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A Qualitative Study of Sexual Assault Disclosure Impact and Help-Seeking on Support Providers

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Abstract

Friends, family, and significant others who receive disclosures of sexual assault from survivors are also susceptible to the effects of trauma. Most studies on the impact of sexual assault disclosure focus on the experiences of friends of survivors but not significant others or family members, and do not examine support provider's (SP's) help-seeking behaviors. This study of 45 matched pairs of sexual assault survivors and SPs explored the impact of receiving a disclosure and dealing with the emotional weight of these disclosures. SPs were impacted emotionally and in post-disclosure behaviors. SPs reported feeling sadness, were triggered, felt angry, and felt inspired by survivors' disclosures. Active cognitive and behavioral reactions included care-taking of survivors and engaging in prevention. SPs discussed different ways they sought help to deal with the disclosure and why they did or did not seek help post-disclosure. We provide recommendations for SPs and service providers using this data from a diverse, community sample.

Keywords

sexual assault; disclosure; dyads; support provider; help seeking

About two-thirds of sexual assault survivors disclose to informal sources such as friends, family, or significant others in search of support (Starzynski, Ullman, Filipas, & Townsend, 2005; Filipas & Ullman, 2001). Generally, informal sources tend to react to survivors positively (Filipas & Ullman, 2001), but it is unlikely that all informal support providers (SPs) are equipped to handle the emotional weight of the disclosure. Research on how SPs are affected by disclosure has mostly focused on formal providers such as therapists, other clinicians and helping professionals. A parallel body of research has started to focus on informal SPs. However, the literature focusing on informal SPs mostly examines how close friends are impacted by a disclosure of sexual assault and most of these studies come from undergraduate student samples. The current study aims to fill the knowledge gaps in the literature on disclosure impact by analyzing content from dyadic interviews done with a diverse, community sample of survivors and SPs representing a range of relationship

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categories. We shed light on how both parties understand the impacts of disclosure and apply these understandings to provide recommendations to researchers and practitioners.

Findings have been mixed regarding whether clinicians and helping professionals exposed to high levels of trauma in their clients take on symptomatology related to PTSD, however there is some evidence to suggest the effect may be more pronounced for those who work with sexual abuse survivors and those who have personal histories of sexual trauma (Elwood, Mott, Lohr, & Galovski, 2011; Pearlman & Mac Ian, 1995). Research on vicarious or secondary trauma among helping professionals is grounded in several concepts that help also underpin research on secondary trauma and the impact of disclosure on informal SPs. Some of the ways in which SP's may be affected by a disclosure relate to *empathic engagement, emotional contagion, and cognitive development* (Sabin-Farrell & Turpin, 2003). Engaging empathically with a survivor may induce vicarious trauma in the SP as they try to identify with the survivor's experiences. Vicarious trauma has been conceptualized as emotional contagion, or the often-subconscious effect of identifying with a person's trauma such that the SP experiences the distress acutely (Sabin-Farrell & Turpin, 2003). SPs who take on the distress of survivors through the process of providing support may form new cognitive schemas about the world to accommodate the disturbing information they have gained. One study of domestic violence counselors found that they experienced a change in worldview and generally felt less safe as a result of working with trauma survivors, which led them to treat people more warily but also led them to be more aware of sexism and gender issues in society (Iliffe & Steed, 2000).

There have been no comparison studies examining the effects of secondary or vicarious trauma on informal compared to formal SPs (such as clinicians), though the bodies of research on both types of SPs share main concepts (Elwood, Mott, Lohr, & Galovski, 2011). While the concepts from the literature on secondary victimization/vicarious trauma and clinicians provide helpful theoretical grounding, this study departs in two distinct ways. First, the population of interest in this research has varied and less structured, formal interactions with the survivor, which will affect the severity of impact from disclosure. Second, this research does not engage empirical or clinical scales to measure PTSD levels, exposure levels, or utilize other tools that have been developed to assess vicarious trauma.

Informal support sources may have emotional reactions to the assault that affect their ability to support the survivor or result in their own feelings of emotional distress that then need to be dealt with. Recent researchers of the impact of disclosure on friends used the term "secondary victims" to describe SPs who are also harmed by the assault (Branch & Richards, 2013; Christiansen, Bak, & Elklit, 2012; Davis, Taylor, & Bench, 1995), suggesting that sexual assault is a shared crisis among survivors and those around them (Emm & McKenry, 1988). Furthermore, the SP's perceptions of the disclosure may impact how he/she reacts to the survivor and lead to changes in the relationship (Ahrens & Campbell, 2000; Miliken et al., 2016), which may further impact the emotional well-being of both survivors and SPs.

Generally, studies have found an array of experiences related to receiving a disclosure. One study found low levels of distress among friends of survivors using questionnaires to explore

the impact of sexual assault disclosure on 60 student friends of survivors (Ahrens & Campbell, 2000). While they found that a minority of friends felt distressed after helping survivors, most did not report distress. For example, friends indicated being angry with the assailant and wanting revenge, and being shocked by what happened. Some also experienced high levels of distress, felt ineffective, and did not feel good about helping. However, largely, friends reported feeling positively about helping the survivor. This finding was later replicated in a larger study of undergraduate friend SPs by Banyard and colleagues (2010), who also found that women were more likely to report they became more afraid for their own safety (e.g., that they would be assaulted), and fearful of the things they used to do more than males in the study. Ahrens and Campbell (2000) noted that future studies could benefit from examining the impact on SPs from both survivor and SP perspectives. Both studies used questionnaires and therefore may not have provided the depth necessary to fully understand SPs' experiences of receiving the disclosure.

