REBUILDING TRUST: THE EXPERIENCES OF MALE SURVIVORS OF CHILDHOOD SEXUAL ABUSE IN INTIMATE RELATIONSHIPS

A Thesis Submitted to the College of Graduate and Postdoctoral Studies In Partial Fulfilment of the Requirements For the Degree of Masters of Education In the Department of Educational Psychology and Special Education University of Saskatchewan Saskatoon

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ABSTRACT

The purpose of this study was to shed light on the experiences of male survivors of childhood sexual abuse (CSA) as they attempted to form and maintain intimate relationships in adulthood. While prior studies and survivor memoirs have suggested that CSA (as well as its psychological and physiological correlates) can have severe long-term implications on survivors' ability to form and maintain intimate relationships, few have been published recently and even fewer have focused on outcomes specific to males. Interpretative Phenomenological Analysis was used to analyze data generated from transcripts of interviews with five participants recruited from support groups for male survivors of CSA. Participants are introduced to the reader via brief narratives that outline their journey making meaning out of their experience, and how it may have influenced their intimate relationships. The analyzed data was organized into three overarching themes; Protecting the Self, with the subthemes Trust and Vulnerability; Worth of the Self, with the subtheme Masculinity, and Healing the Self. Each theme describes a different aspect of participants' experience as they found ways to overcome the unique challenges posed by their situations. Study results are discussed in the context of the current literature. Based on participant invocation, Attachment Theory is used as a lens through which data is examined. This study has important implications for professionals working with survivors and survivors' romantic partners, as well as to help reduce the stigma and uncertainty faced every day by survivors themselves.

ACKNOWLEDGMENTS

It occurs to me that very few achievements can truly be attributed to the efforts of one person alone. This thesis is no exception, so while my name may appear on the front page, it's important that I recognize the many people who made this project a reality.

First and foremost, I'm infinitely grateful to men I can only thank by fictional names: Karl, Jack, Alex, Lawrence, and Patrick. They decided to trust me with their stories and experiences, even though they knew I was a student and not a seasoned researcher. Listening and re-listening to audio of our interviews and poring over transcripts was an emotional time for me, and it impressed upon me what that trust meant to them. Despite all they had experienced, each man expressed a genuine optimism for the future as well as hope that their contribution to this study would have a positive impact on other survivors. It is my profound hope that this study does just that. If it does, these men deserve the credit.

This thesis is only one part of a larger experience I've had pursuing my masters at the University of Saskatchewan. For the entirety of it, Dr Stephanie Martin, my supervisor, has been a constant source of support, advice, and patience. This thesis took a number of unexpected twists and turns, but I was never in doubt of who to turn to for reorientation. Her experience conducting research with survivors of childhood sexual abuse was invaluable, and this project would not have been possible without her. I would also like to thank my teacher and committee member, Dr Tim Claypool, for his time, input, and encouragement.

I arrived in Saskatoon in the summer of 2012, and I knew nobody in the city. The wonderful community of friends I've found since then have been an incredible source of support throughout my masters degree. We've shared meals, houses, stories, secrets, and growth, and I could never have guessed what incredible people awaited me when I moved here those years ago. Speaking of which, I'd like to thank my incredible partner Jessica for all of her support and encouragement while I've been finishing this project.

Finally, I'd like to thank my family: Mom, Dad, Laura, and Kaitlin. They've been loving, supporting, encouraging, feeding, and putting up with me longer than anyone else, even from far away, and knowing they're in my corner has made all the difference.

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1. Introduction

In 1996, Sheldon Kennedy shocked hockey followers when he accused Graham James, a celebrated coach and former *The Hockey News* Man of the Year, of sexual abuse that had taken place over the course of 10 years (Kennedy, 2011). Years later, Olympic gold medal winner and Stanley cup champion Theoren Fleury also accused James of sexual abuse over a similar time span (Fleury & McLellan-Day, 2009). Between these two high-profile cases, it can be said that male survivors of CSA have been receiving substantially more public attention than they may have before. One of the many similarities between Fleury and Kennedy's memoirs is that both express a concern that their endurance of sexual abuse as children made navigating intimate relationships difficult for them later on in life. Kennedy writes "I'd had girlfriends since I was a teenager, but I'd never felt close to any of them. I didn't know how to love them or relate to them. I wanted them around but didn't have much to give in return." (2007, p. 111). The empirical literature suggests that a history of CSA is often followed by sexual dysfunction and impaired relationships for men in both clinical and non-clinical samples (Jacob & Veach, 2005; Kia-Keating, Sorsoli, & Grossman, 2010; Larson, Newell, Holman, & Feinauer, 2006; Lisak, 1994; Lisak & Luster, 1994; Senn et al., 2006).

1.1. Research Question

While the struggles of professional hockey players may raise awareness of the existence of male survivors of CSA, their experiences are difficult to generalize due to the pressure of professional competitive sports as well as the resources that affluent professional athletes have access to. Current research suggests that male survivors experience difficulty in forming and maintaining intimate relationships in adulthood (Gill & Tutty, 1999; Jacob & Veach, 2005; Kia-Keating, Sorsoli, & Grossman, 2010), but much of the research examining this phenomenon in an in-depth, qualitative fashion is almost twenty years old (Larson, Newell, Holman, & Feinauer, 2007). While current quantitative research may list potential outcomes and statistics as to their prevalence, it does not give the reader insight into how a survivor may experience and make sense of the varied experiences inherent in forming and maintaining intimate relationships (Jacob & Veach, 2005; Kia-Keating, Sorsoli, & Grossman, 2010). One can understand that male survivors of CSA are less likely to be engaged or married (Larson, Newell, Holman, & Feinauer; 2007), are likely to have difficulty conforming to masculine norms (Easton, Renner, and O'Leary; 2013), and are more likely to experience negative relationship outcomes (Lisak &

Luster, 1994) than men whose childhoods do not include instances of CSA, but the reader may still have very little idea of how a male survivor experiences or makes sense of these difficulties. Quantitative research also fails to acknowledge the staggering individual differences in how survivors cope with an abusive past. Theoren Fleury and Sheldon Kennedy are both male hockey players born in the Canadian prairies in the late 60's, both faced a lot of pressure at home from emotionally unavailable fathers to succeed at hockey, both played on many of the same teams in their youth, and both were abused by the same man during the same stage in their lives (Fleury & McLellan-Day, 2009; Kennedy, 2011). Demographically, it would be difficult for these two men to be much more similar, and yet their relationship outcomes were drastically different; Fleury had children with three different women and his intimate relationships were marked with infidelity and periods of abandonment (Fleury & McLellan Day, 2009), while Kennedy experienced difficulty forming intimate relationships until he met his wife, although his relationship with her was nearly destroyed through drug abuse and difficulties with communication (Kennedy, 2011). The purpose of this research is to broaden both society's and health professionals' understanding of how male survivors of childhood sexual abuse feel their abusive pasts have affected their ability to form and maintain intimate relationships in adulthood. While the research cited in this thesis may give the reader an idea of the possible relational outcomes faced by male survivors of childhood sexual abuse, the qualitative study described herein attempted to capture how these outcomes are experienced and made sense of in the context of a survivor's everyday life, as well as how they change and heal over the course of a lifespan.

1.2. The Researcher

As the lens through which data is analyzed, it is important that I document my preexisting notions and experience regarding the phenomena being studied (Smith, Flowers, & Larkin, 2009). At the outset of this study, I do not believe I had many pre-conceived beliefs concerning male survivors of CSA simply because I had not spent much time considering them. I cannot say with any degree of accuracy when I became aware of what sexual abuse is, but I do know that my thoughts on the matter generally centred on the survivor as a child; I did not consider that child survivors would grow to be adults, likely still experiencing residual effects of their trauma. While there have been individuals in my life who have survived CSA, I was not aware of their experience until after I'd started this project. Therefore I will briefly describe my

impressions and experience with the other main phenomenon under investigation in this study; intimate relationships.

Intimate relationships have been a preoccupation for me since I first experienced romantic attraction. I don't believe I'm terribly unique in this respect. One needs only a passing familiarity with popular culture to realize that romantic themes run rampant through all forms of media. One of the most familiar promises heralded by all manner of product advertisement is the assurance that the featured product or service will make one more appealing, presumably facilitating the attraction of a potential partner. Clearly, this is a universal and pressing concern for many people.

From the beginning of my teenaged years I believed two things: that there were few things more important than one's ability to attract a partner, and that this would be a consistently difficult and unsuccessful enterprise for me. Unfortunately, I don't believe this is a terribly rare mindset amongst adolescents. While fortunate in that neither belief proved to be entirely accurate, the conviction that I was not good enough to attract a partner inspired me to engage in acts of self-improvement that have stayed with me out of a genuine appreciation for their contribution to my quality of life; acts like regular exercise, keeping tabs on current events, learning for the sole purpose of expanding my knowledge, and spending more than five minutes getting ready to face the world prior to leaving in the morning. While the desire to attract a partner has had an impact on my life, the relationships I've experienced have also left me with lessons, experiences, and memories that I'd almost certainly be different without. My point is that on a personal level, intimate relationships and the desire to take part in them both have played a significant role in forming the person I am today; I'd argue their influence was largely positive.

Earlier in my life I may have believed that I was unique in my preoccupation with intimate relationships, but that is no longer the case. While completing the requirements for my master's degree, I had the opportunity to take a practicum placement at the University of Saskatchewan's student counselling centre. Among the many lessons I took from this placement was the realization that intimate relationships are a popular topic in therapy. Speaking broadly, clients who were not in a relationship spoke often about ways to change this fact, while clients who were in relationships spoke about their partners and their take on the health of the relationship. I cannot recall a single client who did not wish to discuss intimate relationships in

some way at least once, and for most it was a consistent topic of conversation. This left me with the impression that relationships can often be a pressing and stressful concern for the typical individual. While my supervisor's previous work with survivors of CSA inspired my selection for a study population, it was this impression that led me to wonder what added difficulties male survivors may experience when navigating an area already acknowledged to be treacherous.

As mentioned previously, my supervisor has worked extensively with female survivors of CSA. I didn't have much familiarity with CSA in general or as a research topic, prior to working with Dr. Martin; however the extent to which an early traumatic event can impact an individual's adult life has always fascinated me. I decided to conduct this study with male survivors of CSA because of the small amount of research currently available for male survivors, and because differences in experience between male and female survivors may complicate studies looking to examine both together (Spataro et al., 2004).

While my personal experiences may inspire and add authenticity to the current study, I am also aware that these experiences also bring biases and assumptions. At the time of this writing I am 27; I am not married and I have no children. I believe this, too, has an impact on my understanding of intimate relationships. Completely dispassionate objectivity is simply not an achievable goal in an undertaking such as this (Creswell & Miller, 2000), but I have made a concerted effort to look at the data as an outside observer and not to project myself onto the experiences of this study's participants.

1.3. Thesis Overview

The next chapter will examine relevant literature regarding childhood sexual abuse and male survivors. This will include background information on childhood sexual abuse and intimate relationships, followed by literature concerning the unique experiences of male survivors of childhood sexual abuse, such as psychological and interpersonal outcomes as well as societal perception of male survivors. Finally, Chapter Two will identify a gap in the literature that the current study seeks to address.

Chapter Three will discuss a rationale for choosing a qualitative research paradigm, specifically Interpretative Phenomenological Analysis (IPA). The steps taken to conduct this study will be examined in detail, including participant recruitment, interview protocol, data analysis, and data presentation. Lastly, ethical considerations concerning participant wellbeing and the integrity of the study will be discussed.

Chapter Four will present an analysis of the data acquired from participant interviews. Each participant's unique case will be discussed, followed by a presentation of interview data with a focus on the themes derived from analysis: *protection of self, worth of the self,* and *healing the self.*

Chapter Five will discuss the results of this study in the context of the current literature. The study's strengths and weaknesses will be examined, and implications for counselling practice will be discussed. Finally, potential avenues of future research will be explored.

1.4. Summary

Recently, disclosure from a number of public figures have elevated the existence of male survivors of CSA to a more prominent place in our public awareness. These disclosures have made these public figures' experiences as male survivors of CSA public knowledge. While these narratives are a necessary and valuable step towards promoting public awareness and addressing stigma, they are often difficult to generalize due to the unique pressures and perks of public life. This begs the question; how do more typical male survivors of CSA make sense of their experiences, particularly with regard to intimate relationships?

