"I Keep That Hush-Hush": Male Survivors of Sexual Abuse and the Challenges of Disclosure

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Disclosure is a prominent variable in child sexual abuse research, but little research has examined male disclosure experiences. Sixteen male survivors of childhood sexual abuse were interviewed regarding experiences of disclosure. Analytic techniques included a grounded theory approach to coding and the use of conceptually clustered matrices. Participants described distinct personal (e.g., lack of cognitive awareness, intentional avoidance, emotional readiness, and shame), relational (e.g., fears about negative repercussions, isolation), and sociocultural (e.g., lack of acceptance for men to experience or acknowledge victimization) reasons for their struggles with disclosure. These results highlight that barriers to disclosure exist in multiple domains of experience and are encountered across the lifespan. Implications for future research and clinical interventions are discussed.

Keywords: sexual abuse, male survivors, narrative analysis, disclosure

Male victims of childhood sexual abuse have not yet garnered the same amount of attention from researchers as their female counterparts, in spite of estimates that 16% of men have experienced some form of sexual abuse (Finkelhor, Hotaling, Lewis, & Smith, 1990). Although some studies have raised controversial questions about the extent of harm sexual abuse causes men (e.g., Rind, Tromovitch, & Bauserman, 1998), many studies have indicated that there are often serious psychological repercussions for male survivors. Several studies have suggested that the level of symptomatology experienced by male survivors of child sexual abuse is comparable and perhaps even greater than that of female survivors (Garnefski & Arends, 1998; Garnefski & Diekstra, 1997; Ullman & Filipas, 2005). For example, sexually abused boys are significantly more likely than abused girls to exhibit problem behaviors, including aggressive and criminal behaviors, drug and alcohol use, truancy, and suicide attempts (Garnefski & Arends, 1998).

In response to documentation of the sequelae for male survivors, a treatment literature focusing on boys and men has begun to emerge. This growing literature points to the importance of understanding and addressing gender socialization processes in treatment programs (Gartner, 1999; Gartner & Pollack, 2005; Lisak,

1995, 2005). Some clinicians have stressed concerns about the ways male socialization affects survivors and emphasize that it is important for counselors and groups to confront cultural stereotypes associating victimization with femininity, as well as to address male norms that suggest that precocious sexual activity is simply "initiation" rather than abuse (e.g., Gartner, 1999). Because acknowledging and disclosing the memories, thoughts, and feelings associated with abuse and trauma have long been viewed by clinicians as important aspects of healing (e.g., Harvey, Orbuch, Chwalisz, & Gerwood, 1991), other clinicians point out that male socialization can force men to deny or minimize experiences of victimization as well as their subsequent pain and suffering, thus exacerbating symptoms and hampering recovery (see Lisak, 1995, 2005). In most cases, disclosure is critical to securing treatment and/or early intervention. Understanding men's disclosure experiences, including any barriers that may have been encountered, is a vital step toward alleviating male survivors' considerable, if often silent, suffering.

Sex and Disclosure

Disclosure is a prominent variable in child sexual abuse research, particularly in descriptions of male victims. Several studies highlighted in a review of research indicated that many male participants revealed their sexual abuse history for the first time as a result of participation in the research (Dhaliwal, Gauzas, Antonowicz, & Ross, 1996). Despite evidence that male survivors underreport their abuse experiences (e.g., Lab, Feigenbaum, & De Silva, 2000), many quantitative and qualitative studies of disclosure have relied exclusively on samples of female survivors (e.g., Jonzon & Lindblad, 2004, 2005; Kogan, 2004; Staller & Nelson-Gardell, 2005). These studies, like the treatment literature, point to the importance of disclosure for abuse survivors. Studies of female

survivors have suggested that disclosure-related events may be even more strongly related to the long-term consequences of childhood sexual abuse than are the characteristics of the abuse itself (Jonzon & Lindblad, 2005) and that prompt disclosure moderated symptoms and reduced the likelihood of further victimization (Kogan, 2004).

Other quantitative research with female survivors has explored the impact of disclosure types (i.e., purposeful or accidental, delayed or prompt) on psychological functioning and has illustrated how complicated disclosure can be (Nagel, Putnam, Noll, & Trickett, 1997; Roesler & Wind, 1994; Ruggiero et al., 2004). The authors of one study of female survivors focused on identifying methods of disclosure that would contribute to better outcomes and found that participants in their study who purposefully disclosed had greater anxiety and more coping difficulties (Nagel et al., 1997). A second study of women's experiences found that a significantly higher prevalence of posttraumatic stress disorder (PTSD) and major depressive episodes were related to delays in disclosure, whereas nondisclosers had lower PTSD and depression rates (Ruggiero et al., 2004). Although these studies of women's experiences enrich our understanding of disclosure and the ways it may impact survivors, they may not reflect men's experiences.

Studies comparing men and women have yielded mixed findings regarding disclosure rates or patterns of disclosure. Some studies have found no differences in disclosure rates (e.g., Goodman-Brown, Edelstein, Goodman, Jones, & Gordon, 2003; Sauzier, 1989), whereas other studies have indicated that underreporting and additional delay is a significant problem for male survivors (e.g., Finkelhor et al., 1990; Lamb & Edgar-Smith, 1994; Peake, 1989). One recent investigation reported that, among the men and women in the sample, men were not only less likely than women to have disclosed their abuse but also less likely to have encountered positive reactions (Ullman & Filipas, 2005). Numerous studies containing both male and female survivors in their samples have analyzed disclosure experiences without exploring either sex or gender as a potential issue (e.g., Alaggia, 2004; Jensen, Gulbrandsen, Mossige, Reichelt, & Tjersland, 2005), and thus key insights regarding the way these experiences may differ for male survivors are missing. Overall, little research has examined the disclosure experiences of boys and men, and the available research has yielded mixed findings, suggesting that further research is necessary to understand the disclosure experiences of male survivors.

Qualitative Research on Disclosure

In order to complement findings from quantitative research with understandings of lived experiences, a growing number of studies have begun to utilize qualitative methods to explore the experience of disclosure. As with quantitative studies, however, much of this qualitative research has focused exclusively on the experiences of female survivors (e.g., Gilligan & Akhtar, 2006; Staller & Nelson-Gardell, 2005), involved only one or two male participants (e.g., Crisma, Bascelli, Paci, & Romito, 2004; Somer & Szwarcberg, 2001), or disproportionately quoted women's voices over men's in analyses (e.g., Jensen et al., 2005), making it difficult to discern men's experiences. One study of resilient female survivors found that almost all of the participants had come to greatly value disclosing to friends and family (Grossman, Cook, Kepkep, &

Koenen, 1999). Other qualitative studies with female participants have begun to explore some of the ways social factors can prevent disclosure (Gilligan & Akhtar, 2006) and have provided essential information about the lived experience of disclosure and the meanings women have made of their disclosure experiences (e.g., Sorsoli, 2004); however, such studies can only raise questions about the ways men would speak about and understand their disclosure experiences.

