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A retrospective approach to examining child abuse disclosure

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ABSTRACT

Background: Often times, a child's disclosure is the only forensic evidence available in child abuse cases. Therefore, understanding disclosure patterns of suspected child abuse victims plays a critical role in the forensic investigations of both child physical abuse (CPA) and child sexual abuse (CSA) cases.
Objective: To explore adults' retrospective reports about childhood disclosure of CPA and CSA.
Participants and setting: College students (N = 907) were screened for reported histories of CSA (n = 94) or CPA (n = 109).
Methods: Through an online survey, participants provided anonymous information regarding CSA and CPA experiences along with information about any disclosure events or opportunities that they have encountered since the abuse.
Results: Among the adults reporting CSA histories, 50 % indicated disclosing the abuse during childhood; 80 % indicated any lifetime disclosure. Among the adults indicating CPA histories, 32 % reportedly disclosed the abuse to someone during childhood with 52 % reporting any lifetime disclosure. For both groups, length of delay until disclosure was bimodal with many individuals reporting immediately and many waiting considerable time. Among adults reporting CSA, a minority (16 %) indicated the abuse came to the attention of authorities, with even fewer CPA cases (8%) reporting authorities were aware of their abuse. Denial and recantation in a formal setting was infrequent regardless of abuse type reported.
Conclusions: Given that participants experiencing CSA and CPA both reported low levels of denial and recantation, forensic investigators and practitioners may benefit from considering consistent interviewing approaches and protocols, regardless of the type of abuse suspected.

1. Introduction

Disclosure of child abuse plays a critical role in the forensic proceedings of child abuse allegations (Bottoms et al., 2016). Forensic interviewers base their interview style on their beliefs about how children disclose abuse (London & Kulkofsky, 2010; Rush, Lyon, Ahern, & Quas, 2014), and it has long been known that some interview styles can be detrimental to an investigation (e.g., People v. Buckey, 1984; State of New Jersey v. Michaels, 1994). At the same time, researchers have expressed concerns about false negatives, where truly abused children deny abuse during formal investigations, potentially leading to what Lyon, Stolzenberg, and McWilliams (2017) termed "false acquittals". Psychologists, then, have an obvious interest in examining whether and how maltreated children tell others about their abusive experiences (Malloy, Brubacher, & Lamb, 2011). Two overriding research questions were explored in the current study. First, adults with self-reported histories of child sexual abuse (CSA) and child physical abuse (CPA) were surveyed

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about whether they ever disclosed, denied or recanted the abuse, as well as whether anyone ever suspected or questioned them about the abuse. Second, self-reported disclosure patterns among cases of CSA and CPA were compared.

The scientific study of child abuse generally, and disclosure patterns specifically, presents a number of major methodological challenges. Some studies have examined disclosure rates among children presenting for forensic or medical evaluation (for a review, see London, Bruck, Wright, & Ceci, 2008). However, some researchers have argued that these children represent a minority of all abuse cases and therefore may not be representative of the larger population of sexually abused children whose cases never come to the attention of authorities (Lyon, 2007, 2009). Researchers estimate only about 10–15 % of CSA (Bottoms et al., 2016; Lev-Wiesel & First, 2018; London, Bruck, Ceci, & Shuman, 2005) and 7–9 % of CPA (Bottoms et al., 2016; Bottoms, Rudnicki, & Epstein, 2007) cases ever reach authorities. Among CSA cases that come to the attention of authorities, the child's disclosure usually prompts the abuse investigation (Kellogg & Menard, 2003; London et al., 2008; Rush et al., 2014). That is, the child is already telling about the abuse and continues to do so during forensic assessment. As a result, the use of child samples undergoing contemporaneous forensic assessment for CSA may spuriously inflate disclosure rates (a phenomenon called *suspicion bias*; Lyon, 2007). Another problem with the use of child forensic samples is that often the validation of CSA is contingent upon the child's disclosure since other case evidence typically is lacking, an occurrence dubbed *substantiation bias* (Lyon, 2007; Rush et al., 2014). Substantiation bias can inflate disclosure rates because, if only substantiated cases are used to estimate disclosure rates, it is still only children who are more likely to disclose that are being sampled.

2. Retrospective studies examining child abuse disclosure

A second source of scientific information on abuse disclosure that attempts to bypass these methodological challenges comes from anonymous surveys of adults who retrospectively report having been abused as children (Bottoms et al., 2016; for reviews, see London et al., 2008; Lyon, 2009; McElvaney, 2015; Tener & Murphy, 2015). In such studies, adults are asked whether they ever experienced child abuse and, if so, whether they told anyone.

A majority of the retrospective studies indicate that delay and non-disclosure of CSA is a common occurrence (for reviews see Alaggia, Collin-Vezina, & Lateef, 2017; London et al., 2005, 2008, Lyon, 2009; McElvaney, 2015). As shown in Table 1, extant retrospective studies produce a wide range of CSA *childhood* disclosure estimates (30–87 %) and a wide range of CSA non-disclosure (i.e., never disclosing to anyone before this survey) estimates (13–62 %).

Extant retrospective studies have addressed the issue of *delayed* disclosure and non-disclosure, to our knowledge, retrospective studies have not queried adults' regarding any experiences of being questioned (in either a formal or informal setting) about abuse. Hence, the retrospective studies to date provide limited information regarding whether children should be expected to *deny* or *recant* abuse. Second, most of the extant retrospective studies focus exclusively on CSA with only a few recent studies examining disclosure in physical versus sexual abuse (Bottoms et al., 2007, 2016; Lev-Wiesel & First, 2018; Rush et al., 2014). The present study addresses these issues by examining adults' retrospectively reported experiences with disclosure, denial, and recantation of both physical and sexual abuse.

2.1. Operational definitions of child sexual abuse and disclosure

While the studies converge to indicate many children delay or fail to come forward, the disclosure estimates vary considerably. A multitude of factors likely contribute to the variation reported in retrospective studies. One likely factor that affects disclosure rates lies in the operational definitions (or lack thereof) of abuse and disclosure. When surveying adults about any disclosures, most of the retrospective studies inquired only whether they ever "disclosed" the "abuse" to anyone (see Table 1, column 9). In the majority of studies, "disclosure" was not well defined for the participants. For example, when asked "did you ever tell anyone," some participants may construe they are being asked whether they ever made a formal report. Researchers also have used different (or unspecified) ages for "childhood" disclosure. In the present study, very detailed questions to participants regarding "disclosure" and "denial" were provided. While non-disclosure and denial may be related, they describe different phenomena. *Non-disclosure* occurs when an abused child never came forward to tell anyone about the abuse. *Denial* occurs when an abused child explicitly denies abuse when directly questioned.

Operational definitions of CSA also greatly vary across the retrospective studies (see Table 1, column 4). In some studies, *abuse* required sexual contact, while others included a variety of both contact and non-contact sexual experiences. In some studies, *abuse* was defined as any *unwanted sexual experiences* (see Table 1, studies 6, 13, & 17). This definition produces ambiguity as some participants' interpretations of this concept may include non-abusive experiences, such as regretted ones.

Only three studies (see Table 1, studies 4, 5, & 7) reported providing participants with specific definitions of abuse. The findings from these studies illustrate the potential impact of failing to clearly operationalize the *abuse* and *disclosure* constructs in surveys. Bottoms et al. (2007) found, when asking participants if they considered themselves a victim of CSA, only 60 % of those who fit criteria for CSA actually considered themselves abused. Furthermore, 67 % of disclosing CSA survivors considered themselves abused while this was true of only 37 % of non-disclosing CSA survivors. Additional research has found that identifying oneself as abused affects subsequent disclosure (Bottoms et al., 2016; Lahtinen, Laitila, Korkman, & Ellonen, 2018; McElvaney, 2015). Therefore, the present study includes both objective and subjective measures of abuse status.