Intimate relationships are complex, multivariate phenomena that are as unique as the individuals in them. The formation and maintenance of intimate relationships can confront the typical individual with all manner of difficult challenges (Nieder & Seiffge-Krenke, 2001), but how is this experienced when one of an individual's early experiences with intimacy is violent and abusive? There is a vital need for improved understanding in this area, both for survivors of CSA in general and for the men who make up an often-overlooked subset of these survivors. The results of this study contribute to the understanding of how male survivors may experience intimate relationships, including the unique obstacles they face and the resources that may be mobilized to meet these challenges.

2. Literature Review

This section will focus on the empirical literature concerning male survivors of CSA and intimate relationships that will inform the structure of this study. Smith, Flowers, & Larkin (2009) state that a literature review for an Interpretative Phenomenological Analysis [IPA] study should broaden the reader's understanding of the study's participants while also helping to "identify a gap which your research question can address" (p. 42). As such, this section will discuss the prevalence of CSA perpetrated against males, society's perception of male survivors, and the sequelae experienced by survivors with a focus on relationships and the factors that influence them. The chapter will close by identifying a gap in the literature with regards to the impact of CSA on male survivors' abilities to form and maintain intimate relationships in adulthood, and what this study could contribute to the existing empirical data.

One of the few qualitative studies examining the effect of childhood sexual abuse on men was that undertaken by Gill and Tutty (1999). The researchers conducted interviews with ten male survivors aged 27-50, and used content analysis to identify three recurring themes that were consistent across most or all of the participants. These themes were society's inability to accept that men can be victims of childhood sexual abuse, difficulties forming intimate relationships, and difficulties forming fulfilling sexual relationships. An earlier study by the same researchers (Gill & Tutty, 1998) examined the effect of childhood sexual abuse on the sexual identity of 10 survivors of childhood sexual abuse and found that they did have difficulty consolidating their abuse with what they believed was the societal requirement for men to be strong non-victims. Both studies mention the scarcity of research with this population, an issue that has not greatly improved with time (Diamanduros, Cosentino, Tysinger, & Tysinger, 2012; Kia-Keating, Grossman, Sorsoli, & Epstein, 2005).

2.1. Definitions

2.1.1. Defining CSA. Red Cross Canada (n.d.) defines CSA as "when a younger or less powerful person is used by an older or more powerful child, youth or adult for sexual gratification." Sexual abuse can further be classified as either contact or non-contact sexual abuse. Non-contact sexual abuse involves the exposure of the child to sexual situations, such as sexual videos/pictures, or being flashed/exposed to sexual body parts. Contact sexual abuse involves penetration, touching in a sexual manner, or the coercion of a child to touch another's

sexual areas and is typically used to operationally define CSA in most of the empirical literature (Dhaliwal et al., 1996; O'Leary, 2009; O'Leary & Gould, 2010; Stoltenburgh et al., 2011). In keeping with the empirical literature, this study will operationally define CSA as contact child sexual abuse.

2.1.2. Defining intimate relationships. For the purposes of this study, an intimate relationship was defined as the relationship between two married spouses or committed romantic partners (Whisman & Baucom, 2012).

2.2. Prevalence

Calculating an exact prevalence rate for CSA perpetrated against boys can be difficult due to males' tendency to not disclose or to wait years to disclose (O'Leary & Barber, 2008; Sorsoli, Kia-Keating, & Grossman, 2008). Still, many studies have attempted to paint a picture of how many men may be living with histories of CSA (Briere & Elliott, 2003; Jacob & Veach, 2005; MacMillan et al., 2013; Stoltenborgh et al., 2011). This section will examine the prevalence rates of CSA perpetrated against males as suggested by the available literature.

2.2.1. Prevalence in the general population. Stoltenborgh et al. (2011) undertook a meta-analysis to determine the global prevalence of childhood sexual abuse by gender by examining a number of prevalence studies conducted across the world. They found that the globally, approximately 76 of every 1000 men, or 7.6%, will be survivors of childhood sexual abuse and measured the prevalence in North America as being slightly higher at 8%. It should be noted that the actual prevalence rates could possibly be higher, as the authors included informant studies in which participants were asked how many children had experienced CSA over the past year, while self-report studies take into account lifetime prevalence (Stoltenborgh et al., 2011).

In Canada, MacMillan et al. (2013) found a similar prevalence rate of 8.3% in provincewide health surveys from Ontario. The authors used data from a provincial survey administered to participants between the ages of 21-35, which is problematic due to literature that suggests almost half of male survivors wait at least twenty years to disclose their abuse (O'Leary & Barber, 2008). This being the case, there is a distinct possibility that there were participants who experienced sexual abuse in childhood but were not prepared to disclose.

It is also important to keep in mind that 8% may be a conservative estimation of prevalence of CSA against males; Briere and Elliott (2003) found a 14% prevalence rate in a geographically stratified random sample taken from across the United States (p. 1210). This

larger prevalence rate could be due to the authors' chosen method of recruitment; questionnaires were mailed to a list of participants based on automobile ownership records and listed telephone numbers (Briere & Elliott, 2003). It is possible that individuals who had experienced CSA in their past were more likely to remember to mail back the completed survey than those who had not, given their emotional connection to the subject matter. Even so, if the 8% prevalence rate found in Ontario is consistent across Canada as Stoltenborgh et al.'s data suggests, then approximately 1, 394, 500 of Canada's 17, 432, 200 men (Statistics Canada, 2013) could be survivors of childhood sexual abuse. To put that number in perspective, it is larger than the current population of the province of Saskatchewan (Statistics Canada, 2013).

2.2.2. Differences in prevalence across populations. While I was not able to find any research examining the role of ethnicity in the prevalence of childhood sexual abuse against males, a study conducted by Holmes (2007) suggests that boys in lower-SES families (as measured by parent income and education level) are more likely to be sexually abused than boys in higher-SES families, and boys in single-parent families are more likely to be abused than boys from families in which two parents are present.

2.3. Psychological Sequelae of CSA

Male survivors of CSA are at greater risk of suffering from a range of mental health concerns than the general population (Dhaliwal et al., 1996; Romano & DeLuca, 2001). Male survivors are more likely to be suicidal than non-abused males (Brown & Anderson, 1991), and are more likely to have attempted suicide (Langevin, Wright, & Handy, 1989). These depressive symptoms are consistent with Lisak's (1994) suggestion that a history of CSA can promote a negative self-schema in male survivors. Male survivors are also more likely to experience anxiety than male controls (Briere et al., 1988). Finally, male survivors are more likely to engage in substance abuse and to do so more frequently than non-abused males (Hussey, Strom, & Singer, 1992; Schraufnagel, Davis, George, & Norris, 2010).

While I was able to find numerous studies comparing the psychological well-being of male survivors compared to male controls, these studies seem to share a number of limitations. The most obvious limitation is that very little of the research seems to have been conducted within the last twenty years. Furthermore, many of the studies compare male survivors and non-survivors within clinical populations (Brown & Anderson, 1991; Hussey, Strom, & Singer, 1992;

Langevin, Wright, & Handy, 1989), which may not be representative of male survivors outside of inpatient settings.

2.4. Masculinity and CSA

Diamanduros, Cosentino, Tysinger, and Tysinger (2012) proposed that one of the reasons research on sexually abused children has traditionally focused more on female rather than male survivors is that culturally-held beliefs about masculinity keeps male survivors from disclosing their abuse. This section will focus on the literature surrounding cultural beliefs of masculinity and their impact on male survivors of CSA.

2.4.1. Societal expectation of men as non-victims. In a study examining undergraduate student reactions to male disclosure of CSA, Spencer & Tan (1999) presented 184 male and female undergraduate students with a fictional scenario in which a male named Jim was undressed and fellated by an unnamed middle-aged neighbour. The authors constructed six versions of the scenario, three involving a male neighbour with Jim described as five years old, fifteen years old, and twenty-five years old, and three involving a female neighbour with identical circumstances. Each participant was told that the purpose of the study was to examine people's responses to a person who discloses being a survivor of sexual abuse, presented with a single scenario, and then asked to complete a number of questionnaires. The questionnaires gauged the level of responsibility the participant attributed to Jim for the encounter, the level of responsibility the participant attributed to the neighbour, and the participant's punitive attitude towards the neighbour (Spencer & Tan, 1999). The authors found that as Jim's age increased, participants became more likely to hold him responsible, and not the neighbour, for the abuse. The authors also found that participants were less likely to feel punitive towards the female neighbour compared to the male neighbour when a younger survivor was involved, although punitive attitudes towards the male and female neighbours were similar in the conditions where the survivor was older at the time of the incident. The authors claim that while attitudes towards the neighbour were generally negative and attitudes towards Jim were generally positive, the degree to which participants were willing to attribute responsibility to Jim is indicative of a culture in which men are viewed as sexual aggressors, rather than potential victims.

There are some issues with the methodology that may have skewed results, however. The scenario presented to participants did not mention whether Jim was uncomfortable with his encounter with the neighbour during or after its occurrence, only that he was uncertain prior to

the act of fellatio (Spencer & Tan, 1999). While sexual contact between a middle-aged person and a minor under the age of consent is certainly frowned upon by society (hence the establishment of an age of consent), this may have left participants confused by the scenario in which Jim is 25. Participants may have felt that they had very little data to confirm that what had taken place was non-consensual, other than the explanation of the study's purpose prior to their reading the scenario. It's worth noting that a study examining college-aged adults' attitudes towards sexual consent, published in the same year, concluded "both men and women reported most often showing their consent to sexual intercourse by making no reponse." (Hickman & Muehlenhard, 1999, p. 258). Using this logic (which may have been prevalent at the time among those participating in the study), the absence of any vocal or physical resistance on Jim's part could have been construed as consent by participants. However, this would not account for the differences between participant perceptions of the scenario in which Jim was 5, and that where he was 15.

2.4.2. Male disclosure of CSA. O'Leary and Barber (2008) compared female and male survivors of childhood sexual abuse on the length of time between the occurrence of the abuse and disclosure. The authors found that males were significantly less likely to disclose immediately after the abuse (26.2% of men reported disclosing immediately after the abuse versus 63.6 % of women) as determined by a chi-squared test. The authors also found that men took significantly longer to disclose the abuse, with 44.9% of men requiring over 20 years to talk about what had happened to them. This data suggests that men are less willing to share their experiences than women, potentially because they feel that as men, their victimhood is somehow less legitimate than that of female survivors of childhood sexual abuse.

2.4.3. Legal outcome disparities between male and female survivors. A comparison of trial outcomes for male and female survivors of childhood sexual abuse by Edelson and Joa (2010) found that District Attorneys pressed charges against alleged perpetrators who were suspected of sexually abusing girls 78.57% of the time, while pressing charges against alleged perpetrators who were suspected of sexually abusing boys 50% of the time, a disparity that was determined significant via chi-square test. The same study also found that individuals accused of sexually abusing girls were charged with significantly more criminal charges than those accused of sexually abusing boys, and that individuals found guilty of sexually abusing boys were less likely to have plead guilty than individuals who were found guilty of sexually abusing girls. The

authors claim this last point suggests that individuals who were found guilty of sexually abusing boys felt that they had a good chance of not being convicted, prior to the completion of their trial. The authors conclude "males who are sexually abused may be at a disadvantage in the legal system compared with females." (p. 438). This study certainly supports the idea that society, or at least the legal system, looks at male and female victims of childhood sexual abuse differently, likely to the disadvantage of male victims.

A major limitation of Edelson & Joa's (2010) study is that it only included cases with male perpetrators. As previously discussed, individuals may perceive male survivors differently when their perpetrator is female, and may be more likely to attribute responsibility for the abuse to the child (Spencer & Tan, 1999). While most perpetrators of CSA are male, women also perpetrate CSA (Deering & Mellor, 2011) and the exclusion of cases in which women were charged is problematic. Also, it should be noted that survivors of CSA face an uphill battle regardless of their gender when it comes to legal outcomes; a meta-analysis of criminal justice decisions undertaken by Cross, Walsh, Simone, & Jones (2003) found "child abuse was less likely to lead to filing charges and incarceration than most other felonies." (p. 323).

2.4.4. Importance of masculine norms to survivors. Traditional North-American cultural beliefs concerning what traits and behaviours are acceptable for men can be damaging for male survivors of childhood sexual abuse (Gill & Tutty, 1999). In a study of men who'd been sexually abused, Easton, Renner, and O'Leary (2013) found that a high level of conforming to masculine norms (measured by The Conformity to Masculine Norms Inventory by Mahalik et al., 2003, as cited in the study) was correlated with a 230% increase in the likelihood of a suicide attempt in the past year for male survivors. The Conformity to Masculine Norms Inventory measures adherence to 11 traditional male norms such as emotional control, self-reliance, and heterosexuality through questions such as "it is important to me that people think I am heterosexual" answered via 4-point Likert scale from (1) Strongly Agree to (4) Strongly Disagree (Easton, Renner, & O'Leary, 2013). This suggests that male survivors may have difficulty reconciling their experience or their status as survivors with traditional masculine values.