Alaggia's (2005) analysis of the disclosure of child sexual abuse is exceptional because it highlights the presence of unique themes in male and female survivors' disclosure narratives. For men, the themes that inhibited or precipitated disclosure were sex or gender related—fear of being seen as homosexual, feelings of isolation due to the belief that boys are rarely victims, and fear of becoming an abuser. Women, Alaggia suggests, appeared to have more difficulties disclosing because of internal confusion about who was responsible for the abuse and fears of being blamed or not believed. Although Alaggia makes an admirable effort to present men's and women's voices equally throughout her analysis, because men's and women's experiences were aggregated, certain nuances of the men's experiences may have been overlooked. Qualitative studies like Alaggia's have taken the important step of exploring, in greater depth, the meaning of disclosure, factors in the decision-making process, and implications of revealing current or past experiences of abuse. However, men's experiences of revealing a history of sexual abuse continue to be understudied, resulting in a gap in our understanding of this phenomenon; the current qualitative analysis was designed to help bridge that gap.

As others have noted (e.g., Jones, 2000), there is a great deal of variation in the way the term *disclosure* is used. We conceptualize disclosure as conveying or attempting to convey the experience of abuse to another person (see Jones, 2000)—in other words, this study is about telling someone (or not telling) about the experience of being sexually abused, regardless of whether official reports were made to authorities. Further, like other researchers (e.g., Teram, Stalker, Hovey, Schachter, & Lasiuk, 2006), our intent was not to analyze the difference between male and female survivors but to offer an analysis of male experiences and to consider these experiences in light of what previous research has suggested about female survivors. By examining disclosures among a sample of men, our goal was to extend the current literature by exploring the nuances of men's lived experiences. Primarily we sought to understand the following three issues with regard to male survivors of childhood sexual abuse: (a) To whom and in what contexts have they disclosed these experiences? (b) What do they have to say about these disclosure events? and (c) What are their perceptions of the positive and negative aspects of their disclosure experiences, including both incentives and barriers to disclosure?

Method

Research Team

As Morrow (2005) suggests, qualitative researchers, like quantitative researchers, can have biases that influence their work and that are important to address. Luttrell (2000) has proposed that it is both possible and necessary to arrive at methods that are "good enough" by attending to one's biases and contexts and sharing them with the reader. Thus, it is important to note that this study

originated as an extension of a previous investigation of resilient female survivors of childhood sexual abuse (Grossman et al., 1999) and that the previous study informed the methodology and analyses of the current study. The overall purpose of both studies has been to examine the process of resilience; however, the issue of disclosure was so prevalent in interviews with male participants that it demanded its own analysis. The current research team, all of whom participated in this analysis, includes a clinical psychologist and professor who is also the principal investigator of both the men's and women's projects; another clinical psychologist and assistant professor; and an associate at a research institute. Both faculty members were involved in the interviewing process, whereas the research associate joined the project specifically to assist with data analysis. Although we vary in terms of clinical expertise, we all have backgrounds in psychology and approach trauma from a developmental perspective; two members of the research team have had extensive training and experience in conducting qualitative analyses, including dissertation work, as well as work on federally funded projects.

As a research team, we are constructivist-interpretivist (see Ponterotto, 2005), clinically oriented, feminist researchers who share a commitment to studying trauma within the framework of resilience. As constructivists, we are interested in the lived experiences of participants in our sample and are open to a variety of valid meanings and interpretations of our data; as feminists, we are likely to emphasize issues of gender and power that may have gone unnoticed or would perhaps be less emphasized by other researchers and tend to think about both personal and social contributions to the processes under study. Finally, we should note that our past analyses with this data led to particular expectations for the current analysis, only some of which were realized. Although we expected to hear about the challenges men have disclosing their histories, we did not expect that discussions of barriers and obstacles to disclosure would so dominate the data and were somewhat surprised by how much the men's accounts overlapped with research on women's experiences.

As the analysis progressed, we performed several checks on the credibility of our emerging findings in an effort to minimize the influence of our biases. First, regular debriefings were conducted among members of the research team. These peer debriefings have helped to minimize the influence of bias on our research. Second, during these research team meetings, as well as in response to colleagues and peer reviewers, we created and evaluated alternate interpretations of the data and our findings. Further, during the analysis and while constructing the associated tables, we checked emerging patterns across cases; disconfirming evidence was sought from the full transcripts and biographical sketches to increase the credibility of the findings (Maxwell, 1996). Finally, in the presentation of our findings we have attempted to present sufficient data for readers to consider the credibility of our interpretations for themselves.

Participants

The sample consisted of 16 men: 11 were Caucasian, 2 were African American, 1 was Puerto Rican, 1 part Native American, and 1 African Cuban. The men ranged in age from 24 to 61 years and were relatively well-educated: 14 of the men had at least some college education; 8 had advanced degrees. Of the 16 participants, 9 identified themselves as heterosexual, 5 as gay, and 2 as bisexual. They reported a range of traumatic experiences in childhood, including sexual, physical, and emotional abuse, as well as extreme neglect (see Table 1). A number of these men described growing up in violent and/or disorganized surroundings. Twelve of the men had been sexually abused by members of their immediate or extended families. All participants reported childhood sexual abuse that included actual or attempted rape; many reported sexual abuse from multiple perpetrators. Fourteen of these men reported physical abuse as children as well, and most also witnessed the physical abuse of mothers and/or siblings. Although several of the men described being physically or emotionally abusive to siblings as children, or being emotionally abusive to partners earlier in their recovery, none reported perpetrating sexual abuse at any point in time. To preserve confidentiality, throughout this article names and certain other identifying information about the participants have been altered.

Design and Procedure

Participants were recruited from men who responded to flyers that had been posted at a variety of institutions and throughout the community, a medium-sized Northeastern city with an active community of trauma therapists, and sent to local therapists following procedures approved at a major university's Institutional Review Board. The flyers indicated that the study sought men with histories of childhood sexual abuse who were doing relatively well in at least one area of their life (e.g., relationships or work). Flyers directed specifically toward men of color were also distributed in an effort to increase the diversity of the sample. When participants initially responded, a brief telephone screening was conducted to ascertain whether they met the following criteria for participation (see Patton, 1990, regarding criterion-based sampling): (a) that they had a history of childhood sexual abuse that was incestuous or perpetrated by an important caretaker, such as a teacher or baby-sitter, that included oral, anal, or genital intercourse or attempted rape; and (b) that they were functioning well in at least one domain (e.g., work or relationships). Our criteria for sexual abuse are similar to those used by others (e.g., Dhaliwal et al., 1996; Freyd, 1996) because perpetrators having ongoing relationships with and power over their victims have a tendency to be especially psychologically harmful (compared with similar acts perpetrated by strangers). We screened for functioning in part to ensure participant safety but also to match prior studies we had conducted and because our overall study was concerned with aspects of resilience. Once selected, the participants provided written consent to participate in the study.

