Coping with Sexual Abuse

**Abstract**

In terms of child sexual abuse (CSA), there is general consensus in the psychological literature about what constitutes CSA and the negative implications for victims of CSA throughout the course of their lives. Recently, different types of cognitive strategies that victims may use to cope with CSA and the effects these coping strategies may have on memory have received much empirical attention. The first aim of this paper is to give an overview of the current literature about why, how, and when CSA victims use the cognitive coping strategies of false denial, disclosure, and recantation to cope with psychological, emotional, and even interpersonal implications of their abuse. Over the years, disclosure is the one strategy that has been researched extensively whereas research on false denial and recantation has barely just begun. The second aim is to give a recent overview of the relationship between coping strategies and memory in the context of CSA. Specifically, we will discuss how false denials may have the potential to negatively affect a victim’s memory. Finally we make an argument for the need to undertake research into insufficiently examined coping strategies such as false denial and recantation.

*Keywords*: child sexual abuse, memory, false denial, disclosure, recantation

**Introduction**

Child sexual abuse (CSA) is a societal health problem on a global scale. The most updated data reports that 1 in 5 women and 1 in 13 men have been a victim of CSA (World Health Organization, 2016). The immediate and long-term effects of CSA can be debilitating and fatal. Victims of CSA are at great risk of developing mental health problems such as depression (Putnam, 2003), post-traumatic stress disorder (Shapiro, Kaplow, Amaya-Jackson, & Dodge, 2012), experiencing suicidal ideation, and committing suicide (Gladstone et al., 2004; Maniglio, 2011; O’Brien & Sher, 2013). With such disastrous outcomes, it is understandable that victims may respond to the experience of CSA by employing certain coping mechanisms. We will illustrate this by highlighting the Anthony Hopkins case.

In 2010, Pastor Anthony Hopkins was sentenced to life in prison plus 51 years for the murder of his wife Arletha Hopkins and the sexual abuse, rape, sodomization, and incest of Arletha’s two eldest daughters from a previous relationship (Shantelle and Tasha). Details of the murder and sexual abuse came to the police’s attention after Shantelle (19 years old and pregnant at the time) disclosed to a neighbour and the Hopkins family’s pastor that she had been abused by Anthony since she was 11 years old. Shantelle told the pastor that she knew Anthony had also begun to abuse Tasha (17 year old at the time). Shantelle also revealed that Anthony referred to the biblical story of Lot having sex with his daughters in order to justify the abuse. The family pastor completely rejected Shantelle’s disclosures. Unfortunately the sexual abuse was not hidden knowledge in the Hopkins household. Arletha knew of the sexual abuse and confronted her husband, but the abuse continued. Despite the skepticism that Shantelle encountered, DNA evidence eventually corroborated her disclosure by confirming that Anthony was the father of her unborn child. During the police enquiry, Tasha denied being sexually abused by Anthony. However, Tasha’s disclosure about the sexual abuse in her personal diary proved otherwise. [[1]](#footnote-1)

As exemplified in the Hopkins case, sexual abuse victims oftentimes use disclosure-related coping strategies (e.g., non-disclosure, false denial) to refrain from speaking about their experiences. When Shantelle disclosed about the abuse to her neighbour and particularly her resistant pastor, it would not have been surprising if she employed another less researched strategy - recantation. Fortunately, definitive biological evidence was available in the Hopkins case, which is not always obtainable in CSA cases. In many CSA cases no supporting physical evidence is available and the victims’ recollections and subsequent statements are the only grounds upon which legal decisions are made (Goodman-Brown, Edelstein, Goodman, Jones, & Gordon, 2003; London, Bruck, Ceci, & Shuman, 2005; Leander, 2010). An obstruction to communication can be disastrous from an investigative stand-point, when a victim’s safety and the construction of a solid case hinges on the quality of the collected evidence (Paine & Hansen, 2002).