2.4.5. Toxic masculinity. Easton, Renner, and O'Leary's (2013) aforementioned study suggests that belief in aspects of North American stereotypical heterosexual masculine norms may have a negative impact on male survivors' mental health. Recent research suggests that a

certain subset of these norms, sometimes referred to as toxic masculinity, may be detrimental to males in general (Parent, Gobble, & Rochlen, 2018). Toxic masculinity is a relatively new term that refers to specific aspects of North American stereotypical masculine norms, particularly those that relate to domination of others and the "endorsement of misogynistic and homophobic views" (Parent, Gobble, & Rochlen, 2018, p. 1). Researchers Parent and Moradi (2011) found that the subscales Winning, Power Over Women, and Heterosexual Self-Presentation showed higher intercorrelation than other measured subscales during their development of the Conformity to Masculine Norms Inventory-46, a more concise version of Mahalik et al.'s previously mentioned 2003 inventory. This lead the authors to characterize the group of subscales as "a thread of masculine, heterosexual, patriarchal hegemonic power" (p. 349). Parent, Gobble, and Rochlen (2018) found that endorsement of these subscales was correlated with increased negative interpersonal interactions and depression. This growing area of research suggests that some stereotypical North American masculine norms may be detrimental to those that endorse them. In fact, given that these norms include a decidedly inequitable attitude towards women and sexual minorities, it seems possible that these attitudes may be detrimental not only to the individuals who endorse them, but possibly also to those with whom they interact. While male survivors of childhood sexual abuse may face a unique struggle with North American stereotypical heterosexual masculine norms, this research suggests that this struggle may exist in different forms and to different extents with males who have not experienced childhood sexual abuse.

2.4.6. Masculinity and relationships. Cultural beliefs of masculinity, especially those that portray men as strong non-victims can also have a negative effect on male survivors' ability to form and maintain relationships in adulthood (Lisak, 1994). Gill and Tutty (1999) found that each of the participants in their content-analysis "lived with the belief that he is weaker and, therefore, less valuable than other men. Each explained many of his problems as a result of the sexual abuse." (p. 27). Some participants explained that this damaged sense of masculinity caused them to withdraw emotionally from intimate relationships, or to act "excessively in ways perceived as manly, behavior [sic] that ultimately led to relationship problems" (p. 27). This is consistent with Jacob & Veach's (2005) qualitative study of female partners of heterosexual male survivors, in which the majority of participants reported that situations in which the male survivor felt their masculinity was questioned (such as their female partner earning more money

than they did) often led to outbursts of anger and conflict. This is one of the many ways a sense of damaged or threatened masculinity may negatively impact male survivors' ability to form and maintain healthy intimate relationships in adulthood (Gill & Tutty, 1999).

2.5. Male Survivors and Intimate Relationships in Adulthood

This section will explore the available literature examining how a history of CSA can have an impact on male survivors' intimate relationships in adulthood.

2.5.1. Intimate relationships. As suggested in Chapter 1, intimate relationships can be a source of stress whether or not one has experienced CSA. Navigating one's first romantic relationships in adolescence can involve experiencing a number of social and emotional situations for the first time, typically with a partner who is also navigating similar concerns; available literature suggests this can be very stressful until skills are developed in this area (Nieder & Seiffge-Krenke, 2001). While the process itself may be stressful, data suggests that romantic or intimate relationships in adolescence can be correlated with a variety of mental health concerns. A study by La Greca & Harrison (2005) surveyed 421 adolescents aged 14 to 19 and found that adolescents who were in a dating relationship reported significantly less social anxiety symptoms than adolescents who were dating. The authors' remarked that this could be because socially anxious adolescents are wary to enter into a dating relationship, or because dating confers upon adolescents a "sense of status or belonging in their peer crowd," (p. 59) which is unavailable to those not dating. The study also examined relationship quality among dating adolescents. While self-reported relationship quality did not seem to have a significant effect on social anxiety, negative dating relationship quality predicted depressive symptoms in adolescent participants, even when other peer relationships and best friends were taken into account. The authors suggest this could support the idea that negative qualities of romantic relationships can make a unique impact on adolescent mental health.

Available literature suggests that intimate relationships and mental health may be closely associated in adulthood as well. In a meta-analysis examining intimate relationships and psychopathology, Whisman & Baucom (2012) note that the relationship between these two variables is unlikely to be one-way. Marital stresses, particularly chronic and/or severe stressors, can be a potent source of perceived stress, which in turn increases the likelihood of an individual developing mental health problems. One partner in a relationship experiencing mental health problems can present unexpected challenges or burdens on the other partner, which can have an

impact on the amount of support they give and receive, leading the authors to remark "irrespective of how they develop, mental health problems may increase the likelihood of relationship discord, which in turn may impact the likelihood of maintenance or recurrence of psychiatric symptoms." (p. 4).

2.5.2. Male survivors and relationships. Literature suggests that a history of CSA may cause a survivor to view others with suspicion and mistrust, even in adulthood (Lisak, 1994). As such, learning to negotiate any form of relationship may be difficult for a survivor. Kia-Keating, Sorsoli, & Grossman (2010) conducted interviews with sixteen male survivors of CSA and discussed their ability to form and maintain relationships. The authors found that all of their participants reported difficulty trusting others, but that most of them had learned to overcome this to an extent by engaging in safe relationships with animals, non-abusive family members, and other survivors. While participants reported that growth through these safe relationships had made it easier to form new relationships, most survivors still reported difficulty negotiating intimate relationships, even later into adulthood.

2.5.3. Male survivors and dating. Larson, Newell, Holman, and Feinauer (2007) compared a group of 142 male survivors of childhood sexual abuse with a control group of 140 men who did not have a history of childhood sexual abuse, all recruited from a study examining marriage readiness. The authors found that men who had not experienced childhood sexual abuse were over six times more likely to be in a dating relationship and more than twice as likely to be engaged than male survivors of CSA. They also determined that age, education, and income did not have a significant impact on male survivors' dating status. This suggests that male survivors of childhood sexual abuse may be less successful or less interested in intimate relationships than men without a history of childhood sexual abuse.

While this study paints a bleak picture of male survivors' ability to form and maintain intimate relationships, it should be noted that this study was conducted on an undergraduate population; other studies (Jacob & Veach, 2005; Kia-Keating, Sorsoli, & Grossman, 2010) have suggested that male survivors learn to better negotiate intimate relationships over time. Given that this study examined participants' current relationship status in young adulthood, this gradual growth was likely not taken into account. However, studies mentioned previously take on new potential meaning when examined in the light of this data. Nieder & Seiffge-Krenke (2001) suggest that dating is initially stressful but becomes less so with experience; if male survivors of

CSA date less than their counterparts, will it take them longer to be comfortable in this area? In a similar vein, La Greca & Harrison's (2005) findings suggest that not dating, at least in adolescence, is associated with social anxiety symptoms. If this relationship can be explained, at least in part, by what the authors describe as a "sense of status or belonging in their peer crowd," that comes with being in a dating relationship (p. 59), then it's possible that male survivors may be at increased risk of social anxiety in adolescence even before other considerations are taken into account.

2.5.4. Relationship histories of male survivors. Lisak and Luster (1994) compared the educational, occupational, and relationship histories of sixteen men who had experienced childhood sexual abuse, twenty-two men who had experienced childhood physical abuse, fifteen men who had suffered both types of abuse, and thirty seven men who had not experienced either type of abuse in childhood. The authors asked participants how many of their relationships had ended negatively, providing examples such as infidelity (either partner), abuse (either partner), and repeated conflicts as examples of negative endings. An analysis of variance suggested that survivors of childhood sexual abuse reported significantly more negative endings to relationships than controls. The authors claim this suggests that male survivors of sexual abuse are unsuccessful, rather than uninterested, in forming and maintaining intimate relationships in adulthood compared to men who have not experienced childhood sexual abuse. If male survivors of CSA are more likely to experience more negative endings to relationships, it's possible that they also experience more stress in relationships than the typical population. If this is the case, Whisman & Baucom's (2012) assertion that stress in a relationship can promote mental illness and vice-versa takes on new significance as together, these data suggest that, all other vectors aside, male survivors of CSA may be at increased risk of mental illness due to relationship stress.

2.5.5. Male survivors and sexual intimacy. Sexual intimacy can be an important aspect of adult intimate relationships (Jacob & Veach, 2005). Using content analysis in a qualitative study, Lisak (1994) suggested that all of the 26 survivors interviewed by the researcher had difficulties sorting out their sexual identity as adults in the wake of their childhood sexual abuse. Some survivors felt that their history of abuse had left them with a fear of sexual intimacy and the memories of abuse that it could provoke, while others engaged in compulsive sexual behaviour with multiple partners that was later regretted.

A more recent study by Senn et al. (2006) supports the theory that compulsive sexual behaviour may be an issue for male survivors. The authors recruited participants from a sexually transmitted disease clinic and found that a history of childhood sexual abuse was correlated with a larger number of past sexual partners and of episodes of unprotected sex (Senn et al., 2006). One limitation of this study is that by recruiting from a sexually transmitted disease clinic, it is unlikely that they would encounter male survivors who avoided sex instead of engaging in it compulsively. Gill and Tutty (1999) found that seven of the ten participants in their content-analysis "had avoided sexual activity for a considerable length of time that was, for each, a significant aspect of their experience." (p. 25).

Participants in a qualitative study of female partners of male survivors also reported a range of sexual dysfunction in their partners, ranging from fear of sex to hypersexuality and multiple instances of infidelity (Jacob & Veach, 2005). Many of the participants in this study felt that their partners were trying to "repeat and re-enact aspects of the sexual abuse within a committed relationship, including both victim and perpetrator behaviours" (p. 285). There does not seem to be a typical profile for sexual dysfunction in this population, with reports of survivors experiencing anything from near-celibacy (Gill & Tutty, 1999) to risky hypersexual behaviours (Senn et al., 2006). Jacob & Veach's (2005) finding that all of the participating female partners reported dissatisfaction with the sexual relationship that existed with their partners suggest that regardless of partner-seeking behaviour, the sexual health concerns of male survivors can have a negative impact on their committed intimate relationships.

2.5.6. Partners of male survivors. Jacob & Veach (2005) interviewed ten female partners of male survivors on the difficulties they encountered in their relationship with their partner. Half of the participants reported that their partner had been unfaithful on multiple occasions, all participants reported that their relationship suffered from persistent communication issues, and all participants reported that their partner was prone to outbursts of anger (Jacob & Veach, 2005). Furthermore, nine out of ten participants reported that they felt their self-esteem was significantly decreased by their relationship (Jacob & Veach, 2005). While this literature review has mostly concerned itself with male survivors' experiences in intimate relationship, this study suggests that partners of male survivors also experience difficulties that may contribute to the negative relationship endings experienced by male survivors (Lisak & Luster, 1994). This also seems reminiscent of Whisman & Baucom's (2012) suggestion that one partner's mental

illness can contribute to burdens experienced by the other, which may limit their ability to receive and provide support, and lead to increased stress in the relationship for both partners.

While this study offers an interesting insight into the intimate relationships of male survivors, there are two major limitations that must be taken into account. The first is that the study only examined partners of heterosexual male survivors and therefore does not take into account the relationships of homosexual survivors (Jacob & Veach, 2005). The authors also did not consult the survivors themselves, so there's no way of knowing whether the survivors felt that the behaviours listed by their partners were due to their history of CSA or other factors.

2.6. A Gap in the Literature

Adult intimate relationships can be complicated phenomena at the best of times, and the empirical data available suggests that male survivors of childhood sexual abuse may find their ability to form and maintain intimate relationships in adulthood affected by their history of abuse in a multitude of ways, both sexually and emotionally (Dhaliwal et al., 1996; Roman & DeLuca, 2001). Some survivors seem to display risky compulsive sexual behaviour (Senn et al., 2006) while others seem to show a fear of sexual activity (Gill & Tutty, 1999). Further complicating matters is the fact that many if not most of the studies that examine this phenomenon in a qualitative fashion are somewhat dated (eg. Gill & Tutty, 1999; Lisak, 1994; Lisak & Luster, 1994) or use data collected in the 1990's (eg. Larson, Newell, Holman, & Feinauer, 2007). This last point places special emphasis on the significance of the current study, as high-profile cases in the recent past have raised public awareness of the existence of male survivors of CSA (Fleury & McLellan-Day, 2009; Kennedy, 2007). It is very possible that the stigma or pressure to conform to societal masculine norms (two factors isolated by Easton, Renner, & O'Leary, 2013, as being detrimental to survivors' psychological outcomes) have changed since the 1990's. The time has come to see how contemporary male survivors of CSA have experienced the effects of their abusive past on their intimate relationships in adulthood.