Table 1
Disclosure of child abuse reported in retrospective studies.

Study	Survey Sample (n)	Survey sample CSA (%)	Definition of CSA	*M* age at abuse	% never disclosing	Childhood disclosure rates	% formally reported	Disclosure assessment
1	2	3	4	*5*	6	7	8	9
1. Alaggia (2004)	14 (f) 10 (m)	100 %	Contact/non-contact abuse by a family member	6.5	NR	42 % "disclosed in childhood"	NR	participants' disclosure experiences were coded into categories of accidental/purposeful/prompted
2. Anderson, Martin, Mullen, Roman, and Herbison (1993)	3000 (f)	8 %	Contact or other unwanted sexual experiences before 16yrs. Perpetrators less than 5yrs older than victim only counted if threat or force used for compliance.	8–12	28 %	37 % within 1 yr	7.5 %	Did you ever tell anyone; some disclosures were unintentional
3. Arata (1998)	860 (f)	24 %	Sexual incidents before 14yrs with someone 5yrs +	8.5	NR	31 % at time of abuse	NR	"whether they told anyone about the incident"
4. Bottoms et al. (2007)	1411 (f)	23 %	Contact or non-contact sexual experience with someone 5yrs +	9.7	22 %	NR	Less than 9 %	"Did you ever tell anyone about your abuse experience?"
5. Bottoms et al. (2016)	1679 (f)	28 %	Contact or non-contact sexual experiences with someone 5yrs + before 17yrs.	9	23 %	NR	9 %	"Did you ever tell anyone about your abuse experience?"
6. Fergusson et al. (1996)	1019 (m & f)	10.5 %	Contact or noncontact unwanted experiences before 16yrs	NR	13.2 %	87 % at or by 18yrs	NR	Whether abuse had been disclosed to anyone
7. Finkelhor, Hotaling, Lewis, and Smith (1990))	1481 (f) 1145 (m)	27 % (f) 16 % (m)	Any experience before 18yrs you now consider sexual abuse	NR	36 %	42 % by 1 yr; 21% after 1 yr	NR	Did you ever tell anyone
8. Fleming (1997)	710 (f)	20 %	Sexual contact before age 12 with someone 5yrs +	10	48 %	28 % at time of abuse; 9 % within 1 yr	5 %	Whether told, when, and who
9. Hanson, Resnick, Saunders, Kilpatrick, and Best (1999)	4008 (f)	8.5 %	Non-consensual penetration before 18yrs	NR	NR	NR	12. 9 %	"Was this incident reported to police or other authorities"
10. Lamb and Edgar-Smith (1994)	48 (f) 12 (m)	100 %	Survivors of CSA	8.15	0	36 % before 14yrs	NR	Were selected on the basis that they previously disclosed
11. Mullen, Martin, Anderson, Romans, and Herbison (1993)	492 (f)	51 %	Sexual abuse of some form before 16yrs	NR	NR	37 % within 1 yr	7.5 %	NR
12. Roesler (1994)	168 (f) 12 (m)	100 %	Unwanted sexual experiences involving genital contact before 16yrs with someone 4yrs +	NR	NR	35 % told "in childhood"	NR	NR
13. Roesler and Wind (1994)	755 (f)	30 %	Unwanted sexual experiences before 16yrs involving contact with someone related through blood or marriage	6	NA	36 % before 18yrs	NR	Were selected on the basis that they previously disclosed

(*continued on next page*)

Table 1 (*continued*)

Study	Survey Sample (n)	Survey sample CSA (%)	Definition of CSA	*M* age at abuse	% never disclosing	Childhood disclosure rates	% formally reported	Disclosure assessment
1	2	3	4	*5*	6	7	8	9
14. Romero, Wyatt, Loeb, Carmona, and Solis (1999)	300 (f)	33 %	Sexual contact before 18yrs with someone 5yrs + OR that forced the act	11	60 %	NR	NR	"Did you ever tell anyone about the incident?"
15. Smith et al. (2000)	3220 (f)	9 %	Rape before 18yrs	10.9	28 %	30 % by 1 yr	12 %	"Have you ever told anyone about this (these) incident(s)"
16. Somer and Szwarcberg (2001)	39 (f) 2 (m)	100 %	CSA survivors	7.11	NR	43 % before 18yrs	NR	NR
17. Tang (2002)	2147 (m & f)	6 %	Unwanted sexual experiences before 17yrs	11	62 %	3 %	8 %	Was abuse reported
18. Ullman and Filipas (2005)	733 (m & f)	28 % (f) 13 % (m)	Contact & non-contact abuse before 14yrs	NR	33.5 %	45 % before 14yrs	19 % of the 66.5 % who disclosed	Did you ever tell anyone, and was it accidental or purposeful
19. Ussher and Dewberry (1995)	775 (f)	100 %	Contact and non-contact before 18yrs	8.5	46.1 %	NR	17.6 % of the 53.9 % who disclosed	Whether they disclosed
20. Wyatt, Loeb, Solis, and Carmona (1999)	338 (f)	34 %	Sexual contact before 18yrs with someone 5yrs + OR if forced	11–12	53–60 %	34 % before 18yrs	NR	Whether they told anyone.

Note. NR = not reported; f = female; m = male.

2.2. Predicting disclosure and non-disclosure

Many of the extant retrospective studies have explored individual difference and contextual variables that might predict disclosure and non-disclosure. While understanding barriers to disclosure is useful (Morrison, Bruce, & Wilson, 2018), the reasons individuals *do* disclose are usually overlooked. "Being asked" was identified in two studies (Lamb & Edgar-Smith, 1994; Roesler & Wind, 1994) as a factor that facilitated disclosure. In the present study, individuals were asked directly about their questioning experiences in order to gather information about disclosure barriers and facilitators as well as about the possibility of denial and recantation.

A number of other variables have been investigated in retrospective studies, including relationship to perpetrator, abuse severity, and demographic information. All of these variables may affect the likelihood of disclosure and so were included in this study for replication purposes, but also to compare potential predictors for CSA and CPA.

2.3. Retrospective studies examining child physical abuse disclosure

Forensic developmental science has become a burgeoning field in the past 30 years. Most of the forensic interview protocols and research have been developed and tailored to CSA cases, with the implicit notion that conducting interviews of suspected sexually abused children is different than interviewing about other types of maltreatment or witnessed events (e.g., see the National Pediatric SAFE protocol from U.S. Department of Justice, 2016). To our knowledge, similar protocols for handling other types of maltreated children do not exist.

Contrary to this notion, two studies have retrospectively compared disclosure rates among adults with self-reported CSA, versus CPA, histories. In both studies (Bottoms et al., 2007, 2016), lower rates of lifetime disclosure were found among CPA (66–67 % ever telling) versus CSA cases (77–78 %). While childhood disclosure was not assessed in these studies, and some participants experiencing CSA also experienced CPA, these findings suggest physically abused children may be more reluctant to disclose compared with sexually abused children. However, Rush et al. (2014) suggested that *suspicion* and *substantiation bias* may be responsible for lower rates of CPA disclosure and, therefore, CSA survivors may still be considered uniquely reticent. Rush et al. (2014) argued that, in cases of CPA, factors other than a child's prior disclosure (e.g., broken bones) are more likely than CSA cases to prompt forensic interviews. For CSA, a child's disclosure tends to prompt forensic assessment. Therefore, disclosure patterns among individuals experiencing CPA, along with factors that may contribute to suspicion and substantiation bias, are also explored in the present study. For example, in addition to asking participants about disclosure and questioning experiences, participants were asked about whether abuse was suspected prior to disclosure.