An earlier study of SPs of survivors reporting to a victim services agency in New York City suggested that the distress reported by SPs does not vary based on relationship type – friend, family, or significant other – but may vary by gender, as female SPs report greater distress than males (Davis, Taylor, & Bench, 1995). However, this may differ for samples that are strictly SPs of sexual assault, as opposed to Davis's study that also included SPs of aggravated assault victims. Research by Emm and McKenry (1988) suggested that significant others and parents of survivors share feelings of anger, frustration of not knowing how to help survivors, and homicidal fantasies toward rapists. In another study, five male significant others of survivors interviewed about their post-disclosure experience showed that receiving a sexual assault disclosure from their significant other left them changed forever. Specifically, these men reported feelings of anger, guilt, sadness, and depression that tended to impact their lives. For example, the emotional impact of receiving a disclosure from their significant other led to trauma symptoms including sleep disturbances, withdrawal from others, and PTSD symptomatology. They also spoke of longer-term effects of the disclosure including continued painful emotions and the need to engage in self-inspection (Smith, 2005).

Qualitative work has been conducted to explore the impact of disclosure on SPs. Branch and Richards (2013) interviewed male and female college undergraduates who received a rape disclosure from a friend. They also found that friends tend to have feelings of anger, shock, and concern. Additionally, friends also discussed experiencing a change in worldview, such as a lost sense of security and challenge to their previous knowledge about sexual assault. Changes in worldview represent a change in cognitive development, a hallmark of secondary victimization (Sabin-Farrell & Turpin, 2003). Other friends reported experiencing feelings of guilt and engaging in survivor blaming. These findings were consistent for both males and females. Other qualitative research examined the impact of assault on survivors' male significant others and suggested that they also experience feelings of anger – but also blame – as well as challenges to their views of sex (Connop & Petrak, 2004).

A recent notable study in Denmark of 107 SPs (including family members, significant others, and friends) in which SPs were asked about their immediate reactions to disclosure found reactions represented by four categories: 1) cognitive reactions; 2) emotional

reactions; 3) physical reactions; and 4) active reactions. However, as in previous studies, the most common responses were sadness, anger, and shock, followed by being worried about the victim, feeling powerless, and contacting relevant organizations for support. PTSD symptomatology, or symptoms of secondary/vicarious trauma, was also found among SPs (Christiansen, Bak, & Elklit, 2012). This study was limited to individuals who were recommended to participate by survivors seeking rape crisis services, but revealed that the impact on SPs can be emotional, physical, and behavioral.

Secondary victimization symptoms can be more likely to occur in SPs who have their own trauma histories (Elwood, Mott, Lohr, & Galovski, 2011). However, in research on informal SPs, the findings have been mixed. Milliken and coauthors (2016) conducted a study of 69 undergraduates building on this knowledge to identify variables that predict post-disclosure distress among SPs. Contrary to other research (e.g., Banyard et al., 2010), Milliken and colleagues found that SPs with a personal history of assault were not more likely to experience post-disclosure distress.

More than the SPs history with trauma, Milliken and colleagues found that greater relationship closeness and perceived confusion about how to best help the survivor were associated with greater emotional distress. The latter result is similar to findings of Christiansen and colleagues (2012) who found that greater efforts to support the survivor were associated with greater SP distress, possibly due to greater invested effort in the survivor's well-being. Thus, while most research has focused on distress of friends, significant others and family members who have closer relationships to the survivor may be experiencing greater post-disclosure distress.

Research indicates a common source of post-disclosure distress for SPs is confusion or guilt about not knowing how to care for the survivor (Christiansen et al., 2012), which suggests that these SPs also do not know where to seek help for their own personal distress, highlighting a need for research and interventions aimed at SPs. Little research to date focuses on the help-seeking behaviors of SPs following assault disclosure. Christiansen and colleagues (2012) also found in their study of SPs that one-third of SPs felt they needed a little help to cope with the sexual assault disclosure and one third said they were somewhat or very much in need of help. However, only one-third of SPs had seen a psychiatrist in relation to the sexual assault disclosure. Studies that examine the impact of disclosure discuss the need for interventions for SPs (see Ahrens & Campbell, 2000; Banyard et al., 2010; Branch & Richards, 2013) but research has not yet explored the actual help-seeking behaviors of SPs.

Current Study

To summarize, research on the effects of receiving a disclosure has focused on clinicians and helping professionals with more recent studies focusing on informal SPs, who are the most likely SPs to receive a disclosure. Studies to date have examined the impact on friends, primarily in college student samples, and only one of these studies used a qualitative design. Furthermore, recent research appears to focus on friends, leaving family and significant other SPs unexamined in recent qualitative work. Very little research exists on SP's

subsequent help-seeking to cope with the emotional stress of disclosure. During our analysis of the qualitative data, we were guided by several broad research questions: 1) What is the impact of receiving a disclosure of sexual assault on friends, families, and partners, within the context of a close relationship? 2) Are there similarities and differences between survivors and SPs in how they understand the impact of disclosure on informal SPs? 3) Do SPs change their behavior or seek help as the result of receiving a disclosure? 4) What are some reasons SPs have for seeking help outside of their relationship with the survivor and what are some reasons they may not do this?

This study contributes to extant research through qualitative examination of the emotional, and active/behavioral impacts of assault disclosures on friend, family, and significant other SPs. This study extends previous work by exploring both survivors' and SPs' qualitative perspectives on SP disclosure impact and help-seeking to better understand the need for accessible services to SPs suffering post-disclosure distress.