Each of the 16 selected participants completed two in-depth, semistructured interviews, lasting between 2 and 3 hours each and taking place approximately a week apart. The interview protocol was based on prior work with female survivors but adapted for use with men by drawing on theory as well as clinical expertise. The questions covered seven main types of experience and personal understanding: life history, adaptation, relationships, physical abuse, sexual abuse, psychotherapy, and resilience (see Table 2). The protocol contained a standard set of questions as well as a set of follow-up questions designed to encourage participants to expand on their responses in certain areas. For example, when we asked about sexual abuse, we always asked who, if anyone, they had

Table 1
Participant Demographics and Background Information

Name	Age (years)	Race	Age range of abuse	Perpetrator(s)	Descriptive details
Alejandro	30s	Mexican American	4–15	Two uncles	Alejandro was born to a middle-class family. He worked for a social service agency, identified as gay, and was single. As a child, he had disclosed his physical abuse but not his sexual abuse; he has now told his mother, therapist, and sister about his experiences.
Amhad	40s	African American	11–12	Male mentor	Amhad grew up in a poor, large family with a single mother. His neighborhood was violent. He had completed some college. He identified as heterosexual and was married with children. At the time of the study, he had never told anyone about his sexual abuse.
Bill	40s	Caucasian	2–17	Mother, older sister, older foster sister, male border, female babysitter	Bill came from a poor family. Both of his parents had major mental illnesses. He had a college degree. He identified himself as bisexual and was in a long-term relationship with male partner. He had not disclosed his sexual abuse as a child but has now told many people.
Brad	30s	Caucasian	4–12	Older sister, female babysitter, male stranger	Brad grew up in a violent but highly educated household with foster children. He had a high school diploma, identified as heterosexual, and was single. He had not disclosed his sexual abuse as a child but has now told siblings, intimate partners, and one friend.
Burt	50s	Caucasian	2–13	Father, mother, male church camp director, other men	Burt grew up in a financially challenged family. He had a college degree. He identified as gay and was single. He did not talk about his abuse as a child and has felt rejected when telling as an adult.
Christos	30s	West Indian of African descent	3–15	Uncle, male and female cousins, older neighborhood boy, older male and female friends	Christos grew up as the son of single mother. He had a PhD. He identified as heterosexual and had been married but was single at the time of the study. As a child he had told his mother, who hit him for it; he had never talked about his sexual abuse as an adult, not even in therapy.
Earl	30s	Biracial: Caucasian and Native American	7–13	Uncle, male friend of father	Earl came from a working-class family. He had a nursing degree. He identified as gay and was single. Although he insists he did not tell as a child, he says his mother "found out." He has never discussed his sexual abuse "openly," not even in therapy.
Malcolm	20s	African American	7	Sister	Malcolm grew up in a divorced, middle-class family. He had a college degree. He identified as heterosexual and was single. He had not disclosed his sexual abuse as a child; he has now told some friends in limited detail, which made him uncomfortable.
Martin	60s	Caucasian	7–8	School principal and principal's wife	Martin was raised by his divorced and troubled mother. He had a PhD. He identified as heterosexual and was married with children. He did not disclose his abuse as a child; he has now disclosed to his wife, children, and some friends but has never shared details.
Morgan	40s	Caucasian	2–11	Mother, older brother	Morgan grew up in an affluent family. He had a business degree. He identified as heterosexual and was single. He tried to disclose as a child but was not heard; as an adult, he confronted his family while in therapy.
Paul	40s	Caucasian	4–6	Grandfather	Paul, a graduate student, grew up in wealthy family. His mother was chronically ill. He identified as bisexual and lived with a long-term male partner. His father had walked in on his abuse when he was a child; he has told his brother and some colleagues but not friends.
Ron	40s	Caucasian	4–10	Grandfather, older brother	Ron grew up in an upper middle-class family. He had a law degree. He identified as heterosexual and had two children with a second wife. As a child, he told his mother that his brothers were bothering him but never told her that it involved rape; he has now told his wife, a friend who then reduced contact, and several other people.
Tomas	40s	Puerto Rican	7–10	Adult male cousin	Tomas was born in Puerto Rico and immigrated to the United States when he was very young. His family was poor. He was studying for his GED. He identified as heterosexual and was single. As a child, he told his father he was being sexually abused, and his father made it a joke; it is unclear exactly what he has disclosed as an adult.
Uhan	40s	Caucasian	5–7	Female babysitter, male neighbor	Uhan grew up in a violent, chaotic working-class family. He had a high school diploma and had completed some college work. He identified as heterosexual. He had not told anyone about his abuse as a child; he has now told a psychiatrist, his partner, and other friends.
Web	40s	Caucasian	2–14	Father, mother	Web grew up in an upper middle-class family with disturbed, traumatized parents. He had a PhD. He identified as gay and was involved in a long-term relationship. He was not sure if he admitted his abuse as a child; as an adult, he told his mother and aunt.
Will	20s	Caucasian	2–13	Stepfather, older sister, other men and women	Will grew up in an unstable middle-class household. He had an AS degree. He identified as gay and lived with a long-term partner. He did not disclose his abuse as a child but says his mother found out; he told a friend at 19, but does not remember the details. He still has not shared the many details of his abuse experiences.

Table 2
Interview Protocol Structure With Representative Questions

Section	Representative questions
	Interview 1
Introduction	Introduction of interviewers, reminders about confidentiality and right to stop participation at any point if they felt distressed.
	How do you feel about being here telling us your story?
Biography/family tree	Who would you put on your family tree; what were these relationships like? Who on your family tree supported you in any way?
Life adaptation	How do you spend your time professionally; what about your leisure time? What would your ideal relationships be like; how do those ideal relationships compare to your actual relationships?
Relationships and connection	What relationships have been particularly important to you in your life, both as a child and as an adult; who have you felt connected to?
Closing	Do you think we have missed anything significant that would help us to understand your experiences? Where are you going next today?
	Interview 2
Follow-up	How have things gone since the last interview? Is there anything you wanted to add or change?
Physical abuse	What was discipline like in your family, did it involve physical force; as an adult, what kinds of experiences have you had with being physically hurt or hurting others? Have you ever told anyone about these experiences?
Sexual abuse	What kinds of sexual experiences have you had that you have not wanted or were not sure you wanted, both as a child and as an adult; have you ever told anyone about these experiences?
Psychotherapy	Have you ever been in counseling or therapy; how helpful were these experiences?
Resiliency	What do you think enabled you to deal with some of the more difficult life experiences you have had; what role have these events played in your life?
Closing	How has it been talking about these difficult experiences; how do you think talking about these experiences has affected you?

told and then followed with further questions if appropriate. Thus, although disclosure was not a main topic according to the protocol, the issue was addressed at length in every interview.

The full protocol was conducted over two separate interviews. The beginning and ending portions of each interview were dedicated to establishing rapport and ensuring participant safety and comfort. The first interview provided essential background and demographic information, including information about family and relationships; the second interview offered a chance for interviewers to clarify information gathered in the first interview, to gather the additional information required, and to explore consequences of the interview process. Sexual abuse was not asked about explicitly until the second interview, after the development of rapport, although participants often broached the topic earlier. At the end of each interview, appropriate referrals were offered. All interviews were audio-taped, transcribed verbatim, and verified for accuracy.