In the psychological literature, efforts have been made to understand and describe the different disclosure-related strategies that victims of sexual abuse use to avoid speaking about the traumatic incident (Walsh, Fortier, & DiLillo, 2010). A related issue that has received less attention is how these strategies may potentially affect victims’ memories of the abuse when they do decide to come forward about the experience. Both matters are addressed in the current paper. Our discussions for each coping strategy will be framed within the context of psychological, social, and developmental factors. Additionally, we will describe research on how such strategies might impact memory and offer some directions for future inquiry.

**False Denials**

According to Paine and Hansen (2002) the denial that is inherent in the inability or unwillingness of some CSA victims to disclose may be due to feelings of guilt from perceiving his/her self as a coconspirator to the abuse; in a sense it can be conceptualized as an *internally* driven denial. In response to questioning (e.g., by the police or in a clinical setting) some CSA victims may lie and falsely deny in whole or in part that the abuse occurred. The explicit statement by way of falsely denying an experience (e.g., “I was not abused”) in response to probing can be seen as an externally driven deceptive strategy to withhold the truth (Otgaar, Howe, Smeets, & Wang, 2016). Perpetrators also frequently use manipulative and intimidating tactics such as, grooming/coaching, bribes, and threats which can cause victims to engage in *externally* driven denial (Paine & Hansen, 2002). While denial may serve a protective purpose for both a sexual abuse victim or perpetrator in the short-term, it is predominantly perceived as an obstructive tactic to prevent problems from being addressed directly (Jackson, 2006).

The issue of denial has been discussed in diverse strands of science and is often mentioned as a coping strategy in discussions about trauma amongst victims of sexual abuse. The literature has benefited from some important discoveries on the denial patterns of CSA victims, albeit limited. Leander (2010) found that in a sample of 27 children with histories of proven abuse (e.g., film and or photograph evidence), the children collectively (falsely) denied any sexual abuse on 95 occasions during the first police interview. Sorensen and Snow (1991) retrospectively examined disclosure patterns in cases of confirmed CSA and found that a large majority of CSA victims who eventually disclosed had initially denied that the event had occurred. The study also showed that questioning by a parent/authority figure, being identified as potential victims and being questioned in a formal interview setting were the most common predictors of denials.

Still, though the concept of false denials has been known by psychological professionals for some time, much about it remains unclear (Manousos & Williams, 1998; Otgaar et al., 2016). The number of focused studies that address false denials are few and at the moment only distal parallels can be drawn from associated research as attempts are made to enrich false denial literature. There has also been a disproportionate focus in favour of errors such as false allegations to the exclusion of the false negative error of false denial (Lyon, 1995). The absence of rigorous research on false denials may in part be attributed to the idea held by some that it would be immensely challenging to obtain accurate data (London, Bruck, Wright, & Ceci, 2008). More specifically, London and colleagues argued that it is almost impossible to accurately assess the rates of denial because most sexually abused children are never systematically interviewed. They argued further that since most sexually abused children are not officially interviewed such a sample would be unrepresentative of the entire population. However we believe that exploration into the issue of false denials should remain at the forefront of academic inquiry, if for no other reason than the fact that false denials could result in the dismissal of authentic cases of abuse (Sorensen & Snow, 1991).

**Non-disclosure**

Disclosure is known to facilitate mental healing in CSA victims, has bearings on long-term mental outcome, and lowers the likelihood of re-victimization (Kogan, 2005; Sorsoli, Kia-Keating, & Grossman, 2008). Victims may decide to informally confide in a peer about their abuse or disclose formally during a regular visit to the family medical doctor (Ullman, 2002).However, sexual abuse victims are not as forthcoming about their experiences as the general public may think. Childhood disclosures commonly occur after a long period of time has elapsed (London et al., 2008). Furthermore, in the vast majority of cases survivors of sexual abuse never disclose (Hébert, Tourigny, Cyr, McDuff, & Joly, 2009) or wait until adulthood as was the case with Shantelle who disclosed eight years after the onset of her abuse (Jonzon & Lindblad, 2004; London et al., 2005).