Method

Participants

Adult female sexual assault survivors who disclosed their assault to an informal SP were selected from a large sample who had completed a 3-year longitudinal survey ($N=1,863$) of unwanted sexual experiences and social reactions they received when disclosing assaults (see Peter-Hagene & Ullman, 2016 for study description). Those indicating interest in being contacted for interviews were asked to provide contact information for a friend, family member, or significant other they had told about sexual assault. SPs were contacted later for a separate interview focused on their experience helping the survivor. The goal of the interview component was to identify themes and meanings from both survivors and SPs related to the disclosure, survivor recovery, and the experience of SPs post-disclosure and over the course of their relationship with the survivor. We were also interested in learning how these meanings and themes might diverge between the matched pairs and how this divergence might impact their supportive relationships. Separate interviews with survivors and SPs ($N=90$) took place over two years, resulting in an interview sample of $N=45$ survivor-SP matched pairs. Written informed consent was obtained for all interviews immediately prior to the interview. The study was approved by the University of Illinois at Chicago IRB.

Survivors were an average of 43 years old and ethnically diverse: 75% non-White (African American, Latina, Native American, or multi-racial), 18% White, non-Hispanic, 7% not reported. Approximately 60% of survivors had children. About 76% had attended or graduated from college; 24% were currently enrolled in school, and 38% were currently employed.

SPs were also an average of 43 years old. Two-thirds (64%) were female, and 64% had children. Approximately 66% were non-White (African American, Latino, Native American, or multi-racial), and 19% were White, non-Hispanic. Most had attended or graduated from college (66%) and were currently employed (60%). About half were friends (51%), family (33%) or significant others (16%) of survivors.

Procedures

Semi-structured face-to-face interviews were conducted by one of three trained interviewers on the research team. Interviews ranged from 30 minutes to 3 hours (average 1 hour). Participants were paid US\$30 for interviews. After each interview, interviewers created “summary” documents including interesting points, questions raised, final thoughts, and unanticipated feelings emerging from the interview. Interviews were audio-recorded, transcribed, and checked by other members of the research team. The transcription process included adding brief summaries and identified patterns. Interviewers did the final review of their transcripts. Following transcription, interviewers and other team members met to discuss emerging themes and patterns that were later used to develop a coding scheme.

Measures

The interview protocol for survivors and SPs focused on disclosure of the sexual assault, social support provided/received, and appraisals of the relationship. In the current study, we focused on just one aspect of the interviews: the impact of disclosure on the SP and whether the SP sought support to cope with learning about the survivor’s sexual assault experience. In some instances, survivors discussed how they felt their disclosure impacted the SP, which was also included in the present study. Overall, two codes were included: disclosure impact on SPs and SPs’ help-seeking following disclosure.

Data Analyses

Interview transcripts were summarized to identify patterns and themes that were discussed amongst the research team in a process like that of thematic analysis (Braun & Clarke, 2006). Thematic analysis of interview data allows researchers to investigate the meaning making of participants within the context of their relationships rather than simply taking an inventory of secondary trauma symptomology. Several trials of interview coding and refinement were used to develop a codebook covering individual interviews and themes reflecting matched pair relationships. Coding trials resulted in several revisions of the codebook whereby codes were added, renamed, redefined, and/or combined. The codes are descriptive in nature, summarizing the primary topic of the excerpt (Saldana, 2012). When necessary, we returned to the full interview transcript to gather more context regarding the disclosure experience.

Coding and analysis took place in Atlas.ti Version 7 qualitative analysis software. We identified codes that made the most analytic sense of the data (termed “focused” coding; Charmaz, 2006) and used them to code segments of the transcripts. Specifically, we selected codes that best represented what was happening in the text. We coded the data separately and compared our interpretations on an ongoing basis to achieve consensus (Eisikovits & Koren, 2010). This process took place in several stages. First, pairs of coders separately coded each interview matched pair using the codebook. Second, one coder in the pair then reviewed both coded transcripts to identify any inconsistencies in assigned codes. Third, disagreements were discussed by coders until reaching a joint consensed version by both parties (Patton, 2002). In cases where agreement was not obtained, double coding (i.e., simultaneous coding; Saldana, 2009) was used as a compromise between the two codes. Fourth, the coded transcript was reviewed by the original interviewer for agreement with

assigned codes, and coders discussed any disagreements and corrected coded transcripts, until reaching consensus. During the coding process, researchers created memos within transcripts to highlight relationships or inconsistencies within and between survivor and SP interviews, or to capture unanticipated themes in the data (Charmaz, 2006). Inclusion of memos allowed coders to pay attention to relationships between different matched pair interviews.

Analysis took place using an iterative process in several stages after completion of coding. We analyzed interviews at both the individual level and at the level of matched pairs (i.e., dyadic). First, queries were conducted in Atlas.ti software to identify the number of times each interviewee endorsed a specific code related to the impact of disclosure on the SP and subsequent help-seeking. Second, like that of thematic analysis, members of the research team individually reviewed the quotes for each query in search of patterns and noteworthy findings (Braun & Clarke, 2006). Third, the team met several times to review the identified themes and patterns. During this process, we looked for similarities and contrasts within and between the 45 matched pairs. Finally, as in the final stage of thematic analysis, we named and described the identified themes, which are discussed below.