In this study, delay, disclosure, denial, and recantation of CSA and CPA were explored retrospectively among a population of young adults. The primary goals of this study were to explore 1) the likelihood of disclosure, denial, and recantation in both formal and informal settings, 2) adult respondents' perceptions of reasons they did or did not disclose, and 3) abuse, child, and perpetrator characteristics that may be associated with disclosure patterns.

3. Hypotheses

Consistent with prior retrospective studies, it was expected that 1) many self-reported CSA and CPA survivors would report they delayed disclosure or failed to spontaneously disclose during childhood, 2) childhood disclosure rates would be lower in CPA versus CSA cases, and 3) disclosure opportunities (e.g., someone asking the child abuse-related questions) would be related to increases in disclosure. Consistent with the child forensic studies (see London et al., 2008, for a review), low rates of denial and recantation were expected in both CSA and CPA cases. Predictors of disclosure have been mixed and were collected for exploratory purposes.

4. Sample

Participants were pre-screened from a larger study (N = 907; 530 female) and consisted of undergraduate students from two Midwestern universities. A total of 217 adults reported abuse histories including 109 (52 male) physical (12.0 %), 69 (6 male) sexual (7.6 %), and 39 (8 male) both physical and sexual (4.3 %) abuse. Participants' ages ranged from 18- to 49-years-old with most participants (82.7 %) between the ages of 18 and 21 (M = 19.46 years, SD = 2.39 years). A majority of participants were white (74 %). The remaining participants were African American (19 %), bi- or multi-racial (3%), Asian (2 %), or Hispanic (2 %).

5. Measures

In addition to measures described below, participants were asked for non-identifiable demographic information such as age and gender.

5.1. Determining childhood sexual abuse

In order to determine whether participants experienced sexual abuse they were asked::

Did you ever have any sexual experience before the age of 18 with someone 5 years or older OR with any person who forced this experience

regardless of their age? Some examples of sexual experiences include touching, being touched, or having to touch someone else for the sexual gratification of the other person (touching can be over or under the clothes), being photographed or videotaped for obscene or pornographic purposes, being asked to listen to or watch sexual activity or content (either live, written, photographed, or videotaped), intercourse, sexual assault, or rape.

5.2. Determining childhood physical abuse

In order to determine whether participants experienced physical abuse they were asked::

When you were 17 years or younger did you ever experience any non-accidental and NON-SEXUAL injury to you caused by someone else that was at least 5 years older than you? Some examples include being: spanked or whipped (where sprains, breaks, bruises, bleeding, welts, lacerations or other physical injuries resulted), beaten, punched, poisoned, burned, hit with an object, thrown, pushed down, kicked, bitten, pinched, suffocated or choked, tied up/bound, twisted by limbs, or gauged in the eyes.

The physical and sexual abuse definitions were based on definitions compiled from summaries of abuse definitions given by all 50 states in the United States as reported by the U.S. Department of Health and Human Services (2008). Participants indicating CSA or CPA were directed to a set of questions obtaining information about this particular experience. While participants were provided categorical response choices for most of the questions, they were also provided the opportunity for open-ended responses. Questions assessing each type of experience (i.e., physical or sexual) were identical except for those that asked about the nature of the abuse.

5.3. Abusive experiences

Questions regarding the abusive experience included how often and how long the abuse occurred, along with the nature of abuse. For CSA, this included whether the abuse involved contact (e.g., touching) or non-contact activity (e.g., exhibitionism). For physical abuse, this included the type of abuse that occurred (e.g., being hit, burned, etc.).

Individuals who reported experiencing both CPA and CSA were only asked questions about CSA. This was done for two reasons. First, sexual abuse is less common than physical abuse. Second, extant studies on CSA disclosure did not screen for physical abuse as an exclusion criterion, so existing CSA disclosure estimates include participants who also had a physical abuse experience. However, for purposes of methodological rigor, these individuals who experienced both sexual and physical abuse were excluded from all analyses that directly compare CPA and CSA disclosure. They are not, however, excluded from independent analyses of CSA and are included with other sexually abused participants, as is typically done in most CSA disclosure studies that never inquire about the possibility of physical abuse.

5.4. Abuse context

Questions were included to assess the context before, during, and after abuse. Participants were asked questions to determine whether 1) they considered the event abusive at the time it occurred, and 2) they now consider the event to be abusive. To better understand the context of disclosure, participants were asked if abuse was suspected by anyone and if this suspicion was due to a previous disclosure. Participants were also asked whether abuse was discovered by anyone, and if discoveries of their abuse led to their disclosure. Additional questions were directed at understanding perpetrator characteristics (e.g., age and gender of the abuser, relationship to the abuser) and participants' memory of the abuse (e.g., repression).

5.5. Abuse disclosure

Participants were asked "*Did you ever tell anyone before today that you experienced sexual/physical abuse (by anyone this includes parents, friends, acquaintances, family, teachers, or authority figures)*". This question was followed by asking why anyone was/was not told. If participants indicated they disclosed, then they were also asked to whom, when, and reactions to any disclosures. They were also asked about the outcomes of their disclosure (e.g., cessation of abuse). For example, participants were asked: "*When you disclosed, was the abuse still occurring?", "When you first disclosed the abuse, how did the person you told respond?*", and *"Did your telling lead to the FIRST time someone else suspected/discovered abuse?*". Response options were provided for participants to select but they were also provided a free recall option to respond using their own words. Childhood disclosures were considered those occurring before 18 years of age.

5.6. Recantation

Participants were asked "*After you first told someone about the abuse, was there ever a time when you "took back" your disclosure and said that sexual/physical abuse actually did not happen?*". If participants indicated they recanted, they were questioned as to why, to whom they recanted, and if recantation occurred in a formal setting.

5.7. Denial

The denial assessment asked participants about their questioning experiences. First, they were asked "*Did anyone ever ask you before this survey if you had been sexually/physically abused? This includes whether formally (e.g., police or other authority) or informally (e.g., parent, friend, or peer).*" This question was followed by those that inquire about when participants were asked, how many times they were asked, and if they ever denied.

5.8. Survey experience and debriefing

For the last segment of the survey, participants were asked questions about the emotional and cognitive experiences in response to this survey. They were also given the opportunity to list any other relevant details regarding their abuse that they felt were important but not assessed during the survey. Finally, participants were given a list of local resources (e.g., counseling services) in the event they want assistance coping with the events reported.

6. Procedure

Ethical approval for this study was obtained from the Institutional Review Board for Human Subjects Research at the researcher's institutions. Surveys were completed online. Participants were presented (through a Psychology subject pool study system) with a link to the survey and notified the anonymous survey would take about 45 min to complete. The survey was titled "Stressful Events" rather than a title that included abusive experiences to avoid potential biases that such a study title might create. This method was employed with the goal of recruiting individuals who have never disclosed their abuse versus a method that requests abuse victims. If participants continued with the survey, then they were automatically guided to the appropriate sections of the survey based on their answers regarding their individual experiences. Subsequent questions were contingent on answers to previous questions. At the end of the survey, the local support resources were provided to participants.

