling was essential to the coping process (Crisma et al.,2004). The research on disclosure has described mothers as often being in crisis with their children. Negative reaction is somewhat associated with failure to manage anger and other negative emotions.

While survivors construe this as a rejection or discrimination, it must be considered from the perspective of the parent as a secondary victim. Hence mothers may also need time and support to be able to take protective action on behalf of the child. Lovett, (2004), reveals that the process of disclosing may include an internal psychological struggle stemming from the child's attempt to cope with the trauma hence making it necessary for professional interventions.

While this study makes a significant contribution to the disclosure discourse, it had limitations. This study was retrospective in nature. It involved survivors narrating disclosure experiences that happened years ago. Although such an approach may provide narratives that show how events have evolved over-time, it may be limited by memory bias. Adopting a longitudinal design would allow for a better understanding of survivors' experiences over time and capture reactions received closer to the time of disclosure. However, this limitation was addressed by target participants with varied durations since they experienced disclosure. Most participants had experienced disclosure in

the last 3-5 years. While the researcher acknowledges that data collection from adults for retrospective experiences of disclosure is valuable, the collection of present data from young children can facilitate better documentation of lived experiences.

Another limitation could be linked to the selection bias since participants were recruited from child protection institutions. The survivors may overestimate the reactions from parents after making contact with professional service providers. In addition, while the size of our sample was relatively large for a qualitative study, they were prone to a selection bias and the findings have limited generalisability.

### **Conclusion**

Disclosure is a complex process. Addressing negative reactions to disclosure requires a multi-faceted approach. Negative reactions by parents exacerbate social stigma, exclusion and stress yet recovery from the abuse is reflected in the psychosocial abilities of an individual. Living within a context of continuous exposure to abuse and trauma with no safe space poses a different set of psychosocial challenges to survivors. Some actions by parents silence the voices of the survivors and leave the girls to negotiate their lives in the context with limited social interventions necessary to transform their lives and live a normal life. Service providers particularly social workers ought to engage in awareness creation at the family and community level and actively work towards changing societal norms and expectations that disadvantage survivors by running educational programs and public dialogues.

Addressing negative reactions also necessitates support to parents and teaching them about the importance of responding to disclosure constructively. Providing parents and other community members the skills to respond positively to disclosure has ripple effects on the psychosocial well-being of children.

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