Results

Emotional Impacts

The emotional impacts of receiving a disclosure varied among the participants. Nine SPs (a mix of friends and family members) expressed sadness mostly at survivors' not having anyone to help them in the moment as well as empathy for the survivor.

“Well, you know, I just wish there was more I can do, to help, [...] it's almost sad, like they have no clue or they just don't know what to do or where to go to get the help, or how to go [about] getting the help...”- Jessica, close friend of survivor

“And it makes me cry when she do [tell me] and I go to my room and just start crying.”- Gwen, sister of survivor

SPs experienced various emotional effects of receiving a sexual assault disclosure, including sadness, anger, and inspiration at survivors' disclosures. These feelings are conceptually linked to SPs' empathic engagement, or taking the perspective of the survivor (Sabin-Farrell & Turpin, 2003).

Another emotional effect on SPs was being triggered by the disclosure and having their emotions from their own sexual assault experience flood back to them.

“So, while she was crying I was trying to hold my tears in to keep from crying [...] So when it happened to her, I kinda knew [...] the guilt that you have... like you're worthless”- Paula, close friend of survivor

This re-experiencing of past emotions is different from feelings of sadness or distress, as being triggered reignites feelings associated with past trauma and can be revictimizing. This theme appeared among four SPs, who were female friends and sisters of survivors. One SP, who had experienced a sexual assault in her teens, related to the survivors' feelings of guilt

and struggled to contain her grief in front of the survivor, similar to the sister who expressed sadness in the above quote. These effects are similar to the concept of vicarious trauma, or the trauma symptomology related to hearing about someone's traumatic experiences that can be exacerbated when one has also experienced trauma in their lives.

"I still remember just kinda staring at the window...my brain just kinda melted right there cause it brought back a lot of like, trauma stuff for me. I was devastated. I was so upset about it but my devastation turned into extreme anger, I was like very, very angry after." - Kate, sister of survivor

One survivor described being impacted by feeling triggered, then devastated. She also reported feeling anger and a mixture of blame and guilt toward the survivor, her sister.

Other SPs also reported the impact of feeling intense anger that was not tied to their own trauma.

"She felt so ashamed, like I don't wanna feel, I was so angry at her for having put her life on the line like that, I didn't let her know it."- Alyssa, friend of survivor

"He started getting angry, violent, punch the wall. Stuff like that. He'd go like, 'why did stuff happen, why do they do stuff to women? How could you touch a baby? How could people do this, like why?! I don't understand, is there a God in the sky? There can't be! There couldn't be no God. It's only evil. It's only evil, people are evil. Why am I here? Questions and stuff.'" - Lisa, mother of SP

"I had all the thoughts about it, you know...in the first time, at her mother's funeral, and I looked, and the whole family looked at me, and the first thing in my mind was, you know, "get up and stab this dude in his neck."- Eric, husband of survivor

The eight SPs who reported feeling angry did not discuss acting on their anger, but felt anger toward the perpetrator, the survivor, and more generally directed toward God and society.

Another set of emotional effects centered on feelings of being inspired by the survivor's ability to get through such traumatic experiences.

"And I was just like oh my God, but it was more like I was inspired because she's still here. She's breathing. She's alive. She's strong. And for her to have been through so much, she has been through a lot with this situation...So I feel special cuz she told me that like, even though it was a bad situation for her to be going through but it meant something to her for her to tell me that..."- Ellen, daughter-in-law to survivor

Feeling inspired by the survivor's journey to overcome their traumatic histories can have a lasting impact on SPs, who may gain a new appreciation for the survivor's strength. One SP also felt honored to be the recipient of the survivor's disclosure. Three SPs spoke on this theme: two family members and one close friend.

Support providers' primary emotional reactions consisted of sadness, anger, and feeling inspired by survivors. SP's did not act on these emotions. The next set of reactions fall into

the category of active cognitive and behavioral impacts, in contrast to the purely psychological/emotional reactions described above.

Active Cognitive and Behavioral Impacts

Beyond the emotional impact, several SPs experienced active cognitive and behavioral impacts to assault disclosure. Some SPs experienced the cognitive development of new schemas, such as changing worldviews, as a result of supporting survivors of traumatic experiences (Sabin-Farrell & Turpin, 2003). The active cognitive and behavioral impacts then was conceptualized from a combination of Christiansen and colleague's (2012) cognitive, physical, and active reactions to disclosure. In our study, we found that these three reactions blended together, where an active cognitive impact often led to a change in behavior. Active cognitive and behavioral impact of disclosures included increased awareness of risks, avoidance of the survivor, care taking, and using the experience to educate others or intervene in problematic situations. Seven pairs discussed the impact of the disclosure as making them more aware of the risks of sexual violence in ways that affected their behavior.

“I could never put my child through something like that, or I would never give advice to anyone that has a daughter to leave their daughter with a boyfriend or with a friend, you know, things are so different out here...”- Jessica, best friend to survivor

“Like even with some friends, like some friends I trust more than others, it's like, I treat certain male friends different, like I got with me two people I trust with changing my daughter...”- Alex, son of survivor

“When he would bring his friends over, he was start[ing to] meeting them outside. I guess he was “I've got two little sisters, I can't have my friends over.”- Susan, mother of SP

“I don't trust like a lot of males. I wouldn't drink with no males cause I don't know if they gonna pull [sic] something, you know what I'm saying.”- Lindsay, daughter of survivor

“Like I had to look at it a certain way like, ‘oh, maybe this isn't the right idea to do certain things in my life, like ok. I wanna go here, but you know, there's a danger there”- Brian, son of survivor

This newfound awareness in the SPs quoted above led to the development of new ways of understanding the world where they realized things were different than before they knew about the trauma – the world felt less safe and they gained newfound awareness about rape culture. This in turn led to some behavioral changes in the form of spreading knowledge and advocating for others. Several talked about being more careful with their female children or grandchildren around male friends and/or family members. In addition to being more careful around men and more protective of their children, SPs and survivors described being more vigilant about their own safety when out drinking or socializing and being less trusting of men in those situations.