3. Methodology

This chapter presents the methodology and procedures used in order to answer the research question: how do male survivors of CSA experience intimate relationships in adulthood? The benefits and limitations of using a qualitative research methodology, specifically Interpretative Phenomenological Analysis (IPA) will be discussed, as well as participant recruitment criteria, recruitment procedure, data generation, and data analysis. Finally, ethical considerations will be examined and discussed.

3.1. Qualitative Research Methods

Qualitative research methods have been used by researchers in the social sciences and helping professions to examine intangible phenomena for over 30 years (Berg, 2009; Creswell, 2003, 2007; Merriam, 2002). Such methods operate on the understanding that reality is not a "fixed, single, agreed upon, or measurable phenomenon" but is instead an experience that is interpreted differently depending on the individual (Merriam, 2002, p. 3). Qualitative researchers attempt to describe their participants' interpretation of reality (often at a specific point in time and/or in a specific context) as faithfully as possible (Berg, 2009; Merriam, 2002).

While there are many different research designs available to qualitative researchers (Berg, 2009; Creswell, 2003, 2007), Merriam (2002) proposes that there are four key characteristics that are consistent across all forms of qualitative inquiry. The first among these is that researchers attempt to understand how their participants make sense of their experience. This means that a keen effort to learn peoples' understanding of the world and their place in it is at the heart of most qualitative studies (Merriam, 2002; Smith, Flowers, & Larkin, 2009).

The second characteristic is that the researcher is always the "primary instrument" through which data is gathered and examined (Merriam, 2002, p. 5). Since understanding is the goal of qualitative research, a human element (embodied by the researcher) is required to identify, question, and report data as it is found in the field (Merriam, 2002; Larkin, Watts, & Clifton, 2006; Smith, Flowers, & Larkin, 2009). While this human element is subject to the same types of shortcomings and biases that all individuals are prone to, the researcher attempts to identify and monitor these potential weaknesses in order to be aware of the possible effects they may have on the collection and interpretation of data (Creswell, 2007; Merriam, 2002; Larkin, Watts, & Clifton, 2006; Smith, Flowers, & Larkin, 2009).

Third, qualitative research is often inductive in nature (Larkin, Watts, & Clifton, 2006; Smith, Flowers, & Larkin, 2009; Smith 2004). This means that qualitative researchers often gather data from which to formulate hypotheses, rather than the deductive approach often favoured by positivist researchers wherein hypotheses are formulated first, and then tested via data collection (Creswell, 2003, 2007; Smith, Flowers, & Larkin, 2009).

Finally, qualitative researchers prefer to communicate their findings through rich descriptions or pictures rather than numeric data (Creswell, 2003; Merriam, 2002, Smith, Flowers, & Larkin, 2009; Smith & Osborn, 2008). In addition to their findings, qualitative researchers often include supporting documents, excerpts from interviews, field notes, correspondence, video excerpts, and any other data that may broaden the reader's understanding of the study's participants (Larkin, Watts, & Clifton, 2006; Smith, Flowers, & Larkin, 2009).

The aim of the current study was to increase understanding of how male survivors of CSA experience and make sense of the impact of CSA on their intimate relationships. With this as a goal, qualitative research methods are an appropriate choice due to the quality of data required to capture the lived experience and meaning making of an individual and to the inductive nature of the research question (Jacob & Veach, 2005; Kia-Keating, Sorsoli, & Grossman, 2010). In order to address the research question, I chose Interpretative Phenomenological Analysis as my specific method of qualitative research.

3.2. Interpretative Phenomenological Analysis

Interpretative Phenomenological Analysis (IPA) is a qualitative research methodology that places emphasis on the lived experiences of individuals. It requires the researcher to gather rich descriptive data in order to give their reader an in-depth look at how aspects of everyday life are experienced from the point of view of the study's participants (Larkin & Thompson, 2012; Larkin, Watts, & Clifton, 2006; Smith, 2011; Smith, 2004; Smith, Flowers, & Larkin, 2009). IPA is founded on three core theoretical principles, each of which will be briefly described here.

3.2.1. Phenomenology. Interpretative Phenomenological Analysis has been influenced by the writings of multiple philosophers and scientists who subscribed to the phenomenological approach to studying experience (Smith, Flowers, & Larkin, 2009). While it is almost impossible to deliver a comprehensive definition that encapsulates all of the contributions to phenomenological thought, Smith, Flowers, and Larkin explain "…they have all tended to share a particular interest in thinking about what the experience of being human is *like*, in all of its

various aspects, but especially in terms of the things which matter to us, and which constitute our lived world." (2009, p. 11). While different writers have taken varied approaches, phenomenology is primarily concerned with understanding how individual people experience the world and its events in different ways (Creswell, 2007). Phenomenology holds that since every person experiences the world differently, there is no set "reality" that every person observes and participates in from their different vantage points, but rather we all inhabit our own highly subjective reality; IPA as a research methodology attempts to elucidate participants' reality, with a focus on how the topic at hand is explained by or makes sense in their reality (Larkin, Watts, & Clifton, 2006). In this way, we are all in an odd kind of cyclical relationship with our own reality; we are active participants in it, and our reality cannot be fully understood without an understanding of who we are, while at the same time our reality has a profound impact on us and we cannot be understood without the context provided by our reality (Larkin & Thompson, 2012). While the data derived from the examination of a single participant's reality may, at first glance, offer little generalizable data, the examination of many such particular cases can paint us a valuable picture of the universal aspects of the phenomenon in question (Smith, 2004). For this reason, phenomenology holds an important place in psychological research and can make unique contributions to psychological theory, professional practice, and general understanding (Smith & Osborn, 2008).

3.2.2. Hermeneutics. Originally a method for interpreting biblical texts, Hermeneutics has evolved into a "theory of interpretation" used to establish an author's intended message from a text (Smith, Flowers, & Larkin, 2009, p. 21). Phenomenology tells us that people are constantly making sense of their world around them; hermeneutics lays the guidelines for interpreting the meaning-making of others from what they tell us. I say guidelines here because this process is not prescriptive, but instead general enough to be serviceable across a variety of data sets. An example is the hermeneutic circle, a philosophy that holds that to "understand any given part, you look to the whole; to understand the whole, you look to the parts" (Smith, Flowers, & Larkin, 2009, p. 28). In a psychological study like this one, this involves, among other things, examining each participant's interview transcript individually, but also in the context of the data recovered from the other participants interviewed. On a smaller scale, this means examining each participant in the context of that participants' entire set of data; on a larger scale, it also means examining the data from this one study in the context of the existing empirical literature

(Larkin & Thompson, 2012).

Another hermeneutic contribution to IPA is the concept of "bracketing", or identifying one's assumptions and biases on a topic prior to and while studying it in an attempt to keep them from affecting the course or tone of the research project (Creswell, 2007; Smith, Flowers, & Larkin, 2009; Smith & Osborn, 2008). To this end, I've detailed my personal engagement with this study and its themes and made a summary available in this document in order to both assure the reader of my conscious effort to maintain an awareness of my own potential bias while making analyses, but to also let said reader judge for themselves where I may have been less successful in this endeavour.

Hermeneutics inform the way phenomenological researchers approach the rich participant data they collect (Creswell, 2007). Along with phenomenology and idiography, it provides a strong philosophical basis for IPA as a research methodology (Smith, 2011; Smith, Flowers, & Larkin, 2009).

3.2.3. Idiography. Idiography is the study of the particular, as opposed to focusing on phenomena at the group or population level (Larkin & Thompson, 2012). IPA can be said to take an idiographic approach in its focus on people as individual cases rather than clusters of measurable traits (Smith, Flowers, & Larkin, 2009). There are two ways in which IPA can be said to take an idiographic stance. First, each participant's data is analyzed individually and thoroughly prior to being compared to that of other participants in cross-case analysis (Larkin & Thompson, 2012). Second, IPA seeks to explore phenomena by examining how they can be understood differently by individuals who have experienced them (Smith, 2004, 2011; Smith, Flowers, & Larkin, 2009). It is IPA's idiographic guidelines that encourage the researcher to go beyond statistical rates and symptom clusters to examine what phenomena look like to the individuals experiencing them in their everyday lives (Smith, 2011).

3.2.4. Criticism of IPA. While IPA can offer an innovative method for exploring the lived experiences of participants (Smith, 2004, 2011; Smith, Flowers, & Larkin, 2009), there are some criticisms that must be addressed (Giorgi, 2011; Pringle et al., 2011).

In his critique of the method, Giorgi (2011) posits that IPA's lack of rigid, prescriptive structure makes studies using this methodology difficult to replicate. While Pringle et al. also observe this lack of structure, they suggest that it allows for greater researcher freedom in approaching their research question (2011). Furthermore, the authors propose it is up to the

researcher to describe their process in detail in order for the reader to judge the suitability of the methods used. In order to address Giorgi's (2011) concern, I will carefully describe my analysis procedures through journaling and a detailed account in my methods section.

Giorgi (2011) and Pringle et al. (2011) also raise the point that since the researcher is the lens through which participants are viewed, the results of IPA studies are very subjective. However, Smith, Flowers, & Larkin propose that IPA does not try to arrive at a single, objective truth but rather attempts to portray an account of participants' experiences (2009). While a participant's account will be inherently subjective (Pringle et al., 2011), I will attempt to limit some degree of subjectivity on my part through the use of member checks and peer review (see Establishing the Quality of Research) which will enlist the help of my participants as well as my peers to oversee and critique my research process (Creswell, 2003; Merriam, 2002; Smith & Osborn, 2008).

3.2.5. IPA and the current study. IPA is an appropriate research method for this project for a number of reasons. The limited amount of research I was able to find when conducting my literature review speaks to the shortage of contemporary qualitative research focusing on male survivors, which is vital for helping practitioners make fewer assumptions and understand the daily struggles of clients who disclose a history of CSA (Jacob & Veach, 2005; Kia-Keating, Sorsoli, & Grossman, 2010). Further complicating matters is that while there seems to be some overarching similarities (Gill & Tutty, 1999; Kia-Keating, Sorsoli, & Grossman, 2010), male survivors of CSA can experience a wide range of outcomes (Dhaliwal et al., 1996; Romano & DeLuca, 2001), some of which, such as complete rejection of or compulsive fixation on sex (Lisak, 1994) seem completely contradictory. Given the unique interaction between a phenomenon and the individual who experiences it, it makes sense that the experiences of male survivors need to be examined case-by-case on an idiographic basis in order to provide context (Smith, 2011). However, the examination of an aggregate of cases can uncover trends, patterns, and themes that in turn provide valuable resources to practitioners, survivors, and their communities (Smith, 2004;2011; Smith & Osborn, 2008). IPA, with its idiographic focus on the experiences of individual participants and hermeneutic approach to analysis on the individual and group level (Smith, Flowers, & Larkin, 2009), seems to be the ideal tool for addressing both concerns.

3.3. Role of the Researcher

Smith, Flowers, & Larkin (2009) describe the qualities required of an IPA researcher as "... open-mindedness; flexibility; patience; empathy; and the willingness to enter into, and respond to, the participant's world." (p. 55). The researcher's first role is to engage with participants in a fashion that they feel comfortable sharing their stories in rich detail (Berg, 2009; Smith, Flowers, & Larkin, 2009; Smith & Osborn, 2008). It stands to reason that without comprehensive data, analysis may not be even possible, let alone fruitful. Once sufficient data has been collected, the researcher's role becomes to analyze this data in a search for themes specific to each participant's unique case, but also to extrapolate larger themes consistent throughout the sampled narratives (Smith, Flowers, & Larkin, 2009; Larkin, Watts, & Clifton, 2006; Smith & Osborn, 2008). While the researcher's focus may shift in part from participants to the data collected over the course of a study, it bears mentioning that ethical deportment concerning study participants should never be anything other than a priority (Berg, 2009; Creswell, 2007; Smith, Flowers, & Larkin, 2009).