Data Analysis

In preparation for our study of resilience, which was the goal of the larger project, the transcripts of the 16 interviews were analyzed for content. First, an initial set of codes (Miles & Huberman, 1994) such as abuse, disclosure, memory, and work was devised on the basis of previous research with women's narratives and to allow future analyses across men's and women's experiences. These content codes were then revised to reflect literature on men's specific responses to trauma, personal clinical experiences working with traumatized men, and information emerging from the first several interviews; in this way, we also allowed the data to define categories unique to men's experiences. This process resulted in 40 distinct codes, including codes for talk about race/ethnicity, posttraumatic growth, sexuality,

masculinity, and disclosure. To establish reliability, all members of the research team first coded the same interview transcript, which was then reviewed in detail. This process was repeated for the more complicated process codes, such as "management of feelings" or "meaning-making." Using the entire set of codes, two members of the research team then separately coded each transcript, later discussing and reconciling any differences. Once the transcripts were coded, a biographical sketch was completed that summarized the coded information contained in each participant's interviews. The biographical sketches contributed greatly to our understanding of the men's experiences of sexual abuse as well as the extent of their disclosure experiences both in childhood and as adults (see Table 1).

For the purposes of the current analysis, all material coded "disclosure" was assembled for use as the primary data source. This data contained reasoning for telling or not telling as well as contemplation about disclosure and the meanings made of disclosure experiences. The vast majority of the data was related to the risks or challenges of disclosure, as well as the barriers and obstacles encountered. Our goal was similar to cluster or factor analysis; we sought to identify patterns or clusters of experience that existed within this material. Thus, we utilized grounded theory approaches, including open and focused coding processes (Charmaz, 2004; Strauss & Corbin, 1998). First, we engaged in open coding, which is an inductive process in which analysts dissect the data on the basis of certain features in the text. For example, material about why a participant did not tell as a child might be separated from material about the experience of telling a current partner. Then, using a process of constant comparison, we conducted focused coding to compare these experiences and to identify descriptive patterns or commonalities within the data that could be described with higher order labels. For example, all

Table 3
Categorization of Participants' Struggles With Disclosure

Category	Examples	Frequency
	Personal	
Cognitive awareness	"I compartmentalized it"/"wasn't aware of it"[a]	Typical
	"It never occurred to me" to tell[a]	
	"I thought [what happened] was normal"[a]	
Intentional avoidance	"I wanted to put it behind me"[a]	General
	"I wanted to forget it"[a]	
	"Don't want to be aware [that it happened]"	
	"No need"/"no purpose"/"no good reason"/"can live with in other ways"	
Difficulty approaching topic	"I didn't know how to respond (to abuse experience)"[a]	Typical
	"I don't know where to start"	
	"I don't know how to approach it"	
Difficulty with articulation	"I couldn't form the language"/"I didn't know the words"[a]	Typical
	"There are no words that fit"	
	"I can't articulate the emotions"	
Emotional readiness	"I'm not (was not) ready"	Variant
Shame	"I knew it (what I did/what happened to me) was wrong"[a]	General
	"I was being bad (by having it happen/by participating)"[a]	
	"It was my fault"[a]	
	It's "embarrassing"/"shameful"	
Emotional safety	"It's not worth it" (anger/depression)	General
	"I would just get hurt more"	
	"It doesn't feel safe"	
	Relational	
Fear of specific negative repercussions	My mother/parents "would have sent me away"[a]	Typical
	"I didn't want to make things worse" (with mom/parents/siblings)[a]	
	"I don't want to be accused of being" a rapist, a pervert, gay, crazy	
	"I don't want to hear [someone else's] version of what happened"	
General relational disruptions	"It fucks everything up"/"it would be more troubling, cause more problems"/ "have found talking about emotions to be catastrophic"	Typical
	"It's too much [for people]"/"hard [for people] to hear"/"makes [people] feel bad" or "guilty"/"they don't comprehend"	
	"I don't want to have that kind of closeness"	
Isolation	"There was a chasm"—I never went to adults/parents for help[a]	General
	"No one talked to me" about things like that/"not taught to" communicate[a]	
	I was told to "keep it a secret"[a]	
	"No one asked me" directly[b]	
Relational beliefs	"I thought they [parents/teachers/others] already knew"[a]	Variant
	Sociocultural	
Unacceptability	"The culture says hush"	Typical
	It's a "taboo" topic	
	"It breaks the rules"/"goes against the grain"	
	"It's not popular to talk about"	

Note. A category is identified as general if it applied to 10 or more cases, typical if it applied to 4–10 cases, and variant if it applied to 1–3 cases.
[a] Data arising mainly from recollections of childhood.   [b] Data came equally from recollections of childhood and adult experiences.

material about not telling as a child, both within and across participants, was gathered together to explore what these experiences had in common. At this stage of our analysis, as we sought to identify patterns of disclosure experiences, conceptually clustered or content-analytic summary tables were used as an organizational tool to provide profiles of each participant and to allow comparison across cases (see Miles & Huberman, 1994). During the course of the analysis, it became clear that very little data reflected positive experiences of disclosure, whereas a great deal reflected barriers or obstacles; thus, we created a conditional matrix to represent the conditions under which each type of barrier was operating (Strauss & Corbin, 1998). This matrix helped us to see that the barriers operated on different levels of experience, reflecting personal, relational, or sociocultural influences on disclosure, as indicated in our final representation of the data (see Table 3).

Results

In the following sections, we present our analysis of the experiences of disclosure reported by the men participating in this study. Our results reflect the fact that the men described very few actual experiences of disclosure, while revealing many barriers. We begin by describing their childhood experiences with disclo-

sures, which were only partial and often cryptic, and then briefly outline their adult experiences with disclosure, which were also limited. Finally, we present our analysis of the obstacles and barriers to disclosure present in their accounts; these barriers operated in three interrelated contexts, or domains: (a) personal, (b) relational, and (c) sociocultural (see Table 3).

Disclosure in Childhood

In Table 1, participants' experiences of disclosure both in childhood and adulthood are summarized. Only one of the 16 men in this sample purposefully disclosed the full extent of his sexual abuse experiences while he was still a child. As Tomas describes, the results were disastrous:

> I remember my father, he used to play cards. He used to go to this house and gamble. So one day I approached him when he was up there with a bunch of people. I told him that my mother's cousin did this and that and tried to have sex, uh intercourse, with me and stuff and that I want this [stuff] to stop. And he thought it was like a joke, you know. . . . He was drinking and he started joking about it and everybody started laughing.