7. Results

7.1. Preliminary analyses

Out of the 377 males surveyed, 14 (3.7 %) indicated experiencing CSA, versus 94 out of the 530 (17.7 %) females surveyed. Given there were so few males and because males may be different in terms of disclosure behavior (Alaggia et al., 2017; Lev-Wiesel & First, 2018; Sivagurunathan, Orchard, MacDermid, & Evans, 2019), males were removed from the CSA sample. Males comprised 47.7 % of the physically abused sample. While five participants (all experiencing CSA) indicated they had "repressed their memory", they were not eliminated because they had also indicated the memory was never entirely forgotten, rather there were periods of their lives where they did not think about the abuse but it was still accessible.

Preliminary analyses were conducted to examine whether disclosure rates varied among males versus females with self-reported physical abuse histories (see Table 2). Lifetime disclosure, $\chi^2(1, N = 107) = 1.51$, $p = .22$, and childhood disclosure, $\chi^2(1, N = 93) = .02$, $p = .89$, of CPA was independent of gender. Therefore, the analyses of physically abused participants were collapsed across participant gender except when direct comparisons were made with the sexually abused females.

In the following sections, descriptive data and analyses regarding disclosure, denial, and recantation are presented. The first section of results will focus on sexual and physical abuse independently (i.e., sexually and sexually/physically abused females and physically abused males and females). Then, comparisons between CPA and CSA female groups are presented.

7.2. CSA and CPA samples

The CSA sample consisted of females who experienced both physical and sexual abuse ($N = 31$) or sexual abuse only ($N = 63$).

Table 2
Disclosure and delay in a sample of 203 adults retrospectively reporting child abuse.

	CSA[1] $N = 94$	*CPA total* [2] $N = 109$	*CPA female* $n = 57$	*CPA male* $n = 52$
Overall disclosure				
Ever Disclosed	75 (79.8 %)	57 (52.3 %)	33 (57.9 %)	24 (46.2 %)
Childhood Disclosure (before age 18)	47 (50.0 %)	35 (32.1 %)	18 (31.6 %)	17 (32.7 %)
Specific timing of disclosure since first incident of abuse				
Immediately (within 1 week)	20 (21.3 %)	18 (16.5 %)	10 (17.5 %)	8 (15.4 %)
Within 6 months from the time the abuse started	12 (12.8 %)	3 (2.8 %)	3 (5.3 %)	0 (NA)
Between 6-12 months from the time the abuse started	4 (4.3 %)	3 (2.8 %)	1 (1.8 %)	2 (3.8 %)
After a year from the time abuse started but before age 18	11 (11.7 %)	11 (1.0 %)	4 (7.0 %)	7 (13.5 %)
After age 18 or never before	16 (17.0 %)	8 (7.3 %)	6 (10.5 %)	2 (3.8 %)
Don't remember	12 (12.8 %)	14 (12.8 %)	8 (15.8 %)	5 (9.6 %)

Note. All individuals reporting CSA are female. [1] CSA = child sexual abuse; [2] CPA = child physical abuse.

Table 3
Perpetrator relationship to participants.

Relation	CSA[1], *N* = 94N (%)	CPA[2], *N* = 109 N (%)
Parent	3 (3.2 %)	71 (65.1 %)
Step-parent	4 (4.3 %)	3 (2.8 %)
Other relative	20 (21.3 %)	12 (11.0 %)
Friend of family	34 (36.2 %)	10 (9.2 %)
Acquaintance	18 (19.1 %)	8 (7.3 %)
Significant other	4 (4.3 %)	0 (NA)
Stranger	1 (1.0 %)	3 (2.8 %)
Other (not identified)	11 (11.7 %)	0 (NA)
No response	2 (2.1 %)	2 (1.8 %)

Note. [1]CSA = child sexual abuse; [2] CPA = child physical abuse. Percentages do not add to 100 % for the CSA group because participants indicated more than one perpetrator was involved in their abuse.

The CPA sample consisted of females ($N = 57$) and males ($N = 52$) experiencing physical, but not sexual, abuse. The age participants reported abuse began for both CSA ($M = 11.16$, $SD = 4.75$) and CPA ($M = 8.96$; $SD = 3.97$), as well as the age participants reported abuse ended for both CSA ($M = 12.78$; $SD = 4.33$) and CPA ($M = 13.21$: $SD = 3.73$), were assessed. Descriptive information was also collected for disclosure and delay (Table 2), relationship to the perpetrator (Table 3), relationship to the disclosure recipients (Table 4), and the specific types of abuse experienced (Table 5). If participants disclosed, reasons they provided for disclosure are presented in Table 6. The most common reason for disclosure provided by participants experiencing abuse (both CSA and CPA) was having a close friend to tell. If participants did not disclose, reasons they provided for non-disclosure are presented in Table 7. The most common reason selected by both abuse groups for non-disclosure was not realizing it was abuse at the time.

7.2.1. Sexual abuse disclosure results summary

The sample verifying CSA histories ($N = 94$ females) reported a childhood disclosure rate of 50 % and a lifetime disclosure rate of 80 %. A minority of CSA cases were reportedly made known to authorities (16 %), and very few disclosures (16 %) reportedly led to the cessation of abuse, as most disclosures were made to friends/peers. As shown in Table 2, delay was characteristic of disclosure as has been found in previous studies. While adults reported many disclosures were made immediately (26.6 %), a larger number (36.0 %) reported they delayed for more than a year or until after the age of 18.

Out of the 29 individuals reporting they were directly questioned by someone, six (20.4 %) reported that they denied to anyone who asked, and an additional four (13.8 %) reported they denied to some people but not to others. Out of the 75 individuals reporting they disclosed, seven (9.3 %) reported ever having recanted. Of the 94 CSA respondents, 10 (9.4 %) were questioned at least once and explicitly denied abuse to someone. In terms of participants reporting their cases came before authorities, formal denial and recantation were rare, only one participant reported denial, and only one participant reported recantation, to an authority figure. These numbers also need to be considered as a function of the total CSA sample since experts often speak to the overall occurrence of denial and recantation.

Several predictors of childhood disclosure were examined. Questioning about abuse, severity of abuse, conceptualization of the experience as abuse either presently or at the time it occurred, relationship to abuser, and having a supportive caregiver were examined with chi-square analyses. Age at abuse start, age at abuse end, and duration of abuse were examined with t-tests. Analyses included only participants who provided a definitive answer regarding whether they disclosed in childhood or not (i.e., participants who could not remember or were not certain were excluded). For questioning, only participants remembering they were or were not questioned were included and those reporting they were uncertain or could not remember were removed. To examine perceptions of abuse, participants were categorized as either 1) seeing the experience as abuse when it occurred, 2) not seeing the experience as abuse when it occurred, or 3) unsure of whether the experience was abuse when it occurred. Relationship to CSA perpetrator was classified as either relative (32.1 %) or non-relative (67.9 %). Severity of abuse was classified as either completed sexual acts (63.3 %) or non-contact/sexual touching only (36.6 %). Given there were so few non-disclosers *and* so few considering the experience abuse when it occurred, it was not possible to make comparisons between disclosers and non-disclosers by past perceptions of abuse. The only predictor suggesting a relationship between childhood disclosure and late/non-disclosure was for that of questioning, with increases in childhood disclosures dependent upon whether individuals reported they were questioned, $\chi^2(1, N = 70) = 6.38$, $p = .01$, $\phi = .30$. Among adults reporting someone questioned them about abuse in childhood, 79.2 % reportedly disclosed in

Table 4
Relationship to recipients of first disclosure.