3.4. Data Generation

3.4.1. Participants. As is common in IPA research, this study employed purposeful sampling through a referral process (Larkin & Thompson, 2012; Smith, Flowers, & Larkin, 2009; Smith & Osborn, 2008). Purposeful sampling is the selection of participants based on qualities they possess that can contribute to an understanding of the phenomenon under examination, and is often used in qualitative inquiry (Cresswell, 2007; Merriam, 2002). Past qualitative theses completed in the School and Counselling Psychology program have enlisted the cooperation of three to six participants (Thorpe, A., 2010; Wiebe, A. D., 2011), the same size recommended by Smith, Flowers, & Larkin for student projects using IPA methodology (2009). For this study, I was able to gather a sample size of five participants.

I was able to make contact with a male survivor in Kingston, Ontario who had participated in multiple support groups for male survivors of CSA in the past and maintained relationships with many of the men he met there. My contact was provided with copies of the invitation to participate (see Appendix A), which he has expressed a willingness to distribute to male survivors of CSA in his acquaintance. Individuals receiving the invitation to participate were invited to contact me through my University of Saskatchewan email address. Once email

contact had been established, we arranged a time to conduct a telephone screening interview in order to ensure that potential participants meet the screening criteria (see Appendix B). Participants who met the following criteria were invited to participate in the study:

- 1. Identify as male
- 2. Experienced sexual abuse prior to age 16
- 3. Not be in a current state of crisis
- 4. Have discussed their abuse with a mental health professional or support group
- 5. Be able to commit 1-2 hours of their time to participate in a single interview
- 6. Be willing to review their transcript by correspondence

Research suggests that male survivors who have built positive relationships with mental health professionals, other survivors, and/or supportive friends may be more comfortable discussing their abuse and its consequences (Kia-Keating, Sorsoli, & Grossman, 2010). For this reason, participation in counselling with a mental health professional or support group was a requirement for inclusion in this study. Participants who accepted the invitation to participate were scheduled for an interview. Consent forms were sent to participants days prior to the interview, and informed consent was discussed with each participant at the beginning of the interview before any questions were asked (see Appendix E).

It should be noted that even though I anticipated recruitment would take some time, it ended up being considerably more difficult than expected. It took almost a full year to find and interview five participants despite a concerted effort across two provinces. During recruitment, many potential participants decided at various stages in the process that participation was not in their best interest, as was their right. This only served to further impress upon me the difficulties male survivors may face disclosing their abuse. This also served as a reminder of the ethical importance of keeping participants' safety and rights as primary concerns throughout all stages of the research process.

3.4.2. Interviews. Smith, Flowers, and Larkin (2009) describe the qualitative research interview as "a conversation with a purpose", with the study's research question constituting the aforementioned purpose (p. 57). This study asked participants: how have you experienced the impact of childhood sexual abuse in your intimate relationships in adulthood?

As is most common in IPA studies, the interview process was semi-structured (Larkin & Thompson, 2012; Larkin, Watts, & Clifton, 2006; Smith, Flowers, & Larkin, 2009), also referred

to as semi-standardized (Berg, 2009; Merriam, 2002). Semi-structured interviews are composed of a list of questions developed by the researcher, along with probing questions meant to steer the interview towards the research question and elicit further information if participants are not naturally loquacious (Berg, 2009; Smith, Flowers, & Larkin, 2009; Smith & Osborn, 2008). The researcher's list of questions and prompts is referred to as an interview schedule (see Appendix C; Berg, 2009; Merriam, 2002), and should refrain from leading participants or making assumptions about their experiences (Smith, Flowers, & Larkin, 2009; Smith & Osborn, 2008). The researcher may omit questions, ask questions out of order, and elect to use a number of prompts depending on the participants' responses (Berg, 2009; Larkin & Thompson, 2012; Larkin, Watts, & Clifton, 2006; Smith, Flowers, & Larkin, 2009).

Interviews took place either in a location of the participant's choosing, or over a Skype call while using the University of Saskatchewan's secure internet connection. Once I transcribed the interviews, I emailed each participant a password-protected transcript of their interview as well as a transcript release form (see Appendix D) that gave me permission to use their transcript for this study. Participants also had the opportunity at this time to confirm the accuracy of their transcript or to make changes so that the transcript could most accurately reflect their experience and intended meaning (Grundy, Pollon, & McGinn, 2003). While one participant requested a change of pseudonym, no significant transcript alterations were requested.

3.4.3. Data generation. The IPA methodology does not have a set method for conducting data analysis (Larkin & Thompson, 2012; Smith, 2004; Smith & Osborn, 2008). However, Smith, Flowers, & Larkin's (2009) book detailing the IPA methodology does offer four steps that may be used to approach and interpret research data. The first step is to carefully read and reread interview transcripts in order to foster a deeper understanding of the content; the researcher may take notes but should not be searching for themes or trying to summarize participants' accounts at this stage. The authors note that this may be a good time for the researcher to meditate on any feelings invoked by the transcripts and to review their journaling from the interview process in order to help with bracketing, or the setting aside of the researcher's personal feelings and expectations in order to approach the data with as few preconceptions as possible. As the researcher reads and re-reads study data and builds on their understanding of the material, their notes will become deeper and more descriptive; this is an indication that it is time for step two. In the second step, the author begins to categorize their notes into three groups:

descriptive (concerning the content and subjects discussed by the participant), linguistic (concerning the language used by the participant), and conceptual (concerning the higher-order concepts and personal experience of the participant) in order to engage with the data on a deeper level. After steps one and two, the data available to the researcher should have grown from the original transcripts to include a substantial amount of researcher notes. At this point, it is time for step three, in which the researcher attempts to organize their notes and transcript data for each participant into emergent themes which describe that participant's experience. In step four, the researcher attempts to understand how these themes come together to provide a deeper understanding of each participant's experience. Once I completed all four steps with one participant's transcript I moved on to the next, eventually compiling a list of themes that were applicable to some or all participants similar to Thorpe's (2011) IPA master's thesis.

3.5. Establishing Quality of Research

There is no universally accepted standard by which the quality of data uncovered by qualitative studies can be measured; qualitative research methods are diverse and unique, and all have different ways of safeguarding the integrity of their data (Creswell, 2007; Creswell & Miller, 2000; Merriam, 2002). Merriam (2002) suggests the main concerns facing the quality of a given research project are internal validity, reliability, external validity, and ethics. I will do my best to address each of these concerns in this study.

3.5.1. Internal validity. Internal validity is generally conceived as how accurate the author's deductions or measurements are to reality (Creswell, 2003; Merriam, 2002). However, this is a dubious prospect in qualitative research, where "reality" is subjectively constructed by those experiencing it (Cresswell, 2007). This being the case, internal validity in qualitative research has more to do with whether the researcher is accurately relating the experience of their participant(s) to the reader (Berg, 2009; Merriam, 2002). Internal validity will be protected in this study via member checks and peer review. Member checks are a process where the researcher shares their transcripts with their participants, and ask their participants whether their experience is being told faithfully (Creswell, 2003; Creswell & Miller, 2000; Merriam, 2002). Peer review involves asking for the advice, feedback, and expertise of colleagues at all stages of the research process in order to ensure that the study is best able to meet its goals (Creswell, 2003; Creswell & Miller, 2000; Merriam, 2002). Given that this study is being undertaken in

partial requirement for a masters degree, peer review was a necessary part of the process in my communication with my thesis supervisor, as well as my thesis committee.

3.5.2. Reliability. In more positivist research, reliability is referred to as the extent to which a study can be replicated (Creswell, 2003). Given the complex interaction between a researcher and participant in a semi-structured interview, this can be a dubious prospect in a qualitative research project such as this one (Creswell & Miller, 2000; Merriam, 2002). IPA in particular is known to be a difficult research method to replicate, given the lack of prescriptive steps and the unique interaction between researcher and both participants and the phenomenon in question (Giorgi, 2011). This being the case, reliability is generally viewed in qualitative research as "whether the results are consistent with the data collected" (Merriam, 2002, p. 27). Member checks and peer review, as discussed in the previous section, will also insure that the conclusions drawn in this study are supported by participant data (Creswell, 2003; Creswell & Miller, 2000; Merriam, 2002). Furthermore, this study will endeavour to provide enough of participants' experience delivered in their own words to allow the reader to determine for themselves whether the conclusions drawn are supported by the data.

3.5.3. External validity. External validity is often also called generalizability, and can be described as to what extent a study's findings can be said to describe conditions in the world at large (Creswell, 2003; Merriam, 2002). Given that qualitative research samples are generally small and purposefully selected, it is difficult to look at the external validity of qualitative research in the same terms as the external validity of more positivist quantitative research (Cresswell, 2003, 2007; Creswell & Miller, 2000; Merriam, 2002). Instead, external validity should be looked at in the same fashion as law or medicine cases, in which the reader (and not the researcher) is responsible to identifying useful tools within the text and applying them to their current situation (Merriam, 2002; Smith, Flowers, & Larkin, 2009). Given that the reader will only have the research text to help them determine how much of the study can be applied to their current situation, it becomes the responsibility of the researcher to provide data in the form of thick and rich descriptions to facilitate understanding, provide context, and promote clarity (Creswell, 2003; Creswell & Miller, 2000). In keeping with this responsibility, every effort was taken to provide rich, descriptive summaries and interpretations of the data I collected from participants. Furthermore, significant portions of participants' responses are included in this document, giving the reader even more data upon which to draw their own conclusions.

3.6. Ethical Considerations

The ethical treatment of participants is vital at every part of the research process (Berg, 2009; Cresswell, 2003, 2007), especially in a qualitative study that delves deep into the personal lives of participants (Haverkamp, 2005). This study was undertaken only after being granted approval by the Behavioural Research Ethics Board at the University of Saskatchewan, and as such adhered to the Canadian Institute of Health Research et al.'s Tri-Council Research Policy Statement on Ethical Conduct for Research involving Humans (2009). In keeping with this code, the following ethical considerations were made:

3.6.1. Informed consent. Participants were provided with a consent form (see Appendix E) prior to the interview. The consent form informed them of the risks of participating in the study and the methods used to protect their confidentiality. This form was also read out loud by the researcher to participants immediately prior to the interview to insure participants were aware of their rights and what they could expect from me.

3.6.2. Confidentiality. In order to protect their confidentiality, participants are referred to by pseudonyms, and all identifying features have been altered throughout the length of the study. Individuals referred to by participants during interviews were also given pseudonyms. Correspondence with participants took place exclusively over email using my University of Saskatchewan email address.

3.6.3. Care for participants. Participants were screened prior to acceptance into the study in order to ensure that they had previously discussed their abuse with a mental health professional and/or support group prior to meeting with me. This was to ensure that participants had spoken on the topic of their abuse previously and had some idea of the emotional toll they may experience in doing so once more (Kia-Keating, Sorsoli, & Grossman, 2010), in case they felt that the details specific to their abuse were relevant to their relationship experiences in adulthood and chose to share them. Participants were provided with contact information for mental health services they could choose to access if they feel that participation had a negative impact on their mental health.

3.6.4. Researcher self-care. I completed two years of graduate-level counselling classes, and completed an 8-month practicum at a counselling centre. In addition to this professional experience, I have personally undergone counselling at two different points in my life. These experiences left me very attentive of my own mental health and well-being. I journalled

throughout the course of this project in order to keep an awareness of my personal well-being, ensuring that I was in the best possible state to work ethically and effectively with participants.

It would be dishonest to pretend that this project did not take an emotional toll on me in a number of ways, some of them completely unanticipated. I found transcribing the completed interviews to be an extremely demanding task in particular. Transcription was complicated by the fact that my recordings from the skype interviews were of particularly low audio quality, especially at points where participants' voices were in a lower register or shaky with emotion. This necessitated repeated listening to clips in which participants related the most difficult aspects of their experience. I did not ask participants to relate details from their abuse, however many did so out of a desire to ensure that I understood their experience as well as I could. Listening and re-listening to participants relive these experiences for the benefit of this study was an experience I can only really describe as haunting. Furthermore, discussing my research with friends, family members, and acquaintances led to many unexpected conversations that turned into disclosures of childhood sexual abuse, often to both of our surprise. I did not expect anyone in my acquaintance network to have experienced CSA, despite the prevalence statistics discussed in Chapter 2, and these experiences quickly made this study feel more personal. Based on my experiences, I recommend that researchers working with survivors of CSA consider keeping careful tabs on their mental well-being, and ensure that they have supports they can access at all stages of the research process.