Noticeably, in this excerpt, Tomas was able to express himself clearly to his father, both about his experience and his desire for it to stop. The other men reported that they had not disclosed, although some reported attempts to tell that were cryptic or incomplete. When Morgan was asked if he told anyone what was happening to him as a child, he said, "I tried to tell but again it didn't, you know, there was a breakdown in communication. At no point did I ever clearly convey what had been going on." Bill explained that he attempted to tell his father, but felt the limitations of his vocabulary and was unable to find appropriate words to convey his experiences with abuse. He said, "I didn't know how to describe any of things that were happening to me . . . I just gave up on trying to describe that stuff to him."

Several other men disclosed certain experiences or elements of their abuse, but concealed others. Christos kept several incidents secret but told his mother about one incident with a neighbor's son. He said his mother "wasn't able to accept that" and decided that he "wasn't being honest." He added, "It was the only time in my life that my mother ever really hit me." Ron said that he told his mother that his brothers were "bothering" him, but never revealed that he had been raped. Alejandro divulged his experiences with physical abuse to his uncle, but not sexual abuse. His uncle, he said, "just didn't say anything, he just kept real quiet, just turned away." In each of these cases, adults failed to respond or acknowledge these disclosures as potentially important and meaningful. Two of the participants were actually beaten when they attempted to "tell" about certain experiences as boys. The result was that, as Alejandro said, "The [only] people that knew were the persons that were doing the abuse."

Disclosure in Adulthood

By the time of the study, many of these men had disclosed their past experiences in a variety of relationships, including those with family members, partners, therapists, and (although significantly more rarely) friends; however, several still had only had limited discussions of their sexual abuse, including Amhad, Christos, Earl, Tomas, and Will (see Table 1). Amhad had never told anyone about his experiences and Christos had not disclosed experiences since the time he tried to tell his mother and was hit. Amhad had recently gotten sober after many years of extremely heavy drinking and, in his newly won sobriety, had found himself thinking about his sexual abuse by a male mentor. He said he had decided it was time to deal with it and he was ready "to get it open." Christos, alternatively, wanted to talk about his experiences in an effort to make "a closed book on that part of my existence." Alejandro first told his mother at the urging of a therapist, who said it would be good for him. He said, "I was hoping that she would become a lot closer but it didn't really happen." He added, "But it was good that I was able to let her know what went on, just kind of get it out of my system." Martin said that telling his adult children was a very positive experience. Although he said they seemed "a little bowled over" at first, they were all able to laugh about adding another chapter to their family story. Bill spoke poignantly about how he had found disclosure to be healing: "I've found for my own self, great healing power in truth. When I'm someplace where I actually tell the truth about what really happened, it transforms, it changes my body chemistry." Shame, he said, "is something that tends to evaporate when you talk about it," but he added that misplaced trust had been a serious issue for him and indicated that choosing the right contexts to talk continued to be challenging.

Struggles With Disclosure Across the Lifespan

Because the men shared few positive experiences of disclosure—they much more frequently discussed why they did not, had not, or could not disclose their experiences—the majority of our results and later discussion also focus on their struggles rather than their successes. Our analysis revealed that the men's experiences and reasoning about disclosure fell into three distinct domains representing conditions under which each type of barrier was operating (see Table 3). These domains were (a) personal (i.e., what they personally could or could not do or handle, or how they would feel if they disclosed, etc.), (b) relational (what someone else would do if they disclosed, or what someone else needed to do, say, or allow in order for disclosure to occur, etc.), and (c) sociocultural (abstract rules about what was appropriate and normal for men to experience, feel, and discuss). Each domain contained one or more categories of experience. Borrowing from the terminology of Consensual Qualitative Research (Hill, Thompson, & Williams, 1997) a category was considered general if it applied to 10 or more cases, typical if it applied to 4–10 cases, and variant if it applied to 1–3 cases. In the following sections, we discuss both why they felt unable to disclose as children and why they continued to struggle with disclosure as adults.

Personal barriers to disclosure. For these men, there were several distinct types of personal obstacles to disclosure, including lack of cognitive awareness, intentional avoidance, difficulty approaching the topic or articulating the thoughts and emotions involved, emotional readiness and safety, and shame. More than half of the men described a lack of cognitive awareness of the events during childhood, saying that they had "compartmentalized it" or that it did not occur to them to tell anyone, suggesting that their lack of awareness rendered them unable to disclose these events. Burt said, "It got compartmentalized. I had no memories

until I was 40." Other men reported that they "never really thought about it"; "blocked it out"; took it off the "radar screen"; and "repressed," "compartmentalized," or "stifled" it. Martin, who was 61 years old at the time of the interviews, suggested, "Part of my successful coping was wiping the memory for 50 years." Seven of these 16 men reported a lack of awareness of or memory for these events for significant portions of their lives; three others reported wanting to forget or "shield[ing] it out."

On the other hand, in discussions of both childhood and adulthood, many of the men also described intentionally avoiding disclosure for a variety of reasons, including not wanting to "be aware"; not having a "need," "purpose," or "reason"; and wanting to put it behind them. Two other typical categories encompassed both childhood and adulthood struggles with disclosure; these involved difficulty knowing how to approach the topic in general or difficulty around articulating the events. After explaining that all he had told his mother was that his brothers were "bothering" him, Ron added, "I don't even know if I knew the word rape. As a matter of fact, I know I didn't know the word rape." Bill talked about wanting to tell his father when he was a child, but he said, "I didn't have the words. And I tried many times to tell him. And I just wasn't verbal enough." Thomas talked specifically about wanting to talk about it in his present life, but not knowing how to approach it.

Beyond cognitive difficulties, emotions were also particularly predominant among the personal reasons for silence—whether the emotions originated from the experience of disclosure itself or as reactions to anticipated responses of others. Three men suggested that they had not disclosed earlier because they were not emotionally "ready." Others described worries about emotional safety as a result of the risks involved in disclosure, such as getting hurt or becoming depressed. Childhood choices not to disclose also involved a sense of shame and potential blame, such as knowing "it was wrong," and feelings of "being bad," at "fault," or "weak." Shame, although more prominent in narratives of why they did not tell during childhood, was also salient in adulthood. Shame was about both the experiences themselves and the fact that they were not disclosed earlier. Alejandro said, "I blamed myself not having the courage to tell my parents, um, [not having] the courage to tell someone." Similarly, Earl said that he felt responsible for his abuse, adding, "I felt like I should have said something to somebody, I should have trusted someone." Amhad also referred to the ways disclosure felt shameful. He added that he wanted to minimize the experience, "make it less," or just not say the words that described what had really happened.

Relational barriers to disclosure. Relational barriers to disclosure included fears about specific negative repercussions or general relational difficulties, isolation, and beliefs about relationships. Fourteen of the men pointed to the limitations of their contexts, their isolation, as a way to explain why they did not disclose. Brad grew up in a complex, violent, disorganized home in which his mother physically and emotionally abused all the children, who in turn abused each other. He suggested that the things that were happening in his family "just created such a chasm that I just didn't go to anybody for anything." Web never went to adults for help either. He simply assumed that he would not get the help he sought. When describing why he would not have told anyone about his abuse as a child, he described a Bible verse that made him suddenly realize that his parents did not treat him very

well. He said that he knew that asking his parents for help would have "made a bad situation much worse."