Relationship	CSA, *N* = 75 N (%)	CPA, *N* = 57 N (%)
Friend/peer	39 (52.0 %)	20 (35.1 %)
Significant other	9 (12.0 %)	22 (38.6 %)
Parent	17 (22.7 %)	4 (7.0 %)
Relative	8 (10.7 %)	4 (7.0 %)
Other (i.e., teacher, therapist, other official)	2 (2.6 %)	7 (12.3 %)

Table 5
Type of abuse participants experienced.

Type of sexual abuse; N = 93	N (%)
Having to be touched or touch someone else for their sexual gratification	68 (73.1 %)
Intercourse	24 (25.8 %)
Rape (any forced sexual act involving penetration)	15 (16.1 %)
Oral sex (performed by you or the abuser)	20 (21.5 %)
Having to undress in front of someone else for their sexual gratification	13 (14.0 %)
Other	10 (10.8 %)
Type of physical abuse; N = 109	**N (%)**
Kicked, punched, thrown, or hit with an object	55 (57.9 %)
Spanking resulting in whelps, lacerations, breaks, sprains, bruises or bleeding	52 (66.6 %)
Injury to bones, flesh, or organs (internal or external)	9 (7.0 %)
Interference with breathing (e.g., choking, suffocating)	8 (7.0 %)
Other	14 (7.0 %)

Note. Percentages do no add to 100 % because individuals were permitted to indicate more than one type of experience.

Table 6
Reasons for disclosure provided by participants.

Reasons for disclosing abuse	CSA, *N* = 75 N (%)	CPA, *N* = 57 N (%)
I had a close friend who I trusted	48 (64.0 %)	18 (31.6 %)
I learned I should tell	15 (20.0 %)	10 (17.5 %)
The topic came up	15 (20.0 %)	17 (29.8 %)
Someone asked	12 (16.0 %)	13 (22.8 %)
It was an accident	5 (6.7 %)	3 (5.3 %)
I wanted it to stop	5 (6.7 %)	9 (15.8 %)
I was worried others may experience the abuse	4 (5.3 %)	2 (3.5 %)
It was already suspected	5 (6.7 %)	3 (5.3 %)
Don't know/don't remember	1 (1.3 %)	2 (3.5 %)

Note. Percentages do not add to 100 % because individuals could endorse more than one reason for disclosure.

Table 7
Reasons for non-disclosure provided by participants.

Reasons for not disclosing abuse	CSA, *N* = 17 N (%)	CPA, *N* = 50 N (%)
Fear		
Fear of getting in trouble	3 (17.7 %)	6 (12.0 %)
Fear for own safety	2 (11.8 %)	5 (10.0 %)
Fear of upsetting abuser	2 (11.8 %)	5 (10.0 %)
Fear of blame	3 (17.7 %)	2 (4.0 %)
Fear of disbelief	2 (11.8 %)	1 (2.0 %)
Fear for others safety	0 (NA)	1 (2.0 %)
Fear of upsetting others	4 (23.5 %)	3 (6.0 %)
Threat		
Threatened to be sent away	1 (5.9 %)	4 (8.0 %)
Threatened to be physically harmed	0 (NA)	3 (6.0 %)
Threatened possessions would be taken away	1 (5.9 %)	1(2.0 %)
Threatened loved ones would be harmed	0 (NA)	0 (NA)
Other		
Thought it was unimportant	7 (4.12 %)	20 (40.0 %)
Didn't realize it was abuse	14 (82.4 %)	23 (46.0 %)
Embarrassed	3 (17.6 %)	8 (16.0 %)
Didn't want the abuser to get in trouble	5 (29.4 %)	5 (10.0 %)
Wanted to avoid formal evaluation	1 (5.9 %)	5 (10.0 %)
Unsure if it really happened	1 (5.9 %)	4 (8.0 %)
Promised not to tell	1 (5.9 %)	3 (6.0 %)
Pressured not to tell	1 (5.9 %)	2 (4.0 %)
Pressured by someone other than perpetrator	0 (NA)	1 (2.0 %)
Couldn't remember the abuse	0 (NA)	0 (NA)
Liked the attention	0 (NA)	0 (NA)

Note. Percentages do not add to 100 % because individuals could endorse more than one reason for non-disclosure.

childhood, versus only 47.8 % of those who were not questioned.

7.2.2. Physical abuse results summary

The physically abused sample consisted of 109 respondents. Just under one-third (32.1 %) reportedly disclosed in childhood, and slightly over half (52.3 %) reported any lifetime disclosure. Like the sexually abused sample, delay was characteristic, and few adults reported the abuse was ever brought to the attention of formal authorities (8.3 %) or that their disclosure led to the cessation of abuse (10.5 %), with friends also being the most likely recipients of disclosure for CPA. While many disclosures were made immediately (31.6 %), an almost equal amount (33.3 %) delayed for more than a year or until after the age of 18.

Out of the 26 individuals reporting they were questioned by someone, two (7.7 %) reported that they denied to anyone who asked, and an additional seven (26.9 %) reported they denied to some people but not to others. Out of the 57 individuals reporting they disclosed, two (3.5 %) recanted. Like the CSA sample, formal denial and recantation were rare: out of 109 CPA participants, only one recantation and one denial was reportedly made to authorities.

As with sexual abuse, the same predictors of childhood disclosure of physical abuse were explored. Unlike CSA, most CPA perpetrators were parents. Therefore, relationship to CPA perpetrator was classified as either parent (67.9 %) or non-parent (37.1 %). There was a relationship between disclosure in childhood and perceiving the experience as abuse (62.5 % disclosing) or not (27.8 % disclosing) at the time the abuse occurred, $\chi^2(2, N = 93) = 8.77$, $p = .01$, $\phi = .29$. There was also a relationship between childhood disclosure and having a supportive caregiver (51.0 % disclosing) versus not having a supportive caregiver (21.4 % disclosing), $\chi^2(2, N = 93) = 7.96$, $p = .02$, $\phi = .29$. Other predictors did not attain conventional levels of statistical significance.

7.3. Comparison of female respondents reporting CSA only versus CPA only

In this final section of the results, disclosure patterns of CPA versus CSA female respondents were compared. This final set of analyses were included in order to ensure the findings reported above were similar when comparing only those individuals reporting a single form of abuse. As noted above, in order to directly compare self-reported disclosure rates in the CSA versus CPA samples, participants who reported experiencing both CSA and CPA were excluded from these analyses. Since males were excluded from the sexual abuse analyses, males were also excluded from the CPA group for the following comparisons. The remaining sample included 63 females who experienced childhood sexual but not physical abuse and 57 females experiencing childhood physical but not sexual abuse.

7.3.1. Sample characteristics

The primary goal was to compare self-reported disclosure patterns between the sexually and the physically abused participants. However, characteristics of the CSA and CPA groups were compared first. Beginning with the relationship to the perpetrator, relatives were found more likely to be the perpetrator among the CPA (89.5 %) versus CSA (27.0 %) participants, χ^2 (1, $N = 118$) = 48.82, $p < .001$, $\phi = .64$.