3.7. Criteria for Excellent Qualitative Research

Reliability, validity, and ethical considerations are undoubtedly important considerations when developing or reviewing qualitative research (Creswell, 2003; Merriam, 2002); however these criteria are rooted in quantitative inquiry and offer few means of comparing qualitative studies on the basis of research quality (Tracy, 2010). While varied approaches to qualitative inquiry exist, each with their own focus and ethos, Tracy (2010) suggests that there are universal criteria that may be used to judge qualitative studies based on their goals and methods. While some of these criteria have already been addressed in sections 3.5 and 3.6, there are more considerations to be taken into account when attempting to ascertain the quality of the current study. These considerations will be explored in more detail here.

3.7.1. Worthy topic. Tracy (2010) asserts that the topic of a good qualitative study will be relevant, timely, significant, and interesting. While these values appear to be largely

subjective, I believe they can all be used to describe the current study. As previously stated, research (especially qualitative research) examining the experiences of male survivors of CSA is scarce and largely out of date (Diamanduros, Cosentino, Tysinger, & Tysinger, 2012; Kia-Keating, Sorsoli, & Grossman, 2010). This is somewhat surprising, given that the last few years have seen the Vatican, Hollywood, and the world of elite athletics all grapple with very public disclosures of CSA. I believe that this combination of media attention and research scarcity cements the current study as relevant, timely, significant, and, indeed, interesting in the current socio-political climate.

3.7.2. Sincerity. Tracy (2010) posits that sincere research "... is marked by honesty and transparency about the researcher's biases, goals, and foibles as well as about how these played a role in the methods, joys, and mistakes of the research." (p. 841). This being an academic thesis undertaken as a requirement for a masters degree, there is more documentation of the research process than one would expect in a study described in an academic journal (Smith, Flowers, & Larkin, 2009). Furthermore, Interpretative Phenomenological Analysis strongly encourages researchers to include rich and detailed accounts of their experience for the benefit of the reader, given that the researcher is a primary instrument through which data is obtained and analyzed (Larkin, Watts, & Clifton, 2006; Smith & Osborn, 2008). Between the careful documentation of research methods used and researcher experience, I believe that the current study can be deemed sincere by Tracy's (2010) standards.

3.7.3. Resonance. Tracy (2010) describes resonance as "research's ability to meaningfully reverberate and affect an audience" (p. 844). Generally speaking, research should serve to inform the reader, however effective qualitative inquiry can promote empathy, insight into, and identification with the lived experiences of others (Smith, Flowers, & Larkin, 2009; Tracy, 2010). While I cannot speak for any audience at present, I can certainly say that the current study had a profound effect on me; not because of any considerations on my part but instead due to participants' willingness to describe their experiences with an honesty that is as heartfelt as it is brutal. Their accounts of betrayal, pain, and, ultimately, healing will stay with me long after I have completed my degree. Given these participants' extraordinary courage and the comments I have received from mentors supervising this project, I have every faith that readers will find the material presented in this document to linger long after its final page is turned.

3.7.4. Significant contribution. Tracy (2010) contends that research that can be said to present a "significant contribution" is research which deepens our understanding of the matter under consideration. Given the aforementioned dearth of research examining the experiences of male survivors of CSA, it is not difficult to argue that this study does just that. Furthermore, this study consulted participants as experts with an exclusive and inalienable take on what male survivors of CSA may experience in their intimate relationships. Research on disclosure among male survivors of CSA suggests that survivors are extremely selective and hesitant when it comes to disclosing details of their experience (O'Leary & Barber, 2008). While research in this area is lacking, the current study brought forward a unique and knowledgeable group of individuals to share their experiences, experiences that otherwise would have been inaccessible and which undoubtedly constitute a significant contribution to the available literature on this topic.

4. Results

The goal of this research was to explore what male survivors of childhood sexual abuse may experience while forming and maintaining intimate relationships in adulthood. The main research question that guided this study was: how do male survivors of childhood sexual abuse experience intimate relationships in adulthood? The data from each of the five interviews were examined for themes, which were then clustered and analyzed in keeping with IPA (Pietkiewicz & Smith, 2012). These themes are presented in a case-within-theme format and will be supported using the participants' own words (Smith, Flowers, & Larkin, 2009), though edited for the sake of coherency and anonymity. Double quotation marks ("") indicate direct data from the interview transcripts, while single quotation marks (") indicate dialogue within a transcript excerpt. Transcript excerpts are marked with ellipses (...) where there was text not immediately relevant to the matter at hand. I have only altered details if they provided information that could have been used to identify the participant(s). Words that were repeated or used as filler (eg. uh, yeah, you know) are also omitted. Additional information intended to provide context or explanation will be marked in brackets (American Psychological Association, 2010).

The following sections will introduce the participants, then guide the reader through an examination of the themes I found after analyzing the interview transcripts.

4.1 Contextualizing the Data

While the proceeding sections will examine participants' experiences as they relate to a theme, this section will focus on the participants themselves. In order to contextualize the details analyzed in themes, this section will allow the reader to form an impression of each participant and their unique circumstances. This is also in keeping with IPA's idiographic focus on individuals, and their unique experiences with regards to the phenomenon in question (Larkin, Watts, & Clifton, 2006). Each subsection includes brief demographic information, excerpts in the participants' own words, and a narrative overview of what was discussed during each interview.

4.1.1. Karl. I interviewed Karl in his office, located in a larger city in Ontario. Karl is in his late 40's, runs a not-for-profit agency, and works with male survivors. Karl has publicly spoken of his abuse, and there is a good chance that he had more opportunities than the other participants to articulate his experience.

Karl grew up in a small town in Ontario. His father left when he was "quite young," and his mother remarried numerous times. Karl disclosed that he was sexually abused by one of his step-fathers from the age of 9 until "about 12." While Karl did not mention what ended the abuse, he said that his mother does not accept that the abuse occurred: "My mother didn't believe me, still doesn't believe me, or doesn't want to believe me. It was her husband, and she has her own history to deal with in her life."

In his teens, Karl was resistant to the idea of dating and was uncertain of his sexuality: So while my brothers and friends were having their first girlfriend or boyfriend, there was just no way... Being a gay man, it impacted on how I looked at wanting to have an intimate relationship, so I pretty well put around me that there was no way that would happen. There were no girlfriends or boyfriends, or any of that in high school or even college. It was just too much.

Karl explained how he started to make sense of his identity in his 20's:

And whenever [an intimate relationship] would start, in the beginning, it was with women and for lots of reasons it just wasn't right. It was compounded by my abuse and my own stuff dealing with: is [my attraction to men] due to the abuse, is it due to my sexuality, and... how do I figure that out? And when I did come out and decide that this was who I was and how I wanted to live my life, the idea of having an intimate relationship with a man was scary as hell... because it was a man who did this to me. At that point I thought ok, do what everybody else does, go for some counselling and see if that will help deal with the idea of getting into a relationship.

Karl travelled into the city to see a counsellor. His session was not therapeutic:

His first question when I came out about my sexuality [and] the issue of wanting to have relationships... was 'well, being gay, are you sure you didn't ask for it? Are you sure it wasn't part of that?' and for a moment I kind of was very quiet, looked at him, and then I asked him could he repeat it because I thought there was no way he would say that. And he said it again, and then I called him anything you could think of and told him what I thought of him and I left and drank the whole train trip back. It was at that part I'd pretty much decided that for me to deal with this issue, I had to do it by myself. There was no way I was going to go into another relationship with a counsellor.

After Karl's experience with the counsellor, he refused to seek healing through a mental health professional. He had identified that he was experiencing challenges in forming relationships, and he committed himself to facing those challenges:

I was dealing with it without professional counselling; because of my experience, I would not even attempt that again. So I did it through reading and through talking. I created one hell of a library on the issue.

Karl found support in other individuals with experience in abuse:

I had a couple of really close women that I could talk to that were also survivors and knew all of that stuff. They were my sounding board and really helped me look at the big picture; look at what I wanted and what I actually had the right to have. It helped me deal with some of those things. And then I met someone.

The "someone" Karl refers to is his current partner, whom he met when he was in his mid twenties. Prior to this, Karl had experienced one long-term relationship in which he had been somewhat open about his history of abuse, and a series of short-term relationships in which he had not disclosed his past. Still, the work he had done and the support he received helped him pursue a more meaningful connection. This did not mean it was not scary:

It was very quick that we realized that this was going to be more than [a one-night stand], which scared the living shit out of me because I thought, 'I have to be one hundred percent honest with him.' Which meant telling him everything, and I had not told anyone everything, I had not been that open about my abuse... for me it was like, 'ok, how to tell him everything and not scare him? And, scare the crap out of him or actually scare myself?' So I didn't do a lot at the beginning.

However, a flashback to his abuse led to a discussion about his history with his new partner while they were visiting friends:

It was him putting his arm around me that just flooded everything back, and when it did that it scared me to the point where I almost thought, 'Ok, I'm not going to have this intimate relationship;' I almost resigned myself that I'd be a lonely man the rest of my life.

Karl fought the urge to sever ties with his partner, and bravely disclosed his abuse in full: "So I did tell him everything, I just wrote him a letter and it was thirty-some pages long." Karl's

partner responded supportively, and they started working towards healing the effects of the abuse together:

[We] decided that we would work on it, and it was really the first time, at twenty-six years old, that the idea of having an intimate relationship with another person was real, and that relationship didn't mean hurt, didn't mean all that stuff. It was a weird feeling. Karl quickly learned that honesty and openness did not stop at disclosing the abuse he had endured as a child:

So we were able to build on that relationship, which meant I had to be really honest with myself and be able to tell him what I needed from a relationship and how it would be. Those were things I'd never thought of because no one had ever asked me what I liked, what I didn't like, any of that stuff. I really didn't think I had a right to ask either, based on my history.

Karl explained that the chronic abuse he had lived through had left him with the belief that his needs were not worth voicing. Being honest with his partner meant re-evaluating the importance of his needs, which helped him identify and work on his chronic feelings of low self-worth. However, being honest with himself and his partner meant being vulnerable too, something that Karl found terrifying:

That was scary, and it certainly put a lot of stress on the relationship, but I started being able to do that and ask those questions. I know a number of times I did everything I could to destroy [the relationship] when it got too difficult, but luckily enough he did not walk away and still is [my partner], twenty some years later.

Throughout our interview, Karl credited the success of his relationship at least in part to his partner's patience with him and willingness to help him heal. It was clear that, at least in Karl's experience, healing wounds left by childhood sexual abuse was a demanding task for the survivor's partner as well as the survivor:

It meant work for both of us. It wasn't just me; it was the two of us that had to be willing to work on it because it impacted every aspect of his life too... I always tried to look at that in the relationship, to say 'It's not just you. Yes, you may be the person who was abused, you have that, but it's impacting his life as much as it's impacting yours.'

Karl and his partner continued, and continue still, to work towards healing. While Karl's life has improved immeasurably, he believes that healing will be something he and his partner

will be working towards for the foreseeable future: "we just kept working at it and still do, to this day. I think I will always have to work at these issues."

4.1.2. Jack. Jack was a younger man in his mid to late 20's, and he worked in a helping profession. Jack and I's interview took place in Jack's office in a larger town in Saskatchewan.

Jack did not volunteer his exact age when he was abused or any details about the perpetrator, though he said: "I've never disclosed how it happened and stuff because... I don't know why but that part seems more difficult to discuss." Jack did disclose that he feels now he may have been particularly vulnerable to adult predators when he was a child: "When I was a little kid I was super smart, smart and kind of withdrawn. Probably like a target for a predator." Jack also disclosed that his abuse took place at school. He described how he began to experience mounting levels of anxiety in the classroom, and how he dealt with the pressure without disclosing to anyone:

When it was happening I had this thing called trichotillomania... I'd pull my hair out and stuff and for some reason it didn't raise any red flags amongst the teachers and shit at my school. I started coping with that through drugs and alcohol because that was just the way it is. I actually remember that feeling of being activated all the time, because the shit that happened to me happened to me at school; I remember being like 'fuck, when's this gonna happen?'

Jack described how his relationship with drugs developed, and how a rift between him and his peers grew as well:

I sold drugs in high school, definitely tried to be a tough kid. I was really withdrawn from people. I didn't want people to know I was high because everyone would gossip about that and kinda keep me out. So I was withdrawn in that way, but I think I was also withdrawn just because I felt really intimidated by other people, because all these kids are all so smart and I'm fucking stupid... which is something I taught myself, I don't think I always felt that way.