Some of the men who tried to disclose as children talked about someone who reached across this type of "chasm" and directly asked them. Web had disclosed some, but not all, of his abuse experiences during childhood, and said that he had not intended to tell anyone that he was sexually abused by a clergyman. He explained that a nun had described what another child had disclosed to her and asked if he had ever experienced anything like that. He said that he was not sure that he ever really answered her, but that he "might have mumbled 'yes'." That was the only extent, he said, to which he would have told and he would never have said anything, he insisted, if he had not been asked so directly. Direct requests for information, however, were complicated because they ran counter to demands on the part of perpetrators or others to "keep it secret."

Other men's words pointed to developmental limitations having to do with the ability to take a different perspective. Ron, for example, suggested that he felt there was no reason for him to have to tell anyone. He said, "I was convinced that everybody knew what was going on, because it was so apparent, and that, you know, this was just normal." Similarly, Paul wished that he could have said something to someone, and added, "I think I was just so terrified and I didn't understand what was going on and I just couldn't tell anyone. And I now know, if my mother had found out, that she would've done something. It just never occurred to me to say anything." In fact, four of the men mentioned believing that others knew about, accepted, and even encouraged their abusers, in spite of also explaining that they themselves had never told anyone what was happening to them. The relational belief that others knew and simply were not acting on the knowledge was difficult for them. As adults reflecting back on these experiences, many still had difficulty imagining that their abuse could have gone unnoticed. Bill, describing his mother and father, said that it was hard for him to imagine that they had not, at least on some level, "picked it up." He felt particularly strongly about this because his parents had actually caught his perpetrator in bed with him several times.

As adults, these men were acutely aware that their personal history could be, as Burt suggested, "hard for other people to hear." They realized, often in confrontations with family members, that discussions about the past could make others feel guilty or sad, causing a variety of general relational disruptions, which made them reluctant to disclose. Paul explained his decision never to disclose his sexual abuse history to his grandmother was because "she'd start to feel guilty. Things were better between us and I just said at this point in her life she's not going to be around for too much longer. It's not necessary that she go through this at this point." Web's experience of telling with his aunt was that she was "very, very guilty and very tearful about that and so forth," he said, "so I left that alone with her." Brad felt he shared too much with a girlfriend who insisted upon knowing what he was going through. He said, "It got to the point where she could actually almost see the person I was seeing. You know, not literally but that's how it felt to her, so it just, it it [messed] everything up. So I learned about that."

Thus, although in references to childhood the participants highlighted a lack of an opportunity for disclosure, as adults they simply articulated the ways divulging this history put their relationships at risk. Sometimes they imagined specific negative repercussions that prevented their disclosures, such as what someone

would do or say. Some of these repercussions involved potential accusations stemming from societal beliefs about the effects of abuse for men. As Bill said, "Men don't want to talk about these things, 'cause we're already in a society where it's easy for us to be accused as rapists or violators." Tomas believed that he would almost certainly be accused of being either gay or crazy. Although these fears were ostensibly about accusations from others that may occur if they disclosed, and thus were on the relational level of experience, it is also clear that, for example, the fear of being called or labeled as gay was integrally related to the cultural ideology of masculinity, illustrating the complicated ways these different levels of experience can overlap.

Sociocultural barriers to disclosure. Sociocultural barriers to disclosure included thoughts that it was unacceptable for men to experience victimization and if they had, that they were certainly not to discuss those experiences. Tomas, whose father responded to his disclosure of abuse by laughing and treating it as a joke, later concluded, "I'm not telling nobody that it happened to me because that that makes me weak. That makes me less than a man." He explained, "See, I wasn't taught any—there's no way out of this. I got to keep this to myself. You know, that's the way I was taught. You know I was taught to just accept what happened and deal with it." He now viewed nondisclosure in terms of cultural rules. He was willing to talk with his friends about his drug addition but not about his childhood experiences. He said,

> You know with my friends I talk about my addiction and all that stuff and I get a lot of support from them. But [in the] Spanish culture, that type of stuff [sexual abuse] is like hush. Real hush hush hush. You know what I'm saying? It would be like, "Yeah well he's gay" or this or that or this. It would be, you know, escalate to another level where instead of getting help, you would just get hurt more. And a lot angrier and stuff. And they put you in that situation, so the best thing to just avoid all that is to hush.

Burt suggested a similar awareness of this cultural barrier against disclosure. He said he would not talk about his experiences "'cause for me to bring up that kind of information up, people just went: 'Whoa! Let's not go there!' So basically I was like a taboo." Bill talked about looking at shelves of books about female survivors and not seeing any that applied to him. Will, who had rarely disclosed, described feeling very uncomfortable talking about his experiences. He was able to be honest about his discomfort during the interviews. When his interviewer asked if he could put words to the discomfort, he said that disclosing was "like doing something you're not supposed to be doing." He added, "Usually what you get from society is that you don't talk about it, under any circumstances, and even when you do, you only talk about it to a person who you've known for years and years that you can absolutely trust."

Discussion

These men described both positive and negative outcomes with regard to disclosure. In some ways, they said, it led to personal growth and an increasing ability to trust others; more often, however, they described reasons for not wanting to reveal their histories and explained that even when they had disclosed they had concealed details or specifics, or had not shared on a deep level. Thus, even data that seemed to be about disclosure was actually layered with information about the ways their disclosures were limited or qualified. All of the participants spoke at length about how challenging disclosure was and how they had experienced this challenge across the course of their lives. Our analyses point to three main domains in which barriers to disclosure for male survivors exist: personal, relational, and sociocultural. Understanding differences among the barriers in each of these domains enhances the already rich findings regarding disclosure types (e.g., Alaggia, 2004; Reinhart, 1987) and the processes, phases, or steps through which disclosure is likely to occur (e.g., Bradley & Wood, 1996; Sorenson & Snow, 1991). For example, although most children who do disclose do not later recant, some go through a disclosure process involving stages characterized by denial, tentative disclosures, and recantations (London, Bruck, Ceci, & Shuman, 2005). It seems possible that denials and recantations may be related to encountering new barriers specific to the contexts (i.e., domains) in which those disclosures are occurring. That is, survivors who can overcome personal barriers to disclosure may subsequently encounter even more difficulty in the relational or sociocultural domains. As experiences of our male participants reveal, barriers to disclosure exist on multiple levels of experience; the intensity of these barriers and the ways they can overlap highlight how complicated disclosure can be.

Barriers in the personal domain reflect an intense urge to erase these experiences from consciousness. Although some clinicians describe a disclosure process in which children oscillate between acknowledging and denying the abuse (Sauzier, 1989), these men consistently reported a lack of cognitive awareness of abuse experiences stretching across many years of their lives. Awareness is clearly a prerequisite for disclosure, and these men's narratives point to a notable absence in this area. The theory of betrayal trauma posits that forgetting may be a self-protection mechanism for some survivors (Freyd, 1996). This theory specifically addresses repressed memories among women who have been sexually abused by a close family member; however, because these men's experiences involve a high degree of social betrayal, the theory would also predict the type of memory impairment we hear in these narratives (DePrince & Freyd, 2002; Freyd, 1996). The personal pressure to suppress these experiences complements sociocultural demands for men to minimize or deny abuse (Lisak, 2005), illustrating the ways that the barriers in one domain can interact with those in another domain.