Two SPs shared their feelings of being overwhelmed stemming from the disclosure and how this ultimately led to them avoiding the survivor or leaving the relationship altogether.

“And like I told you, there’s a time that I stop coming around. [Survivor] was calling, hey, what happened. Oh nothing, I was making excuses [...]. I have to put it all together and then ask myself is this what I want to deal with, is this what I want to go through. Are you worth me putting my time into and having something positive come out of this in that we both gonna be smiling and we’re both gonna be happy. Or am I just gonna have another relationship like I’ve always had where it was nice in the beginning and then it got bad in the end. But in this case it’s not like that.”- Dan, friend of survivor

“...it was just like nothing was kicking in and I felt at that time I had to let go, I felt really bad about it at that time I just felt, I felt I had given up at the time and it was deep because when it comes to a friendship, you don’t really want to give up on people...” - LeeAnne, friend of survivor

One pair had been friends and previously romantic partners for many years. The SP, a man, reached a point where he evaluated the relationship considering the survivor’s trauma (and difficulty in the relationship) but ultimately decided to stay. The second SP expressing the theme of avoidance or leaving had a relationship that was cohesive at first but the SP felt he had to walk away even though he did not actually want to give up on the survivor. He did not feel he could handle the stress that accompanied the disclosure and subsequent conversations even though he cared deeply for his friend.

Four SPs felt they were being called on to take care of the survivor in ways for which they felt unprepared.

“Well, I do admit it was difficult, I’m not gonna sugar coat that part, I had to be understanding and stuff cause like I had mentioned before, and everything I expressed to you, there was good times and there were bad times, but at the end of the day, I felt like I pulled through the worst and the good times and so, it was just to prove that point that I was there basically no matter what...”- LeeAnne, friend of survivor

They felt the need to go above and beyond their normal relationship duties due to the sexual assault disclosure. This SP felt distressed by the role of supporting the survivor, but ultimately made the choice to actively stick with the survivor.

Engaging in education and/or bystander intervention was the final behavioral impact for SPs we observed in the responses of six SPs.

“I got into a fight over this whole situation because my friend, he wanted to take this girl home with him and I wasn’t allowing it because I already knew what his whole actions was. And we kind of got in a little altercation and he was like, “oh, you can’t save her, why are you trying to save her, you don’t even know her.” But it was the fact that it was just like once that happens, I thought by my moral instinct like, ‘oh yeah’. This is what, this is the altercation that she was talking about that she was in [his mom]. Going to places where she was on different drugs or where

she was drunk and then someone try to take advantage of her. So my anger sort of kicked in, that's what made me like ok, this is a serious problem.”- Brian, son of survivor

“It's really made me more of a sensitive person to not only that issue, but other issues...That happen to women, of course, growing up in a single-mom home, definitely [you] can realize guys can be bad guys. I try not to ever have that situation occur in my life or in my friends' lives as well, I've always tried to be supportive to anybody.” - Nate, son of survivor

The sons of survivors were the most proactive as the result of receiving the disclosure. Two different sons recall channeling their anger and sadness into action. They were spurred into action to intervene in one instance and to work to create an environment where sexual violence is not acceptable. This is particularly poignant given that these SPs are men. Another SP discussed how they could be more supportive to the people around them and felt more confident they were saying the right things.

“Whereas before all of this, I would have been like, “Oh bummer, let's talk about something else” now it's easier for me to give support to other people because, not like I know how, but at least I kind of feel like I can say the right things.”- Freda, friend of survivor

This suggests the impact of a disclosure can be educational and empower people to be more supportive.

SPs were affected emotionally and in more active cognitive and behavioral ways. These manifested as increased awareness of risks, avoiding the survivor, increased care-taking, and using the experience to educate others or intervene in problematic situations. One son even engaged in bystander intervention as a result of being affected by his mother's disclosure. The next theme is a specific form of behavioral response: SP help-seeking.

Post-Disclosure Help-Seeking

A prominent theme (related to the active cognitive and behavioral responses) in our data was SPs who sought help because of receiving a sexual assault disclosure. Twenty-three SPs (51%) sought help from an external source (i.e. someone besides the survivor). Seven (30%) of these SPs sought formal sources, such as mental health counselors and eleven (26%) sought informal sources of support (SPs for SPs). There were five (22%) SPs who sought both informal and formal support for the impact of the survivor's disclosure, and twenty-two SPs (49%) who did not seek out any help.

Those SPs who sought help did so from both formal and informal sources. SPs discussed having conversations with friends and family to cope with post-disclosure distress.

“I feel better when I open up and talk about it...I just feel like it's a pain and I just need to let somebody know” – Hannah, ex-wife and friend of survivor

One SP discussed the value of speaking with other informal sources about the emotional weight she was carrying after receiving the disclosure and how seeking help from others helped ease her emotional pain.

One support provider discussed her need to talk to others both for herself and for how to best support the survivor.