The failure to disclose prevents many CSA cases from being officially brought to the attention of legal authorities (Somer & Szwarcberg, 2001; Bottoms et al., 2016). One impediment to disclosure is the fact that the decision to disclose may be beyond the locus of control of some victims. When instructed by the perpetrator to do so, many keep the abuse a secret for long periods of times (London et al., 2008). The concept of *secrecy* is sometimes exploited by child sexual abuse offenders in order to force compliance in victims (Elliott, Browne, & Kilcoyne, 1995; Magnusson, Ernberg, & Landstrom, 2017). In the aforementioned case, Anthony Hopkins justified his grievous actions to Shantelle by referring to biblical scriptures. Generally, it is not uncommon for sexual perpetrators to groom children to not disclose about the abuse either by explicitly asking them to keep the secret or by way of implicit psychological tactics (e.g., implying co-responsibility for the abuse), both of which have the potential to manipulate victims into compliance (Lyon, 1995; Bussey, 1995; Sjöberg & Lindblad, 2002). A child could also refrain from disclosure due to feelings of shame, guilt, self-blame (Goodman-Brown, Edelstein, Goodman, Jones, & Gordon, 2003; Schaeffer, Leventhal, & Asnes, 2011).

Reports on disclosure rates in relation to the victims’ age is varied with some studies finding higher rates of disclosure amongst older aged children (e.g., 9-13 year olds; Pipe et al., 2007). It has been argued that younger victims are more likely to delay or refrain from disclosing entirely about sexual abuse (Keary & Fitzpatrick, 1994; Wood, Orsak, Murphy, & Cross, 1996; Sjöberg & Lindblad, 2002; Hershkowitz, Horowitz, & Lamb, 2005). One reason for this is that younger victims may not be remember being abused (Sjöberg & Linblad, 2002; London et al., 2008). On the other hand, due to developmental advantages, older children are better able to grasp the significance of their abusive experiences and disclose as a result (Crisma, Bascelli, Paci, & Romito, 2004). Children who claim to be attracted to, or in love with their perpetrator are also prone to delaying disclosure longer than children who did not express such feelings (Sjöberg & Lindblad, 2002). Additionally, older children, chaotic familial households, poor parental response (Alaggia, 2010; Alaggia & Kirshenbaum, 2005), (intra-familial abuse (versus non-familial), a great sense of perceived responsibility, and fear of negative consequences tend to be associated with long delays in disclosure (Goodman-Brown et al., 2003; London et al., 2008).

Along with understanding the obstacles to disclosure, it is equally as important to note factors that facilitate disclosure. For instance, DiPietro, Runyan, and Fredrickson (1997) found that after being physically examined children were more inclined to disclose if the clinical interview was conducted by the same physician or nurse who did their physical examination. In terms of time, conducting interviews soon after disclosure has also been found to be beneficial in facilitating the disclosure process in CSA populations (Newlin et al., 2015). Malloy, Brubacher and Lamb (2013) also stated that a less frequently highlighted facilitator of disclosure is the desire of the victim to protect another person (e.g., a sibling). The Hopkins case can be referenced as a good example of a victims’ motivation to be protective, since it is quite possible that Shantelle’s awareness that Tasha was also being abused contributed in part to her decision to disclose.

**Recanting**

Recantation is the revocation of a previous claim (Malloy, Rivard, Mungo, & Molinaro, 2014). The recantation of an authentic CSA disclosure is viewed as a rare occurrence (London et al., 2008), nevertheless the repercussions are incalculable. When a CSA victim recants their claim, the motivating factors behind the recantation may not be considered. As a result, authentic CSA cases may not be investigated properly, leading to further endangerment of victims (Marx, 1996) and other children. From a legal standpoint, prosecutors involved in CSA cases where victims recant, may face the formidable challenge of demystifying the behaviour to members of a jury (Parga, 2008). Bearing these undesirable outcomes and challenges in mind, it is quite concerning that very little is known about the cognitive effects of recantations. What we do know, is that following the disclosure of abuse by CSA victims, their whole family may be subjected to scrutiny. This negative attention can cause victims to feel even more stressed and pressured (Mollon, 2009). The result of feeling pressured can cause some victims to recant their reports of sexual abuse. Victims may also hold the belief that the recantation of a disclosure is the only means by which inter-relational harmony can be restored (Tully, 2002). Recantations can also be representative of a need to control the emotional and psychological turmoil that arises subsequent to disclosing about the sexual abuse. Some children go as far as dismissing previous claims of abuse by reframing them as dreams, while others say that they lied (Elliott & Briere, 1994). Victims may even recant with the hope of hampering the investigatory process into their assault and in this regard it is still a poorly understood phenomenon (Malloy, Lyon, & Quas, 2007). Social influences, such as pressure by the perpetrator, police involvement and judicial proceedings can also spur on recantations (Sorensen & Snow, 1991; Marx, 2000).