Other personal barriers are emotionally driven. Some obstacles to disclosure, primarily those participants described as reasons they did not disclose as children, involve emotional safety or readiness, as well as intense feelings of shame. These men actually seemed caught in a double bind: They experienced shame as a reason they currently felt reluctant to share this history, while simultaneously expressing shame for not telling earlier. Research on female survivors has also pointed to shame as preventing or delaying disclosure (e.g., Crisma et al., 2004); however, evidence indicates that such emotions may be even more difficult for male survivors. As Real (1997) notes, "Most men have difficulty not just in expressing, but even in identifying their feelings" (p. 146), a problem that may have its seeds in infancy, as young boys are taught very early not to cry or even recognize sad or painful feelings. Clinical research has suggested that although men experience significant long-term effects of childhood sexual abuse related to emotions, including anxiety, fear, anger, and depression,

they are less likely than women to disclose or to seek professional help (e.g., Holmes, Offen, & Walker, 1997). Reluctance to disclose abuse could also be related to a survivor's relationship to the perpetrator (e.g., Summit, 1983) or difficult family dynamics (Alaggia & Kirshenbaum, 2005); for these men, however, emotional aspects of disclosure, such as shame and concerns about emotional safety, joined intentional avoidance as the most frequently referenced personal barriers to disclosure.

In the relational domain, obstacles to disclosure are often related to what one man referred to as a relational "chasm." When these men were boys, even if the abuse was extrafamilial, comfort and support were rarely available. Because children have difficulty initiating conversations about sexual abuse, which tends to be secret as well as confusing and distressful, a supportive structure involving both an opportunity and purpose for discussing sexual abuse can be necessary for disclosure to occur (Jensen et al., 2005). The participants in our study made clear that far from providing the necessary scaffolding, the contexts in which they lived reinforced societal demands for masculinity—strength, silence, and stoicism—in ways that held them captive in traumatic situations with no apparent way out. A confiding relationship is a major factor in ameliorating the negative effects of abuse (Gilgun, 1990); thus it seems likely that early demands for silence and stoicism intensify isolation and obstruct recovery processes among abused boys. On the other hand, at least two of the men were able to report physical abuse when they were boys, in spite of the fact that they did not report instances of sexual abuse, suggesting that it is possible to bridge this chasm in some ways and not others. It seems likely that discussions about physical harm receive more support in the relation domain, highlighting the fact that cultural silence around sexuality and sexual experience may be a key factor hindering disclosure efforts for both men and women.

Even after becoming adults, these men remained very sensitive to the ways disclosure could be disruptive in the relational domain. The fear that there would be accusations, blaming, shame, depression, anxiety, anger, and other difficulties tended to outweigh their desires to disclose. A rich clinical literature has addressed the importance of the relational ruptures following traumatic events (Chu, 1998; Davies & Frawley, 1994), some of it specifically addressing this issue with regard to men's experiences of sexual abuse (e.g., Gartner, 1999). Our research highlights the ways men's lack of relationships, or fears of losing them, create barriers to disclosure. Female survivors have described similar difficulties with relationships, particularly around disclosure (Grossman et al., 1999; Sorsoli, 2004); however, Struve (1990) argued that patriarchy positions men to experience social isolation. He contended that the spaces for men to express their emotional experiences are few to none and joins many others who discuss masculinity as an explanation for the silence of males, some particularly in regard to the experience of sexual abuse (e.g., Lew, 1988). At the same time, because relationships and intimacy are closely aligned with femininity, men are trained to devalue them (Way, 2001), thus decreasing the likelihood that they will develop the kinds of long-term, emotionally intimate relationships in which disclosure could occur. Thus, we can observe again that demands for silence in one domain can overlap and reinforce the barriers in another domain.

As others have argued, the imposition of strict masculine stereotypes can leave boys and men trapped and at risk (Pollack, 1998). Although the tenor or masculinity may differ from culture to culture—Latino and African American cultures, for example, may demand even stricter adherence to the masculine "norms" that are so difficult for survivors (Grossman, Sorsoli, & Kia-Keating, 2006)—patriarchal society routinely demands that men live up to a "myth" of masculinity (Pleck, 1981) that far from resonates with their own experiences, and this is likely to be particularly true for male survivors (Kia-Keating, Grossman, Sorsoli, & Epstein, 2005). In fact, this familial and societal "training," and the ways men continue to encounter it in the sociocultural domain, may be one of the major differences between male and female survivors in terms of disclosure. Although men and women are both subject to cultural barriers in regard to having open discussions of sexual experiences and sexuality, talking about sexual victimization is gendered, particularly by adulthood, and men and women face different risks and consequences of disclosure: Women tend to risk feeling damaged and may be accused of being "loose," whereas men are more likely to feel weak and be accused of being homosexual. These differences can be observed thematically in men's and women's disclosure narratives (see Alaggia, 2005). Men and women also generally have different skills in terms of developing and maintaining confiding relationships, and in expressing and managing the kinds of emotions disclosure is likely to involve (Lisak, 1995). Thus, although being ashamed and feeling at fault clearly create barriers for both male and female disclosures (Alaggia, 2005), as do cognitive difficulties, such as memory or awareness (DePrince & Freyd, 2002; Freyd, 1996), and vocabulary limitations (Petronio, Heeder, Hecht, & Ros-Mendoza, 1996), at least some of the sociocultural factors barring the disclosure of sexual abuse arising in these narratives are likely unique to men's experiences.

Limitations

This study has several limitations. Self-selection into a study about sexual abuse has an impact on findings about disclosure because men who choose to participate after being informed and consenting to disclose their abuse experiences to interviewers may be systematically different from nonparticipants, and this difference may affect findings or outcomes (e.g., Moss & von Ranson, 2006). It may be that participants who were less likely to volunteer had even more difficulties with or concerns about disclosing their histories. However, it is important to note that, at the time of their participation in this study, the majority of the participants still had not told many family members and close friends in their lives or had only told in a limited or vague manner. It seems likely that if their earlier, partial admissions had been met with understanding and appropriate action, further disclosures about the full extent of their traumatic experiences may have followed—and yet, this had not happened. The fact that even these men who have suffered so much at the hands of others continue to describe a deep desire for confiding relationships adds an important insight to our knowledge base. In general, men tend to be reluctant to participate in psychological research and men are much less likely to come to mental health professionals, especially about sexual abuse (Holmes et al., 1997). We had a much more difficult time getting men to volunteer than we had had recruiting women for our study of women's experiences of sexual abuse (Grossman et al., 1999). Our sense from this and from getting to know these men is that they were quite unusual in their ability to speak out about their abuse and

their recovery as well as about the depth of character development many had achieved along the way.