“I felt at that time I didn’t have the answers that was needed for me to understand so it was kind of, as if I needed another person to assist on the situation, not just for myself, but also for the situation” – Jill, friend of a survivor

Some SPs discussed the survivor’s experience with others not just for emotional support but also for seeking advice about how to best support survivors, or to inform other SPs of the survivor’s emotional state. This replicates past findings that show SPs want to learn more about how to provide the best support for survivors (Christiansen et al., 2012).

Other SPs sought post-disclosure help from formal sources such as personal therapists or women’s support groups.

“So you could see I never had anyone to sit down and go, oh my god, I mean I may have told a therapist or two over my life, I may have had like several therapists and they’re all like, my god that’s awful.”- Dan, partner of a survivor

SPs discussed their need to talk through frustrations, anxieties, and sadness brought to the surface as a result of survivors’ disclosures. Even when SPs did discuss their secondary trauma with therapists, it was not the main focus of their therapy sessions. Further, the SP described a supportive reaction from their therapist but ultimately did not experience the therapeutic relationship as a strong form of support.

Survivors sometimes encouraged SPs to seek help:

“If it wasn’t for [Survivor]- she told me that I need to go talk to a therapist. Yeah, I feel pretty good.”- Maria, sister of a survivor

This survivor observed signs of distress in her sister after disclosing to her, and suggested that she seek counseling. The SP discussed in her interview how taking the advice from her sister was beneficial. This illustrates how others in the SP’s life may sometimes be able to witness the impact of disclosure better than the SP herself.

In mother survivor-son-SP relationships, mothers could send their children for support if the child was still a minor and did not have as much choice in the matter.

“I offered him counseling and he went to talk to a counselor. It didn’t help him because he said that he just sat and talked about sports with his psychiatrist.”- Cheryl, mother of SP

“I don’t really want to talk about it, it’s in the past, it’s nothing I can do about it.”- Nate, son of survivor

Unsurprisingly, the son did not find counseling to be very helpful as he was not very committed to the process. In another pair, Nate’s mother offered counseling services to her son and occasionally went to group counseling services together. She felt that disclosing her sexual assault experience impacted him emotionally, and he needed someone to talk to. During the interview, Nate did not mention his time in counseling and did not share his mother’s feelings that discussing the disclosure with others would be helpful. Another SP –

the mother of a survivor – indicated they had gone through counseling and stopped, but the interview process made her realize she needed to go back for more counseling. This suggests the impact of receiving a disclosure can have lasting effects on SPs and the process of healing from secondary trauma is not static.

Barriers to Post-Disclosure Help-seeking

There were nearly equal numbers of SPs who sought help (n= 23) as those who did not seek help (n= 22). Some SPs did not seek help simply because they did not feel it was needed. Others did not seek help because they viewed help-seeking as a violation of the survivor's trust or they were unaware of any formal sources that could assist them.

Of those who did not seek help or talk to anyone about the effect the survivor's disclosure had on them, many told the interviewer they did not want to break the survivor's confidentiality and therefore they did not tell anyone about the disclosure, even if the SP was experiencing distress.

“That is not permitted. You don't do that [tell someone about disclosure].”- Anna, sister of survivor

“She came to me in confidence and I feel it's only right that I keep that confidence.”- Danielle, friend of survivor

“It's a really personal issue no matter what...I could be sittin' somewhere all day long like 'oh my god I need to....' But it's just confidential. I feel like she put her trust and confidence in me to tell me, because it's nothing she can tell someone... that's like breaking the bond. Like breaking the trust of being able to come to me and talk to me.” – Renee, friend of survivor

“I wanted to talk to my sister about it, but then when I looked at her I'm like you talk too much [about others]. You see what I'm saying.”- Lindsay, daughter of a survivor

One SP discussed that she needed to talk to someone about it, but did not have anyone she could speak to that would not tell others about the survivor's experience. This SP was concerned about others breaking the survivor's confidentiality, and therefore was unable to talk to anyone about her post-disclosure emotional distress. They often viewed talking about the disclosure as a form of betrayal or potential violation of trust.

Though many SPs did not seek help, they still felt the emotional weight of disclosure and discussed how not having support makes coping more difficult.

“My aunt who's gone now, my mother's older sister was someone that I could kind of talk to and who could understand. But she's gone.”- Lisabeth, mother of a survivor

“I don't know where I would go for that or if I qualified, if I want to get in line for victims that need counseling too. But no I didn't take advantage of any of that and probably could have benefited from that a little bit but there are plenty of sexual

assault victims that could benefit from it that are waiting in line so.”- Jon, husband of survivor

Some SPs indicated they wanted to seek help but did not know where to get it. Others expressed concern whether they would even qualify for services that may be designated for survivors. Some also worried that using services would take away services from survivors.

While the SP's who sought help dealing with the impact of receiving a sexual assault disclosure reported feeling unburdened by doing so, many SPs did not seek help from anyone. SP's who did not seek help felt that disclosing to anyone about the survivor's trauma would be a violation of trust and confidentiality. SPs also did not know where to seek help and perceived that available services were for survivors only.

Discussion

The present study examined the impact of sexual assault disclosure on 45 friend, family, and significant other SPs, as well as their help-seeking behaviors to cope with the weight of receiving a disclosure in a sample of survivor-SP dyadic matched pairs. Our study extends the existing literature by exploring the impact of disclosure in a qualitative community sample of a variety of SP relationship types. We also explored the reasons why some SPs sought help and others did not – a novel contribution that adds to the knowledge on this topic.