Other factors that seem to be associated with recanting have been identified, for example, there is the proposition of a filial dependency model of recantation (Malloy et al., 2007). This model focuses on the relationship between the child and the abuser, the level of support received by the child from the non-abusing guardian after he/she discloses, the child’s age and where the child is placed after disclosing (Malloy et al., 2007). The authors found that children who were more susceptible to being influenced by an adult relative (and thus more inclined to recant disclosures) were also younger, abused by a parental figure and did not receive support from the non-offending guardian. Gonzalez, Waterman, Kelly, McCord and Oliveri (1993) made the important note that some CSA victims in their study recanted in therapy despite it being a supportive environmental context. This is noteworthy because the fact remains that most CSA disclosures occur in environments outside of a supportive therapeutic setting. Though uncommon, the fallout that occurs from recantations is sufficiently malignant to warrant increased scientific efforts to understand the psychological processes and effects that are associated with the behaviour.

**The Effects of Coping Strategies on Memory**

A relevant issue when victims (falsely) deny, limit disclosure or recant an abusive experience is what impact these strategies have on memory when victims do eventually speak out. To understand this issue, it is imperative to first focus on how traumatic events are remembered in general. A plethora of research has shown that in theory, central details for highly negative and stressful events (e.g., sexual abuse) are well remembered and quite accurate (Peterson & Whalen, 2001; Block, Greenberg, & Goodman, 2009). In one study, Alexander and colleagues (2005) found that participants who indicated that CSA was the most traumatic event they had ever experienced displayed accurate memory for documented central details of their abuse many years later. The authors suggested that this superior memory performance might the consequence of the rehearsal of the events by the victims. However, although CSA victims demonstrate superior memory for the abusive event they sometimes deliberately omit sexual details or deny knowledge of such details (Leander, Christianson, & Granhag, 2007). Is it possible that Tasha Hopkins’ false denial of her abuse could potentially adversely affect her memory? The evidence thus far strongly suggests that the answer is yes because false denials have been shown to have an association with poor memory (Vierira & Lane, 2013). In a recent study, participants were shown 12 negative and 12 neutral pictures on a computer screen after which their memory was tested. Next, participants in the false denial condition were instructed to deny in response to questioning (e.g., “What object was between the blue t-shirt and jeans?” – “There was no object between the blue t-shirt and jeans”). The following day participants’ memory was reassessed and all of the participants were instructed to tell the truth. It was found that false denials lead participants to exhibit poorer source-monitoring recognition. (Otgaar, Howe, Smeets, & Wang, 2016). The authors of this study refer to this type of memory impairment as *denial induced forgetting (DIF).* That is, being instructed to deny details in the first interview caused participants in the false denial condition to forget speaking to an interviewer about the details. Acknowledging the distinct cognitive processes that underpin different facets of memory, a follow-up study was conducted to ascertain whether the DIF that was observed in previous memory studies would be replicated when demands were placed on the ability to recall information. Otgaar, Romeo, Ramakers and Howe (2017) conducted a study wherein participants viewed a video of a theft and then subsequently either instructed to tell the truth or deny the fact that they had seen specific details. One day later, half of the participants (from both the control and denial groups) were completed either a source monitoring recognition task or a free recall task. In the experimental group, results showed that DIF was evident for details discussed in the first session in participants who completed both the source monitoring and free recall tasks in session two while memory for details seen in the theft video was not impaired.