In this study, we made significant efforts to gather a diverse sample of male survivors. We directed recruitment efforts specifically toward men of color after having initial success only with Caucasian men. However, these findings only represent the initial stages of this domain of research, and future research should include participants from a wider range of demographic backgrounds than the participants in this study, including higher proportions of heterosexual men and men representing a wider range of educational backgrounds. A further limitation of this study is that it was not originally focused on the issue of disclosure. A study that was specifically designed to elicit stories and understandings of men's disclosure experiences would likely provide even more depth to our understanding of this phenomenon. A member check would also have been an important addition to the study.

Counseling Implications

Examining the variety of barriers and obstacles to disclosure allows us to see where the barriers could be removed, perhaps increasing the likelihood for intervention during childhood. Although the effects of the disclosure of childhood sexual abuse depend upon many factors and, at this point, remain unclear (e.g., Arata, 1998; Lamb & Edgar-Smith, 1994; McNulty & Wardle, 1994), the stark reality is that these men's initial attempts to tell were neither well-received nor encouraged: Two of them were actually physically beaten as a consequence, and others feared serious repercussions. The fact that many men carry a history of failed disclosure with them into adulthood is a challenge that practitioners are likely to face. Further, although it is quite promising that so much attention has been paid to developing effective treatment programs for male survivors (Gartner, 1999; Gartner & Pollack, 2005; Lisak, 1995, 2005), this study draws attention to the ways personal, relational, and sociocultural factors interfere with disclosure and often prevent men from entering into these treatment programs. Moreover, at times when men do approach treatment, they remain hesitant to discuss the abuse and focus on other issues. In this sample, even men who had been in psychotherapy had not always disclosed their abuse histories, which compromised their treatment in terms of its ability to focus specifically on the aftermath of their traumatic experiences.

For those of us working on the front lines, providing therapy and supervision of the treatment of men, these data make clear how necessary it is that, as soon as possible after developing rapport, clinicians ask directly about sexual abuse in nonshaming ways (e.g., asking questions such as "did anyone ever do anything to you sexually that you might not have wanted them to do?"). It seems likely that the issue of childhood abuse may need to be raised more than once, as several of the men in our sample had been asked and did not initially disclose. Without direct questioning, most clients, and almost all men, do not initiate disclosure (Holmes et al., 1997). Within the therapeutic context, the challenges to disclosure might include the client's own personal readiness, developing a therapeutic relationship conducive to disclosure, and the sociocultural rules and expectations of therapy itself, particularly as they relate to male clients.

Depending on personal readiness, initial disclosures may be tentative and incomplete. At the time of first disclosures, it is helpful to acknowledge the potential difficulties of disclosing and to monitor emotional regulation. Clinicians should be wary about attempting to gather details before a sufficient therapeutic relationship has been established to contain the traumatic material; however, the clinician needs to take the disclosure seriously and to respond calmly and empathically with the affirmation and attentiveness that clients report facilitates their ability to self-disclose (Farber, Berano, & Capobianco, 2004). It is helpful for clinicians to indicate the importance and relevance of the information, conveying that it is a topic they will want to explore more and also the importance of going slowly. This boundary-setting activity can frame a client's initial experience of establishing safety, which is an essential component of trauma treatment, as well as provide an emotionally corrective experience and counteract the client's previous vulnerability in relationships (see Bridges, 2006).

In terms of managing sociocultural rules and expectations about therapy, it is very important that the clinician inquire about the trauma experience in the session following the disclosure; otherwise, the client may feel the counselor really does not want to or cannot handle hearing about it, confirming their fears. Many clients depend on therapists' active role in engaging with difficult material (Farber et al., 2004). The sex of the therapist or the supervisor can also become relevant. In our study, none of the participants chose the option of requesting a male interviewer, and many said that they found it easier to talk with women, regardless of who had abused them; however, some trauma clients abused by someone of the opposite sex are fearful of a therapist of that sex, and generally it works better to assign them to someone of the same sex. Overall, we need to be sure that practitioners consistently consider the possibility of childhood sexual abuse when treating male clients (Holmes & Offen, 1996; Hooper & Warwick, 2006). We may also need to develop specific ways of communicating with male survivors in order to encourage their disclosures (Teram et al., 2006). Certainly expectations based on masculine socialization regarding sexuality and abuse need to be addressed directly.

The implications are even more striking for mental health professionals who work with men in day programs, psychiatric hospitals, substance abuse programs, homeless shelters, and juvenile and adult justice facilities. Almost certainly a significant percentage of these men have histories of sexual abuse, as well as physical and emotional abuse and neglect (Garnefski & Arends, 1998; Holmes et al., 1997). Although a history of sexual abuse itself may not be their sole or even necessarily the most important source of their problems, clinical literature makes it clear that without some direct attention to this issue, significant healing is less likely. Finally, there are important practical implications for groups such as teachers and counselors in schools, and staff at community centers and YMCAs—in short, all of the places children and adolescents gather. Boys are not likely to disclose sexual abuse; if and when they do, it must be taken seriously. Boys who are acting out for unclear reasons should be questioned by a skilled interviewer about what is going on in their lives. Some boys may begin the disclosure process with disclosures of physical abuse. The awareness that boys do experience sexual abuse and may be struggling to talk about it can be extremely important as early treatment can have a major impact on the life of a child, a family, and sometimes a community.

Future Directions

This research represents an early in-depth qualitative analysis of disclosure experiences, and it can inform future, more detailed analyses that might use randomly selected, larger samples that are followed over time. Our goal was to begin a conversation about different disclosure experiences among male survivors. Future research can expand on these initial results by using larger samples and a wider variety of men of different backgrounds, with the ultimate goal of capturing all of the aspects of this extremely complicated phenomenon. Both inter- and intrasex differences should be further examined by researchers. Specifically, much more attention should be given to the issue of when and why disclosure works, for both men and women, as children and later as adults. Understanding how survivors develop confiding relationships and learn who and how to trust would be valuable contributions to research on disclosure as well as the process of recovery and the development of clinical interventions.

Findings from this and other qualitative studies (e.g., Alaggia, 2005) underscore the importance of thinking about the role gender plays in the lives of sexual abuse survivors; it must not be conflated with sex and treated simply as a variable that may predict exposure to particular types of trauma or that needs to be "controlled for" in statistical analyses. It must be understood as a social construct that influences the ways survivors make meaning of their experiences. Although certain impediments to disclosure are shared by both male and female survivors, it is important for future researchers to consider and to focus research efforts on the ways gender socialization may add unique complications or stressors to the disclosure process (e.g., Krause, DeRosa, & Roth, 2002), as well as the ways nondisclosure may be differentially related to violence and perpetration in male survivors. Researchers should examine the interplay of expectations about gender roles and disclosure processes, including the decision to disclose or not, disclosure timing, and long-term consequences. This area of research is critical to further informing theoretical mechanisms associated with traumatic symptoms and clinical approaches to therapeutic interventions with male survivors.

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