Disclosure Impact

We found that SPs were affected both emotionally, and active cognitively and behaviorally. These results support some of the theoretical concepts that ground the literature on secondary trauma and formal SPs, including empathic engagement, vicarious trauma, and cognitive development of new schemas. Our results also partially support extant research that found SPs were impacted in four ways: 1) cognitively; 2) emotionally; 3) physically; and 4) actively (Christiansen, Bak, & Elklit, 2012). Contrary to earlier research, we found that most SPs were impacted by disclosure as opposed to not being affected at all (Ahrens & Campbell, 2000; Banyard et al., 2010). While we found similar effects on SPs' feelings (e.g., sadness, anger, worry), we found that the way SPs were affected could be categorized into emotional and active cognitive and behavioral impacts, as emotional, cognitive, and physical effects could not be clearly separated. This may be due to the quantitative method of Christiansen and colleague's (2012) study that more cleanly categorized the effects, whereas our qualitative method revealed more interrelated post-disclosure affects.

We found that SPs were emotionally impacted in several ways including feeling sad, triggered, angry, and inspired by the survivor's disclosure. These findings partially support previous studies that found SPs experience feelings of shock, anger, sadness, guilt, and a desire for vengeance (Ahrens & Campbell, 2000; Branch & Richards, 2013; Christiansen et al., 2012). SPs in this study felt sadness for the survivor that continued long-term for some SPs. Similar to previous research (Ahrens & Campbell, 2000), some SPs felt guilty for not knowing how to support survivors. These findings illustrate a need for support services for SPs, as well as education on how to positively respond to sexual assault disclosure.

However, not all emotional effects were negative. This is consistent with other research that found SPs tended to feel positive about helping their friend (Ahrens & Campbell, 2000). Specifically, SPs in our sample reported feeling inspired by the survivor and honored to be a recipient of disclosure. SPs in our sample discussed the actions that occurred out of the inspiration they derived from the disclosure including being better able to support others and taking on an advocacy role. Overall this shows that disclosure can also be a positive experience for SPs by empowering them to intervene, advocate, and be more supportive to others. We also found that SPs were impacted through their post-disclosure behaviors including increased awareness of risk, avoidance of the survivor, and using the experience to educate others or intervene in situations. This is similar to previous research showing that SPs tend to experience challenges to their sense of security, worldviews, and previous knowledge about sexual assault (Connop & Petrak, 2000). We found that SPs may turn these feelings into action such as intervention, prevention, and education of others.

Our study examined the impact of disclosure for family, friend, and significant other SPs. Davis and colleagues (1995) found that distress reported by SPs did not vary by relationship type but varies by gender. Whereas Christiansen and colleagues (2012) did not find any gender differences though their sample largely consisted of female SPs. Our study did not specifically examine gender differences but we did find more severe emotional reactions from SPs who had their own sexual assault, all of whom were female. We also observed an effect between mother survivors who disclosed to male child SPs, where the child SPs experienced a profound active cognitive and behavioral impact. Male child SPs explained in their interviews that hearing of their mother's assault at a young age contributed to their definition of consent and impacted their views of women, including their mothers. While this sample was small, we did see a gender effect in parent/child relationships. Men were also overrepresented as romantic partners. Our results suggest that relationship type and gender maybe be confounded in their effect of assault disclosure. Past research is mixed regarding gender differences in the impact of disclosure, which may vary by method and sample, so needs to be disentangled in future research.

Our study did not explicitly look for changes in the relationship following disclosure, but the cognitive impact of disclosure in some situations led the SP to make changes in the relationship. Two male friends discussed how feeling overwhelmed by the disclosure led them to avoid the survivor and contemplate cutting ties. While most relationships with friends, family, and significant others are strengthened following disclosure, a substantial number of relationships deteriorate or are strained (Ahrens & Aldana, 2010). Research has shown that disclosure can lead to problems in the relationship including communication, insecurity of how to deal with the situation, excessive worry for the victim, and problems with how the survivor copes (Christiansen et al., 2010). However, for the SPs in our study, it appears that effects on the relationship stemmed from being overwhelmed by how to care for the survivor and fatigued by ongoing support, further underscoring a need for services for SPs.

We found that SPs who experienced trauma in the past tended to have a stronger emotional reaction to disclosure, which included feelings of being triggered. Research on clinicians who provide support to survivors shows that being exposed to traumatic experiences,

reactions, and subsequent cognitive distortions can trigger reactions to their own trauma experiences (Pearlman & Saakvitne, 1995). SPs who have distress that they have not dealt with yet may not only experience an exacerbated disclosure impact, but may also not be equipped to respond to and support the survivor as they have not yet managed their own feelings. Conversely, SPs who have trauma experiences and have effectively managed their feelings may be better able to provide support as they know first-hand what is helpful and hurtful in the aftermath of assault. This highlights the presence of SPs as survivors and illustrates a need for ongoing support for survivors.

Support Provider Help-seeking

Approximately half of SPs sought help from informal and/or formal sources following disclosure, and half did not seek help. SPs who sought help did so to cope with their own emotional distress but some also solicited advice on how to best support the survivor. This is not particularly surprising, as not knowing how to support the survivor has been found to be a source of distress for SPs (Emm & McKenry, 1988). Some SPs discussed how it was the survivor who urged them to seek help due to the visible emotional distress the SP was experiencing following disclosure, which underscores the need to better understand how SPs feel post-disclosure and cope with feelings of distress. SPs may not be able to recognize when they are feeling distressed, which suggests a need to talk to professionals to identify their feelings separate from the survivor.