While he'd previously been proud of his academic skill, Jack felt that in order to appear more masculine he needed to show less intelligence: "You know, men aren't smart, right? I remember specifically trying to act stupid, and eventually I think it just kinda... I got into that pattern and it just stuck." Jack explained how that pattern continued:

When I was sixteen, I got this job doing highway construction. I remember driving with these truck drivers and you know, I was sixteen years old and I was like 'Well, fuck, that's what I want to do! These guys swear, they smoke, they drink, and you know they work hard. This is what I want to do; that's really manly,' I thought. At that point I became pretty convinced I hated school, there was no fucking point, and I was like 'why would I finish high school? That's stupid. I'm just gonna drive truck for my entire life.' So that's what I did. Towards the end of high school I really didn't care. The only way I could really do homework was when I bought black market Ritalin, and I'd do that a lot and then school would be fun. I ended up dropping out of school, I only had two or three credits left but I got kicked out of one school for selling drugs, and then I tried to go to another school for a while but I just... I was so high on drugs I felt really out of place at school. I was cement finishing for a while, which was another one of those really masculine, really rough jobs. We'd wake up early and work, and smoke cigarettes the entire time. It was really rough, everybody swearing and spitting and stuff like that, then we'd go home and drink these forty ounce bottles of cheap beer. Eventually I had to... go with truck driving, and there was this course that they used to teach at [my local college] on how to drive trucks and you needed your high school for it, so I went back and I finished it then.

Jack got his high school diploma, completed the college program, and started working as a truck driver. "I really enjoyed it for a few years, but then I didn't. I hated the people I was around." While he'd enjoyed the idea of driving truck when he worked in highway construction, driving truck across Canada was different: "I liked fucking sitting there talking to people instead of sitting there driving; I found it really lonely." It was while he was driving truck that Jack had a profound realization. Like Karl, Jack was not always aware that he had survived childhood sexual abuse:

At the time I didn't remember being sexually abused. I don't know if it was in the back of my head or not, but it was really weird because one day I was driving back from Winnipeg, and I was ten minutes on the Regina side of Brandon, Manitoba, and it was between Christmas and New Years in December. I don't know if it was something I heard on the radio or I was just kinda looking out at the prairies, all white and flat, and just all of a sudden I was like 'Holy fuck, I got sexually abused when I was a kid!' I had

to pull over... I cried for a bit, and it was really weird because I think before that I didn't believe in repressed memories. But then I was like 'Wow, there's something to this.' I remembered that and never spoke about it again, but it was around that time I got all my tattoos... I wonder what the fuck triggered me, like what triggered that... It was weird, I remember just looking out at the prairies, looking at the scenery and... I remember the radio, so maybe it had something to do with that. I don't remember what was on, but I just remember listening to it. It all just came back, BAM, at once. At that time I quit using, like, everything. That night I was like 'Fuck it, I'm not gonna do drugs anymore.' That lasted for a while, like maybe eight or nine months, but it wasn't the good kind of sober. It was like what they call dry drunk. I was really irritable and pissed off, and so I started using again at some point.

Shortly after he reconnected with his memories of the abuse, Jack had decided to go back to university and was accepted into a health-related program. He was conscious that he was dealing with issues that he, as a health care worker, would likely advise a client to seek counselling for. Initially he sought addiction counselling, but found that it was difficult to fully explore his experiences with addiction without also exploring his experience with abuse:

Well first thing that helped me was going to addiction counselling, because my addiction counsellor... I think she was kind of inexperienced and she ended up pushing me. She was like, 'Jake, tell me what happened,' and I couldn't fucking do anything but cry and move for like half an hour. The next time I saw her she was like, 'Hey, why don't you take this?' She gave me a pamphlet to an information centre for survivors of sexual assault and abuse, and I ended up going that day. I sat outside [the office] feeling I was kinda underwater if that makes sense? You know, there's fucking people coming in and out and I was sitting there with my hood up trying not to let people see I was fucking distraught. I was like 'If I'm gonna become a [health care worker], at some point I'm probably going to have to tell somebody that they might want to do [counselling]. I can't justify trying to suggest that people do this if I can't do it myself.'

Jack explained that he gained tools in therapy that were useful for healing:

One thing that's been really helpful is CBT [Cognitive Behavioural Therapy]. That really helped me a lot, like being able to recognize these underlying feelings that are causing me to react certain ways. I used to get a lot of physiological feelings, and somatic

experiencing has helped me with that. And maybe it's related to CBT, but just understanding that this shit happened a long time ago and I'm, you know, a grown adult now; I don't have to dwell on that. Being able to laugh about it or laugh about shit like that helps, because it's like that saying: you can laugh about it or cry about it. Crying about it isn't much fun and I've done a lot of that, so it's way easier to be able to laugh about it.

Jack explained that these changes happened in the past two years or so, but they've made a big impact on his life. Like Karl, he believes he's on a journey without a defined end date, but he's already in a better place than he was previously.

4.1.3. Alex. Alex was in his 50's, and unemployed due to a leg injury. Our interview took place over Skype.

Similar to Jack, Alex did not volunteer many details concerning the abusive events in his childhood, only that the perpetrator was a member of his family. He also shared that his family were aware of the abuse, but did not like to discuss it: "They know it's in the family, where it came from in the family, but they'd rather not talk about it. Same old stigma; they'll hide it, don't want to hear it."

Alex reported that he did not remember the abuse for a large part of his adolescence, but still was conscious on some level of a deep personal injury:

I was surviving like this, on the drugs, the alcohol, and the work I put in. I'd work, work, work... my parents owned an appliance company plus they had a farm for a tax writeoff, so it was good cover to support my pain. Up at daylight and out in the summertime till the dark and then I'd party hard... just get 2,3 hour snooze and go at 'er again. I didn't know at the time of course, I was covering something... My twenties and thirties [are] a big blur to me. I got married when I was in my early twenties to my girlfriend that I met when I was fifteen years old, we had a child in [the mid eighties], we had another [three years later], and then we divorced in [the early 90's]. We separated, divorced [two years later]. It was just a rollercoaster. I didn't know why I was in so much pain, so I did a lot of covering. I found cocaine in 1989, was at that time for some reason, and wow did that ever cover my pain! It just blocked everything else. Still, [the pain] was there the next day, but then all of a sudden I had to pay for that white stuff, so I'd work, work, work.

It was a cycle that couldn't continue:

Then I had a breakdown, I went to alcoholics anonymous, went through the step group. Through the fourth step I met the Lord, in 1992. Jesus Christ was my saviour, and from there, wow, that was a different high and I took it to an extreme.

Alex explained what that extreme meant to him:

So then hurricane Andrew came, and I went down to the Bahamas to help out with the [relief effort]. I ended up staying there four years rebuilding, because of my trade in refrigeration, so I stayed and worked on homes and helped people with their buildings and whatever. Meanwhile I had a couple of kids too, so I was travelling back and forth, but I wasn't a father. Deep down I knew there was something not right and later in life I was, I knew... it still hurts today, this part...

Relating the experience of realizing his abuse was clearly painful for Alex. He did not share what the realization entailed, but he described how it influenced his next decisions:

When I knew... I was in a hotel room, my heart was pounding without coke and I thought I was gonna die on the bed and I prayed 'God, get me out of here' and I missed my children too. All of a sudden, within two weeks, I had my business sold, I had all my equipment sold, I was back in Canada. The only power that can do that is the Almighty, because I was supposed to be with my kids... even though I still feel somewhat with my kids, I'm not as there for my kids.

Alex described how he felt his abuse had an impact on his ability to feel comfortable with his kids: "I always want to stay away from children. I didn't trust myself so I stayed clear, even of my own children. I didn't do too many diaper changes or whatever." Alex was the first participant to mention how he felt his abuse may have affected his own children: "I have a pretty good relationship with my daughter today, but there was a lot that was stolen from her and my son. My son still suffers by it today... it hurts".

After returning to Canada from the Bahamas, Alex visited a psychiatrist and was diagnosed with Bipolar Disorder. Alex disclosed that he did not tell the psychiatrist about his history of abuse, and that he felt the psychiatrist may have had misdiagnosed Post Traumatic Stress Disorder. The psychiatrist referred Alex to a psychotherapist who eventually "brought it outta [him] about the abuse." Alex told me that he has continued working with the psychiatrist and psychotherapist off and on over the years, but did not disclose whether there was any alteration to his diagnosis.

A few years after returning to Canada, Alex remarried. The marriage didn't last very long:

My second wife that I married in 2001, in 2003 we divorced. She said 'well, you never touch me or hug me or whatever,'... she found somebody that would. So that really hit me big time. So I'm trying to learn what women want, it's just like that Mel Gibson show... because they're different from guys, I guess. Different from what I know, anyway.

What Alex took from his second wife's departure was that most women would likely require more emotional intimacy than he was used to:

It really had been just a jump in bed, you know, have sex, roll over, fall asleep, maybe get up and have a cigarette after, you know, that was... that's not what women... they like more hugging or whatever before, kissing, all that. It wasn't what I knew.

Alex has worked on his issues with intimacy both with his therapist and his own personal research, and said that he has made progress. Since his second marriage Alex has met a new partner, with whom he now lives. Alex described his current relationship issues:

I'm trying to the best of my ability. She has a drug dependency, and I came from that but I'm clear of that dependency on drugs and alcohol for two, three years and change. I have a dependant on painkillers, but also I'm on painkillers myself. I'm very careful, like I moderate... you know what I mean? I'd rather have the pain than get back to the pain that was in the past... I try not to lie to her and I say 'Ok, I'm not going to enable you anymore,' because she'll take my pills and honestly I'm unable to man up, lying to her by enabling her because I don't want to see her upset. So I'm working through counselling on that; it's a goal... it seems like I lean towards what's unhealthy for me.

While Alex pointed out several instances where substance use had led to negative outcomes, he also had this to say about his drug use overall:

I'm really kind of grateful for [the] cocaine, crack that I've done, because I think it really helped me through the anger cycles. If I hadn't had that I believe I probably... I had the capacity to kill people. I think it tamed me, it used the anger, so much anger... like even with animals when I was younger. I was so very sad, I had this dog, it was a beautiful dog, and I didn't treat it well at all, and it's not the dog's fault, it was me. Since then I've

had dogs and I know better now, that they don't deserve... they don't know, they're just trying to survive in the world as the rest of us, created by the Lord.

Alex clearly still has obstacles in his life, but he had this to say about his current situation: I'm not perfect, I've done some pretty shitty things that I'm not proud of but I'm thankful that I can forgive myself today and come through that to what I want to be today, where before I couldn't. I didn't like the person I was, now I'm liking who I'm becoming.

4.1.4. Lawrence. Lawrence was in his 50's, married, and had two adult children. Our interview took place over Skype.

Lawrence started our interview by describing the circumstances of his abuse: "So I was probably 14, 15 when I was abused, and the abuse went on until I was 18. It was with a parish priest." Lawrence spoke more about the abuse that he survived than most of my participants:

This priest befriended our family and we would come for dinner, things like that, but there were incidents where he would phone at one o' clock in the morning and say he wanted bulletins folded the next morning but he couldn't pick me up because he had a meeting to go to and he'd use that for an excuse and come pick me up at one o clock in the morning. My mother would wake me up out of bed, you know. I knew what was going to happen but couldn't say anything to my parents because they had this big trust in him, too. So you lose that trust in your parents because you think your parents are there to give you guidance and protect you.

Lawrence stated that, unlike many men I interviewed, he never experienced a period of time where he wasn't aware that he'd been abused; when asked he said: "I think you always have an understanding of what happened." When asked if he'd ever disclosed what had happened to his family, Lawrence said:

No. Just the time I tried to tell [my brother]... At this point, they're not gonna help me in my healing, and if I tell them it would just be some gossip they can run with and say 'Oh, Lawrence told me this.' I don't feel they're there to give me support, and I don't think, even if they did give me support or some, I don't know, sympathy or whatever... I don't want their sympathy.

Lawrence recounted his brother's reaction when he disclosed what had happened:

I told him about it and his response blew me away to the point of anger. His response was 'You must have enjoyed it, you kept going back.' So I think that put the kibosh on me telling anybody who doesn't need to know.

That encounter occurred less than a year before our interview, after Lawrence had started speaking with a therapist to discuss the abuse in his past. Prior to seeking therapy, he'd only confided in his wife:

I've been married [over twenty] years, I briefly spoke to my wife about it maybe in our third or fourth year of marriage, and after that it was just pushed aside and never, ever spoke of it again until about a year ago... because you think you're dealing with it, you know? You think it's done, it's gone, just suck it up and get on with life, but you don't realize the impact it's had on you until your relationship starts to fall apart, your sex life falls apart... I didn't bring it up [again] because I figured I was dealing with it, but I was dealing with it in all the wrong ways, you know? I've only attended the counselling [for less than a year], and it's only through those sessions that I can look back and say 'Well, this is why I've done what I did.'