Next, participant characteristics were explored. Findings revealed the age abuse reportedly began was later for CSA ($M = 11.69$, $SD = 4.77$, $N = 61$) than for CPA ($M = 8.44$, $SD = 4.01$, $N = 48$) participants, $t(107) = 3.79$, $p < .001$, $d = .74$. In addition, the duration in years experienced by CPA participants was longer ($M = 4.77$, $SD = 4.42$) than for those experiencing CSA ($M = 1.46$, $SD = 1.95$), $t(106) = -5.23$, $p < .001$, $d = .97$. A possible explanation for this finding is that more sexually than physically abused participants reported experiencing only one instance of abuse, but differences for the amount of CSA participants (49.2 %) versus CPA participants (33.3 %) who reported experiencing only one instance of abuse were not found, $\chi^2(1, N = 120) = 3.10$, $p = .08$. However, the likelihood of having a supportive caregiver did differ significantly between CPA (51.8 %) and CSA (32.3 %) participants, χ^2 (1, $N = 118$) = 6.09, $p = .04$, $\phi = .23$.

7.3.2. Disclosure and delay

Childhood disclosure was dependent on abuse type with CSA participants (61.4 %) being more likely to disclose in childhood than CPA participants (38.3 %), χ^2 (1, $N = 104$) = 5.50, $p = .02$, $\phi = .23$. Lifetime disclosure rates for the CSA participants (83.9 %) were also higher than for the CPA participants (58.9 %), χ^2 (1, $N = 118$) = 9.09, $p = .003$, $\phi = .28$. While a greater percentage of disclosing CPA respondents delayed disclosure beyond 6 months (58.3 %) when compared to CSA respondents (39.4 %), these differences were not significant, χ^2 (1, $N = 71$), $p = .92$. Participants rarely reported involvement with legal authorities for both case types, occurring in only 16 % of CSA cases and 10.5 % of CPA cases. See Table 8 for rates of disclosure and delay.

7.3.3. Questioning and denial

Given that being asked was a significant predictor of disclosure for CSA overall, it was important to explore whether differences existed in the likelihood of being asked between both types of abuse. These analyses explore whether CPA and CSA cases differed in terms of likelihood and reasons to reach authorities to explore possible suspicion and substantiation biases between the two types of abuse cases. Those experiencing CPA (33.3 %) reported similar rates of ever being questioned as those in the CSA group (35.2 %), χ^2 (1, $N = 99$) = .04, $p = .85$. Comparisons of the reasons for disclosure and non-disclosure were not possible because most CPA respondents did not disclose while the reverse was true for CSA respondents.

Next, self-reported rates of denial and recantation among the CPA versus CSA groups were explored. However, low rates of questioning, denial, and recantation preclude meaningful statistical comparisons of the two groups. Out of the 19 females who experienced CSA and reported they were questioned by someone, four (21.1 %) reported that they denied to anyone that asked, an

Table 8
Disclosure and delay by abuse type: females who experienced CSA (N = 63) versus CPA (N = 57).

	CSA N (%) disclosing	CPA N (%) disclosing
Overall disclosure		
Ever Disclosed	52 (82.5 %)	33 (57.9 %)
Childhood Disclosure (before age 18)	35 (55.6 %)	18 (31.6 %)
Specific timing of disclosure		
Immediately (within 1 week)	17 (27.0 %)	10 (17.5 %)
Within 6 months from the time the abuse started	8 (12.7 %)	3 (5.3 %)
Between 6-12 months from the time the abuse started	3 (4.8 %)	1 (1.8 %)
After a year from the time abuse started but before age 18	7 (11.1 %)	4 (7.0 %)
After age 18	12 (19.0 %)	6 (10.5 %)
Don't Remember	5 (7.9 %)	9 (15.8 %)

Note. Disclosure percentages do not match analyses in the text, as analyses exclude those reporting they could not remember whether or not they disclosed.

additional two (10.5 %) reported they denied to some people but not to others, and none reported their denial was to a formal authority. Out of the 52 females who disclosed CSA, five (9.6 %) recanted to at least one person and, of these five, one recantation reportedly was made to a formal authority.

Out of the 15 females who experienced CPA and reported they were questioned by someone, one (1.7 %) reported that they denied to anyone that asked, an additional six (40.0 %) reported they denied to some people but not to others, and two of these six reported their denial was to a formal authority. Out of the 33 females who disclosed CPA, two (6.1 %) recanted to at least one person and, of these two, one recantation reportedly was made to a formal authority.

The possibility of suspicion and substantiation bias affecting disclosure among abuse types was further investigated by comparing behavioral changes and abuse suspicion reported by participants. CPA respondents (56.7 %) and CSA respondents (58.7 %) did not differ on self-perceived behavioral changes following abuse, χ^2 (1, N = 119) < .01, p = 1.00. Neither did they differ on behavioral changes noticed by others (28.1 % vs. 27.0 % reporting a noticeable behavior change for CPA and CSA respectively), χ^2 (1, N = 71) < .01, p = .93. Participants were asked if abuse was ever suspected by anyone and, if so, how the suspicion arose. Suspicion was reported by 28.1 % of physically, and 23.8 % of sexually, abused participants, χ^2 (1, N = 118) = .29, p = .59. Suspicion was reportedly due to disclosure by three physically abused participants and four sexually abused participants. Whether abuse was ever discovered also did not differ between CSA (43.5 %) and CPA (41.1 %) respondents, χ^2 (1, N = 118) = .07, p = .79. Discovery was due to disclosure for sixteen CSA, and nine CPA, cases. Non-disclosure reasons for suspicion and discovery of abuse included accidental witnesses, behavioral changes, or a combination of both (all of which were reported at roughly the same rates by self-reported CSA and CPA survivors). Discovery of abuse due to physical evidence was reported by only one survivor of CPA.

8. Discussion

The purpose of this study was to examine disclosure, denial, and recantation of child abuse in young adult's retrospective reports. Male rates of reported sexual abuse were so low, that they were excluded from the CSA portion of the study. These low rates of self-reported CSA by males is consistent with contemporary national prevalence estimates (e.g., see Finkelhor, Vanderminden, Turner, Hamby, & Shattuck, 2014). It could be that males were less likely to be abused. However, it is also possible males were less likely to report their abuse in this survey. Of course, a combination of these scenarios is also possible.

In the remaining sample, three major findings were revealed. First, CSA disclosure rates in this study were slightly higher than reported in some studies. Second, compared with CPA, CSA respondents reported consistently higher disclosure rates (i.e., they were about twice as likely to report having made any childhood or lifetime disclosures and were also more apt to report having disclosed the abuse to authorities). Third, denial and recantation were infrequent and, absent the child initiating a disclosure, most CSA and CPA cases, "flew under the radar" of adults or authorities. These low rates of denials and recantation stand in contrast to higher rates put forth by Lyon (2007) among select subsamples of children undergoing evaluation for sexually transmitted infections primarily in the 1960's and 1970's. Furthermore, among adults indicating having made a childhood abuse disclosure, most respondents reportedly disclosed to friends or peers. This finding is consistent with disclosure research from both child (Jernbro, Otterman, Lucas, Tindberg, & Janson, 2017; Kogan, 2004; Lahtinen et al., 2018; Priebe & Svedin, 2008) and adult (Bottoms et al., 2016) samples. Therefore, most disclosures did not lead to cessation of the abuse. For many people, the disclosures came at a point in time when the abuse had already stopped.