**Discussion and Future Directions**

In order to avoid the distressing realities that are synonymous with sexual abuse, we have seen that CSA victims can use one or more cognitive strategies. While such strategies may serve a ‘protective role’ (for the child or the perpetrator) initially, there are many problems that may arise as a consequence. For instance, if a victim (who in theory is also a primary witness to alleged sexual abuse) is unable to affirm or confirm the occurrence of abuse the legal prosecution of perpetrators may become an extremely arduous task (Paine & Hansen, 2002).

Some victims may vehemently deny that any sexual violation occurred, despite the fact of being fully cognizant of the incident. In terms of motivations, the specific impetus of falsely denying sexual abuse may be feelings of guilt by victims or by simply being instructed by the perpetrator to lie (Elliott et al., 1995; Paine & Hansen, 2002). As it stands, more focus has been placed on understanding false positive errors such as false allegations (e.g., Ost, 2016) of sexual abuse to the neglect of false denial effect explication, making it an insufficiently understood phenomenon (Manousos & Williams, 1998; Otgaar et al., 2016). The validity of the need to increase efforts to understand false denial beyond a mere definition or its’ existence have been proven. In the few studies that have focused on false denial effects on later cognitive performance it has been shown that by rehearsing lies and falsely denying information people tend to have poor recall for the details of events (Otgaar et al., 2014; Otgaar et al., 2016). Stemming from the work of Otgaar and colleagues wherein participants were not allowed to initially choose how to respond in the experiment, we wondered how having such freedom of choice and then obstructing its use may also affect memory for event details. The aforementioned question inspired a recently concluded study that investigated the matter.

The sexual abuse of children can go undiscovered well into the victims’ adulthood because they falsely denied what happened to them amidst suspicion of abuse or they simply never disclosed about it. It is also the case that victims do disclose but due to negative social reactions by confidants, they either do not re-disclose or totally recant the initial disclosure. Either way, the importance of the need to understand how the dynamics of sexual abuse disclosure functions is adequately supported. As with false denial, CSA victims may opt to use the non-disclosure approach to evasion based on their personal perception (e.g., shame, fear of negative consequences) or external influences (e.g., grooming by sexual perpetrators) (Goodman-Brown et al., 2003; Elliott et al., 1995). In the instances where CSA victims disclose about their abuse the possibility still exists that they can recant the claim. Feelings of guilt for ‘causing’ upheaval in the family unit and external pressure (whether from the perpetrator themselves or a non-offending other such as a mother) are just some examples of causes of recantation (Tully, 2002; Mollon, 2009). The unfortunate reality is that in a bid to alleviate the intrapersonal stress of cognitive dissonance or to protect interpersonal relations, CSA victims may withdraw their own disclosures to their personal detriment. If the recantation of an authentic report of CSA is accepted without dispute, not only will the victim remain at risk for continued victimization but other children can be endangered. Another issue, is that legal professionals who themselves may not understand the psychological processes undermining recantations, may have the task of clarifying the behaviour to a jury (Parga, 2008). While a fair amount of literature is available about the recantation of false allegations of sexual abuse (e.g., Ost, 2016) the same cannot be said for research on the recantation of truthful reports of CSA or furthermore how this may affect memory. Since strong support for the adverse effects of false denial on memory has already been described it would not be a far stretch to hypothesize that memory can also be distorted as a result of the employment of other cognitive strategies such as recantation.

Though it possible to use supportive information such as medical evidence or witness accounts, the most insightful and powerful type of evidence is that which is garnered from the CSA victims themselves. As the primary grounds upon which the prosecution of perpetrators stands, any factor that impedes victims’ memory processes should be understood in depth. Here, we chose to highlight some factors that function through victims’ cognitions. Though these coping strategies are adequately defined and well expounded upon in terms of the motivations underpinning their use, the concluding determination of this review is that defining them contextually memory-wise, requires much more attention.

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1. Details about the case can be found on several online sources including: <http://edition.cnn.com/2008/CRIME/07/31/preacher.freezer/> [↑](#footnote-ref-1)