Three survivors commented on the help-seeking behaviors of the SP, two of whom were mothers. In both cases, the mothers discussed the visible impact their disclosure had on their children and put the children in counseling to cope with this distress. Interestingly, both adult children discussed in their interviews feeling emotional weight after disclosure – including having to care for their mother – but did not talk about the counseling they received when they were younger. This disconnect highlights a need to specifically research the impact of disclosure and help-seeking through dyadic methods because, similar to social reactions, survivors and SPs may not always perceive their post-disclosure experiences the same way (Davis & Brickman, 1996).

Barriers to Support Provider Help-seeking

Among those who did not seek help, we found that SPs did not seek help because 1) they felt that speaking to someone else about the survivor's experience was breaking the survivor's trust and confidentiality, and 2) they did not know where to seek services or felt they could not seek services geared toward survivors. A past study found SPs may feel unsure of their abilities to support survivors (e.g., not knowing what to say), despite feeling overall satisfied with the support they gave to survivors (Christiansen, Bak, & Elklit, 2012). Our findings suggest SPs may not think their feelings of distress are serious enough because they were not the primary victim, and therefore never seek help or cope with their feelings in an adaptive way. These findings also show that SPs need support, but are often unable to access it, because they do not know where or how to seek relevant services. This highlights a need for services geared toward SPs where they can discuss their feelings safely and receive validation. Family, friends, and partners of survivors need to be made aware of the availability of counseling centers geared to survivors through outreach and advertising

(Branch & Richards, 2013). This outreach is important considering the results of this study and another study that found high levels of interest among survivor's friends, families, and partners for specialized services geared to SPs (Christiansen, Bak, & Elklit, 2012).

Implications for Researchers and Practitioners

Most SPs are affected emotionally and behaviorally by hearing about sexual assault and would benefit from formal support services such as counseling/therapy. However, many do not seek this help because they do not believe they deserve it, they do not know where to go, or they do not see how they are being negatively affected in their role as a SP. Needing services but being unable to find or access them can lead to greater feelings of trauma for SPs (Christiansen et al., 2012).

Our findings show a need for safe spaces where SPs can talk about their feelings and experiences providing support to trauma survivors. Feelings of distress should be normalized for SPs so they do not feel bad for any vicarious trauma they may be experiencing. Counselors can also help SPs understand that they are a confidential source of support and the SP is not in jeopardy of betraying the survivor's confidence, as several SPs expressed this fear of betrayal as a barrier to seeking their own services. Furthermore, these services should be advertised specifically to survivors and SPs to break down the barriers to help-seeking. SPs may not know they are "allowed" to utilize services that are generally regarded as survivor services. Survivors may recognize the distress felt by SPs, but they may not know to suggest counseling to the SP. Future research should include focused interviews with SPs who sought help and those that did not to examine the existing barriers and most helpful services (for those who sought help).

Support groups for SPs of specific relationship types may be a helpful service for SPs to discuss the effects of disclosure and to learn that it is common for SPs to feel distress following disclosure. Therapeutic services geared toward survivors and SPs should be made available, perhaps where sessions are oriented to survivors and SPs together and individually. Generally, these services have been geared towards spouses, but it is apparent that friends and family are also in need of support. Some SPs in our sample engaged in their own forms of coping since they were unable to access services. Resources should be available that teach SPs effective ways of coping, particularly for those who do not receive services. Research should focus on how SPs engage in coping if they have experienced vicarious trauma.

Beyond a need for interventions to cope with the distress associated with disclosure, SPs are also in need of resources about how they can help survivors. Not knowing how to respond to a survivor can be a source of distress for SPs (Christiansen, Bak, & Elklit, 2012). Therefore, teaching individuals how to provide positive support to survivors can reduce distress for SPs and improve post-assault adjustment for survivors through receipt of positive social reactions. This could be accomplished through preemptive sensitivity training for disclosure at new student orientations when campus sexual assault policies are discussed or training in residence halls, or this information could also be integrated into bystander intervention programs (Branch & Richards, 2013; Banyard et al., 2010). Additionally, future research could benefit from examining what survivors are looking for when they disclose to SPs.

Survivor needs may vary based on the context of the relationship, assault characteristics, and characteristics of the survivor. Future research should include interviews with survivors specifically about this topic.

Limitations

Our study was the first of its kind to examine the effects of sexual assault disclosure from perspectives of both survivors and SPs in a qualitative community sample. However, there are a few noteworthy limitations to this study. First, this study was a small, volunteer, convenience sample of dyadic matched pairs who were initially solicited to discuss the disclosure and social reactions. Second, our dyadic data was somewhat limited regarding the impact of disclosure, as this study did not explicitly set out to answer this question. In several instances, we provided the survivor's perspective on the impact of disclosure, but not consistently across the 45 matched pairs. Interestingly, however, in several cases we found inconsistencies in the accounts of survivors and SPs but there was not enough information from survivors on this topic to wholly examine both sides of the matched pair. Future research should examine the impact of disclosure on SPs in a larger dyadic sample. Third, this study was limited by the retrospective design. Memory bias could have influenced accounts of feelings following disclosure. Time elapsed since the disclosure and participating in this research may have influenced how SPs recall their feelings after disclosure compared to how they feel at the time of the interview. Still, the retrospective design allowed time for matched pairs to gain perspective on the disclosure experience, which may have provided greater depth into understanding the impact of disclosure. Despite these shortcomings, this study extends current knowledge on the impact of disclosure on SPs and their subsequent help-seeking behaviors.

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