In the present study, careful steps were taken to screen participants for both childhood abusive experiences and disclosure-related experiences. For CPA and CSA, events were described that correspond with legal definitions of abuse. "Disclosure" was carefully operationally defined to participants, asking them about informal as well as formal disclosures. Participants were also surveyed regarding whether anyone ever suspected abuse or questioned them, whether they disclosed or denied upon questioning, and if disclosing, whether they ever recanted abuse allegations to anyone, informal or otherwise. To our knowledge, this is the first retrospective study to investigate any questioning experiences, including denial and recantation. Additionally, this study is one of the first to directly compare childhood disclosure in CSA versus CPA cases.

The findings from the present study echoes statements by Lahtinen et al. (2018) that rates of abuse and disclosure vary with how

terms are defined. In the present study, 12 % of respondents reported CPA and another 12 % reported CSA (either alone or in combination with physical abuse). These rates are consistent with prevalence rates reported by Finkelhor (1994a, 1994b), Finkelhor, Ormrod, Turner, and Hamby (2005), Finkelhor, Shattuck, Turner, and Hamby (2014), Finkelhor, Vanderminden et al. (2014). In this study, participants were asked about their specific *experiences* rather than their *abuse*. However, pilot data were collected from another sample of participants ($N = 197$) not included in this study but from the same pool of participants. These participants were asked whether they were sexually or physically "abused" during childhood rather than whether they "experienced a sexual/physical encounter" (as was asked in the current study). When the question was framed as *abuse*, lower CSA (6 %) and CPA (7 %) rates were attained. Furthermore, in this study, extensive questioning and multiple opportunities for open-ended responses allowed us to further determine whether 1) individuals did not fit the criteria for abuse and 2) individuals who were engaging in consensual sexual activity with same-age peers were being included. Several participants fell into one of these two categories (comprising nearly 10 % of the original CSA sample). These participants often indicated in various portions of the survey that they were not abused and, therefore, had nothing to disclose. A majority of the previously conducted retrospective studies had no components in place to identify these participants and their responses were likely included when determining disclosure estimates. Taken together, this suggests that the wording of the question and whether individuals view themselves as abused greatly affect both abuse status, and thus, abuse disclosure estimates. Past studies have varied greatly on definitions of CSA experiences, as shown in Table 1.

Extant studies also often failed to clearly operationalize "disclosure" to participants but rather implicitly assumed respondents understood the scope of what they were being asked regarding whether they ever "disclosed" abuse. In this study, respondents were directly asked if they ever told anyone before age 18 (defined as childhood) or at any point after age 18 (defined as any lifetime disclosure). Among females reporting a CSA history, just over half reported disclosing to someone during childhood, and 80 % reported any lifetime disclosure. These rates are higher than some studies which often hover more around 33–45% reporting a childhood disclosure (London et al., 2008). However, a handful of studies have found high estimates of disclosure, particularly when surveying for any lifetime disclosure (e.g., Bottoms et al., 2016). A number of international studies have also reported high rates of CSA disclosure (Fergusson, Lynskey, & Horwood, 1996; Helweg-Larsen & Boving-Larsen, 2003; Kogan, 2004; Lahtinen et al., 2018).

Compared with some prior studies, the higher rates of CSA disclosure in this study likely are attributable to a combination of factors. First, as noted above, both abusive experiences and disclosure were carefully defined. Second, a majority of the extant retrospective studies were surveys either in person, over the phone, or by mail. The present study was conducted online, increasing anonymity, and likely making individuals less reluctant to disclose abuse histories than they would have been in other settings (Helweg-Larsen & Boving-Larsen, 2003). Higher rates also are thought to emulate among younger samples having fresher memories for whether they ever told someone (e.g., Lahtinen et al., 2018; Priebe & Svedin, 2008). Finally, it is also possible that children are becoming more inclined to disclose CSA. Attitudes and beliefs about CSA may change as a result of education and awareness (McElvaney, 2015), which in turn may affect disclosure rates. School based programs have been developed to educate children about how to respond to potentially abusive experiences, most of which encourage disclosure (Topping & Barron, 2009). Alaggia (2010) investigated societal and cultural influences on disclosure and suggested that adults from older cohorts generally were not exposed to intervention programs that may affect disclosure patterns. In support of the hypothesis that children are becoming more inclined to disclose, the lifetime CSA disclosure rates in this study are in line with the childhood CSA disclosure rates reported by Lahtinen et al. (2018) among a population-based Finnish sample of 6th and 9th grade children.

A second major finding is that disclosure rates were consistently lower among respondents reporting CPA versus CSA; this trend held true for childhood disclosures, lifetime disclosures, and disclosures to authorities. Less than one-third of respondents with physical abuse histories reported disclosing to anyone during childhood while over half of respondents with CSA histories indicating having disclosed in childhood. At face value, results in this study, combined with other studies using both child (Ghetti, Goodman, Eisen, Qin, & Davis, 2002; Hershkowitz & Elul, 1999) and adult (Bottoms et al., 2007, 2016) samples provides evidence that children experiencing CPA are more reluctant to disclose than those experiencing CSA. This runs counter to widely held beliefs from practitioners that special interview techniques are needed to elicit statements from sexually abused children, while virtually ignoring discussions of other forms of child abuse, including the more prevalent physical abuse. The belief that sexually abused children will be particularly vulnerable compared with other forms of abuse likely stems from early nonevidence based theories like Child Sexual Abuse Accommodation Syndrome (Summit, 1983). Summit (1983) argued, based on his observations of his adult female Los Angeles psychiatric patients from the 1970's that no one believes a sexually abused child, and they therefore will be afraid to disclose. However, recent studies indicate children who have experienced CPA may be equally or more reluctant to disclose when compared to CSA. Perhaps higher rates of CSA disclosure are driven by social chances like the *#MeToo* movement, and comparable movements have not been seen among physically abused populations. Another explanation may be the higher rates of family member perpetrators in the physically abused sample.

Rush et al. (2014) proposed that suspicion bias may account for the higher disclosure rates in CSA versus CPA. That is, CSA cases come forward due to prior disclosures, while CPA cases often come forward due to physical injuries with no prior disclosure. More specifically, Rush et al., hypothesized CPA cases may come before authorities due to physical injuries with no prior disclosures whereas sexual abuse cases tend to come before authorities due to disclosure in an informal setting which may act as a catalyst for a formal interview. While there is agreement that providing a disclosure predicts subsequent disclosures (Kellogg & Menard, 2003; London et al., 2008), this type of potential selection bias was not used to generate the sample in the current study, as subjects were surveyed regardless of prior involvement with authorities. Among the CPA group, fewer reported authority involvement when compared to the CSA group. This suggests that physical abuse may not be more easily identified than sexual abuse, as is often assumed. Furthermore, given that suspicion of abuse and discovery of abuse was similar across abuse types, it is unlikely that rates in this study differed due to suspicion or substantiation bias. Moreover, no cases of reported suspicion were due to existing medical

evidence, and only one participant experiencing CPA reported a discovery of their abuse due to medical evidence (i.e., they had to go to the dentist to have a tooth capped).

A third major finding in this study is that among adults indicating authority involvement, denial to authorities rarely occurred. Only one adult with a CSA history and two adults with a CPA history reported denying abuse to authorities. Similarly, few reported ever recanting the abuse to anyone. Only two participants (one in each of CSA and CPA groups) reported they recanted abuse to authorities. These results are important because forensic interviewers and researchers sometimes assume that abuse denial is akin to "disclosure reluctance." While indeed there do appear to be small numbers of children who may deny abuse during formal questioning, these findings indicated that among the small minority who come before authorities, most are already telling and continue to do so under formal questioning. Given base rates of abuse are relatively low compared to all children, even very low rates of false cases coming before authorities could lead to high numbers of true denials coming before authorities (see Gigerenzer, Gaissmaier, Kurz-Milcke, Schwartz, & Woloshin, 2007, for a discussion of base rates in medical diagnostics). Therefore, forensic interviewers must proceed with extreme caution when interpreting a child's denial of abuse. Denial can be a function of a true negative- that abuse concerns arose but the child in fact was not abused.

An additional goal of this study was to explore characteristics and predictors of disclosure in both types of abuse. Variables that previously have been associated with disclosure of CSA (i.e., age, abuse duration, supportive caregiving, relatedness to abuser, and abuse severity) were not associated with childhood disclosure of CSA in the current study. London et al. (2008) suggested that individual difference predictors of disclosure such as race and age would be less useful than contextual variables (e.g., questioning context). Consistent with this hypothesis, significant contextual predictors were found in this study. These predictors included 1) having a supportive caregiver, 2) perceiving the experience as abuse at the time it occurred (both of these were associated with increases in disclosure of physical but not sexual abuse), and 3) whether individuals were questioned (associated with disclosure of sexual abuse but not physical abuse). A growing body of literature indicates that individuals who perceive themselves as victims are more apt to disclose than those who do not (Bottoms et al., 2007, 2016). While motivational factors like fear and shame have been discussed in the literature, cognitive factors for non-disclosure should be considered. Lahtinen et al. (2018) reported the modal reason for not disclosing was that participants did not see the sexual experiences as serious enough to be reported (41 %). In the current study, not realizing an experience was abuse was the most common reason given for non-disclosure across both abuse types. An important implication of these findings includes identifying barriers to both CPA and CSA disclosure.

8.1. Limitations

One strength of the current study is that data were collected from a general population of adult college students in two different midwestern states, therefore bypassing biases that may be present in rates from child forensic samples. However, retrospective reports also come with limitations. One limitation of retrospective studies is that they are, by their very nature, subject to errors in memory; most notably memory decay and distortion. With abuse and disclosure surveys, participants are being asked to provide time estimates on not only the abuse but also on any disclosure conversations. A plethora of research demonstrates people have trouble dating events (Janssen, Chessa, & Murre, 2006; Loftus & Marburger, 1983; Prohaska, Brown, & Belli, 1998), and likely conversations (i.e., disclosures) are even more challenging than events to remember and date. Of note, about 13 % of participants in the CPA and CSA samples indicated they did not remember whether they ever told anyone about the abuse.

Another challenge of retrospective surveys, specific to abuse disclosure, is that previous disclosers are more likely to disclose. Therefore, this survey will not capture some extremely reluctant disclosers who, despite efforts to increase anonymity, may still not disclose actual abuse (a concept coined survey reluctance; Lyon, 2009). In addition, it is extremely challenging to gather information about the true incidence and prevalence of child abuse and, subsequently, this presents challenges in determining the frequency and likelihood of child abuse disclosure. Furthermore, the exploratory nature of this study required investigation of multiple variables and, consequently, required numerous statistical tests. As with all exploratory research, Type I error rates should be taken in to consideration.

An additional limitation is that since so few denials or recantations occurred, no reliable inferences can be made about when to expect them or what contexts may elicit these behaviors. Also, information is lacking regarding the underlying causes or unique characteristics associated with this group of individuals. Moreover, since individuals did not report detailed information on the contexts surrounding questioning experiences, there is not enough information about the types of questions or contexts that elicited disclosures. Further, males were excluded from this CSA sample due to low rates of respondents and possible different patterns of disclosure presentation in males versus females. Future studies are needed to further investigate these issues. Finally, in this study, a college population was sampled to reflect the patterns of abuse disclosure. While college students are part of the general population, they may not accurately reflect the disclosure patterns of non-college students. Therefore, it would be useful to sample from other populations to see if disclosure patterns differ.

8.2. Forensic implications

One important implication for forensic practice is that children who come before authorities represent a minority of all abused children. Most disclosures are made to peers, and very few disclosures lead to formal action from authorities or abuse cessation. Furthermore, the most common reason given for disclosure of CSA and CPA included having a close and trusted friend to tell. Combined, these findings indicate that guidance is needed for 1) abused children to tell a trusted adult who can intervene and 2) peers to know how to report abuse to a trusted adult. Particularly if peers are very young and are presented with the moral dilemma

of not disclosing confidential information when trying to secure a friend's safety. Therefore, providing resources to peer recipients of abuse disclosure may be a key to earlier identification and intervention of both CSA and CPA.

While some training manuals heavily emphasize disclosure reluctance in cases of CSA, practitioners must use caution in presuming non-disclosure is due to the child being afraid or otherwise reluctant to disclose. The most common reason for non-disclosure was failing to realize an experience was abuse. Therefore, we cannot assume that children understand the meaning of abuse. However, in the child protection literature and among practitioners, a great deal of attention has been given to CSA cases with the assumption that this form of abuse is particularly traumatic and therefore will likely result in denials and reluctance. Professionals are regularly trained on reasons sexually abused children will fail to disclose. Some states rely on protocols whose very names imply disclosure reluctance in sexually abused children, such as "Beyond the Silence" used throughout much of Ohio. The RATAC protocol is advertised as a protocol for suspected sexual abuse interviews or other vulnerable witnesses (Anderson, Anderson, & Gilgun, 2014). Yet, among this retrospective sample, the majority of CSA disclosures were spontaneous and very few adults self-reported denials or recantations to authorities.

While both physically and sexually abused children often do not come to the attention of authorities, most children that do are there because of a disclosure, and a growing body of literature indicates the majority of these sexually abused children continue to disclose during forensic examination. According to the adults' retrospective reports in this study, denial and recantation of physical or sexual abuse to authority figures occurred rarely. Non-disclosures can also be cases of true negatives, that the child really was not abused. The fact that children often delay disclosing sexual abuse is a commonly held belief among adults (McGuire & London, 2017). Hence, expert testimony on delayed disclosure is within the knowledge of most jurors. Nonetheless, expert testimony is frequently given to explain to jurors that sexually abused children often delay disclosure and are particularly reticent to disclose. While delayed disclosure is a common finding in the CSA literature, delayed disclosure also pertains to CPA cases (for recommendations for reluctant disclosers of CPA, see Ahern, Hershkowitz, Lamb, Blasbalg, & Karni-Visel, 2019). Further, delay in itself is of limited probative value since false cases can also involve elements of delay.

Children with physical abuse histories may be more reluctant to disclose than sexually abused children, and this may be particularly true among children coming to the attention of medical professionals with no prior disclosure. The most studied forensic interview protocol is the NICHD protocol, and it is used in forensic interviews of children regardless of the type of crime being investigated (LaRooy et al., 2015; for recommendations when using the NICHD protocol during child abuse investigations, see Lamb, Brown, Hershkowitz, Orbach, & Esplin, 2018). Moreover, Hershkowitz, Orbach, Lamb, Sternberg, and Horowitz (2006) used the NICHD protocol to assess reluctant disclosers of both CSA and CPA. Given that reluctant disclosers are a primary concern for both researchers and practitioners, it is important to note that this work led to similar recommendations for reluctant disclosers of both CSA and CPA. Because similar motivational and cognitive underpinnings are shared by any child recounting an eyewitness event, forensic investigative methods should focus on proper interviews of children regardless of the event they experienced.

Declaration of Competing Interest

None.

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