Lawrence explained why he made the decision to seek therapy:

I was still confused with sexuality and our sex [life] not being well in our relationship, and I was going through promiscuous sex with other men. Meeting in places in town, cruising places. My wife came across an email that I had hooked up with somebody... which was really good because the fear that I had when she found the email, it was like a ton of weight lifted off my shoulders. I wasn't living a secret anymore and it forced us to open up and talk about why I was doing things and so on. And that's when I contacted the [counselling agency]. It's only since that process that we really started to open up and talk. She did say to me 'If you're gay, I'll understand it, go on and live your life, but I need somebody who's gonna treat me as a woman,' and I understand her point of view on it. We've actually been much closer since that, our sex life has been much better, and we've been more intimate.

Lawrence explained how he feels the abuse he endured left him feeling conflicted about his sexuality:

I think one of the biggest issues I have is trying to determine my sexuality over the years. You know, if I was gay, straight, bi, whatever it was, because you never... as a victim,

you never get to experience sex as it should be, being a male and a male or a male and a female, if it's abusive sex. I think being a male and having another male force himself upon you, it does a lot to your mind, you know? Did I welcome this? Then there's parts of the sexual act that maybe you've enjoyed and you figure 'Well now, that wasn't right, I shouldn't have enjoyed that.'

Lawrence wasn't entirely sure what he'd experienced, and since the abuse occurred at such a young age, he didn't have any healthy sexual experience to draw from. Lawrence recounted how he had been in an intimate relationship with a man in his early twenties, but didn't feel that it suited him:

I did live with another guy for, I don't know, six months to a year. I did think that I was gay but that didn't pan out, I wasn't interested in it, wasn't interested in the lifestyle. The sex was ok, but it was all I knew of sex at the time, right? The first female I had sex with I was twenty-four or twenty-five. I met my wife when I was twenty-five, we dated for a short time and got married. It does impact you... like I said, I've always had problems with my sexuality, wondering where I stood, and it's only now in my fifties that I'm finally seeing that no, I'm not gay, and I have better sex now with my wife because we're more intimate and I don't feel like I'm hiding something and I've talked to her about my feelings. My biggest regret is that it happened so late. I think sometimes 'Geez, if this happened when I was thirty, the years we could've had', you know? But then there wasn't much there for men then. There's hardly anything out there now. I've gone to get books and things like that but the books I'm finding, I think they were published in the mid-eighties, some of them early seventies.

Lawrence explained how his internal conflict with his sexuality wasn't based on a moral judgment of homosexuality:

In the past when I thought I was gay and I lived with this guy, and even seeing couples together, I'm not against gay people or anything like that, as long as people are happy in a relationship that's great. But I know I would see, say, two guys holding hands and walking down the street or being intimate with each other, that kind of thing, and I'd know by looking that's not for me, that's not what I want.

While childhood sexual abuse has clearly had a profound impact on Lawrence's life, it has also had an effect on his partner and children:

So being a father myself, I would question anything that I felt wasn't right. If my kids were doing a sleepover, which I didn't let them do a whole lot, I wanted to know where they were sleeping, what room they were sleeping in, and where everyone else was there, because of incidents [I experienced]. We [Lawrence and the priest] went on a camping trip and there was another couple and their children. So there were six of us in this cottage that was an open concept type with a kitchen, eating area, double bed in the corner, and then a set of bunk beds. The wife, because they were short a bed, ended up having to sleep with the priest, and he still fondled me throughout the night. As in, these people are in the room! So yeah, I'd question [my kids] when they came back. What did you do? Where did you go? With who? Just, you know, you'd be a detective and you went through it with a fine-tooth comb. Where did you sleep? How did you sleep? Lawrence explained that his kids now know about what happened to him:

That conversation happened back when my wife found out what I was doing on the side and at that point we were going to split. We told the kids that we were separating because I was cheating on her with other men and that we were going to sell everything off and go our separate ways. My wife was adamant at that time, she said 'You're gay!' and I told the kids, I said 'I don't think I'm gay, this is what happened, I was sexually abused, I just don't think that through life I've gotten to form an educated opinion on what I am.' And they were fine. They're both adults.

Lawrence described what life has been like since seeking therapy:

My motto was that nothing could be worse than what had already happened to me as a teenager, and one of my greatest saying is 'you don't know true happiness until you've been truly sad,' because you've got nothing to compare it to you know? I was quite happy in my married life, it was just the internal struggles that I was living through that were the killer. Right now I'm at a stage in my life where I can actually sit and enjoy the moment and do things. Some of the victims that I've talked to, find some of them... they want revenge and they're angry, but to me revenge and anger are not going to get me anywhere. It's my feelings I've got to deal with. I think if you keep that anger in, the perpetrator still has control over you.

4.1.5. Patrick. Patrick was in his late 40's, married, and had children. Our interview took place over Skype.

Similar to some previous participants, Patrick volunteered a description of the abuse he survived in childhood early in our interview:

This occurance, I can vaguely remember it but I know it happened. I was three years old and it was done by a male cousin of mine who I think would have been fourteen or fifteen at the time. He basically forced me to perform fellatio on him.

Similar to Lawrence's story, Patrick recounted how for a long time he didn't think the abusive act had influenced him until he experienced conflict in his relationships:

I guess from there it never really surfaced or affected me in any sort of everyday life sort of deal. I was told by my family that I'm a very controlling person and that sort of thing, so I ended up seeking out some counselling for I guess some of these issues. The counsellor asked, just out of the blue, if I was ever sexually abused and that just came up. In hindsight why didn't I sort of break it down? How he broke it down is that being [over]protective and sort of controlling are the leadings [signs] of [having been] abused. And it's basically... I'm sort of the parent that really keeps my kids in a shell. Very protective... subconsciously I'm always sort of looking out for this sort of thing. I think it's led to a lot of other controlling factors, in my relationships too, when I think about it, not only with just the kids. And a lot of past relationships where I think it might've... eventually caused a breakup or whatnot.

Over time, Patrick became conscious of patterns of behavior that he had not been entirely aware of, both with his children and with his partners:

Even in my first relationship, second, third, relationship, it was... I would say it was the stem of my breakups in those relationships... that was from the age of fifteen to [mid-twenties], but yeah that was the stem of it. It's because of how I was in that sense, but after having kids, the controlling part, it kinda shifted the focus from my partner to how I govern my kids.

Patrick disclosed that he had been abused to his own parents years later:

I told my parents about it and my siblings, and I'm open about it. Their reaction is... they'd never approach this guy or anything like that, but it's almost like they kind of just look at me, nod their head, as opposed to being, you know, proactive. At least for their kids, I would think one of my brothers would go knock on his door or something, I don't know, or my mom and dad would do something even. I don't get that satisfaction out of it so in a sense I haven't found that [closure].

He described how he felt his experience had an effect on his relationship with his parents: When you don't get a reaction from your parents like they have a protective nature... it's another slap in the face, it's like it all happened again. If there's no reaction, it's almost like they don't believe you. Or they very well could not know how to properly handle somebody telling them something like that, but when there's a neutral reaction, not negative or positive, it feels like you get abused all over again because, it's like ok, I'm telling you forty years later but just do something with it, you know? It's just me being a little kid again, expecting them to do something. I also think why weren't they protecting me? That's the first question. Why weren't they protecting me, and why aren't they accountable for what happened to me, you know? They're supposed to protect me from anything, right? Maybe that's why I'm the way I am with my kids?

Patrick told me that he identifies as heterosexual and that he had never experienced any doubts in this regard, saying: "If I was born to be gay, that certainly changed everything." He explained:

I think I'm certainly homophobic, to sort of an extreme extent. I don't gay bash or anything like that, I mean being in a shower at a change room would be uncomfortable for me. I'm more open to people that are gay, lesbian, that sort of thing. Some of them are the nicest people you'll ever meet. But yeah, situations like [change rooms]... I certainly shy away from and always have.

Patrick disclosed that while he enjoyed sex, he was more interested in the "conventional part of being intimate" rather than intimacy itself, acknowledging "it's kind of a bit of pressure on my wife."

Since speaking with a counsellor about the abuse he survived, Patrick took part in a men's group for survivors of childhood sexual abuse. He described that experience:

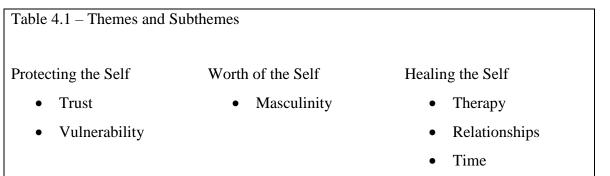
It was a huge weight off my shoulders just to know that there was a men's group out there, to be able to meet and talk and share your stories and sort of talk about it, get it off my chest. I think when I did that it wasn't my secret anymore, it was the perpetrator's secret. It was like his secret that I let out of the bag, looking at it that way rather than something I had to be quiet about, ashamed, embarrassed about. Now I find myself really

open. If somebody asked me or if I had an inkling something was going on with somebody else, I wouldn't think twice about talking about it. I think it's a sort of healing thing.

4.1.6. Summary. The purpose of this section was to acquaint the reader with the five participants interviewed for this study, to give the reader an impression of the interview content, and to provide context for the analyses to follow.

4.2 The Role of CSA in Male Survivors' Experiences of Intimate Relationships in Adulthood

My interviews with these five men left me with rich and varied accounts of navigating intimate relationships in adulthood while healing from childhood sexual abuse. While each participant's narrative was unique, some similarities became apparent upon analysis of the interview transcripts. I arranged the data from my analyses into three themes and six subthemes. Table 4.1 offers an organizational diagram of these themes and subthemes.



All of the men I spoke with reported they felt that trust was the largest stumbling block in their intimate relationships. Close analysis yielded a similar theme, vulnerability, which joined trust under the super-ordinate theme protecting the self. Some overlap exists, since the decision to show vulnerability generally requires some degree of trust between the individual showing vulnerability and the individual to whom it is being shown. Further complicating matters, many definitions for 'trust' include the term 'vulnerability' and vice-versa (Neinaber, Hofeditz, & Romeike, 2015). For the purpose of dividing Vulnerability from Trust as subthemes under Protection of Self, Vulnerability was be defined as "[susceptibility] to physical or emotional harm" (McKean, 2005) while Trust was defined as the expectation that an individual will act in accordance with a mutually understood social contract (Shannon & Kafer, 1984). In the

beginnings of my analysis I found a great many other themes; over time some were discarded while others were merged to form the super-ordinate theme worth of the self. Further examination of this super-ordinate theme yielded the sub-theme of masculinity. While I feel this organizational scheme offers the clearest lens through which to understand the experience of male survivors of CSA, it should be noted that, in keeping with the complex nature of human thought and behaviour, there are many connections between the various themes.

4.2.1. Theme One: Protecting the Self. This section will explore how participants experienced the universal imperative for self-protection, and the methods they used to deter what they saw as threats to their well-being. Each of the men I talked to had experienced undeniably traumatic abuse at a time in their lives when their worldviews had yet to be fully formed. As such, all of my participants expressed, in their own way, a need to protect themselves from experiencing such victimization again.

Karl isolated himself from everyone else around him in order to keep himself safe. He described how he perceived those trying to become close to him: "I was always afraid that by getting close, somebody would be looking for something and hurting [me]." Karl saw nearly everyone as a potential threat and expected injury from those who approached him, partly due to the real threat of homophobic violence. Karl described the lengths to which he was prepared to go to protect himself in his early adulthood:

I went to the other side of what masculinity is. I was gonna have no trouble dropping somebody and fighting, and that's what it was: no one will hurt me. I went way over, and even as a gay man, no one would say much to me because I'd show them I'm not that person.

It wasn't just physical hurt that Karl was protecting himself against; Karl makes it clear that we was also prepared to insulate himself from the potential negative emotions that could come with inflicting violence on another person. This suggests that keeping others at an emotional distance might have been useful to Karl in order to facilitate the physical defence of his person. Karl spoke about keeping others at an emotional distance as a means of protecting against emotional injury as well. He spent years teaching himself to trust others so that he could be a part of a healthy relationship:

Because to do that and to commit to the relationship, I had to let all the walls down. Those were the walls that kept me alive. So how do you let them down to allow intimacy,

in whatever way, to come in? Not just from my partner but his family, his friends, and my own? To be ok with that, to let the persona go, took a number of years. To let someone in and be able to speak the truth and have someone hear it and give you the love that should have been there all along but wasn't. No one protected [me], so it was like un-knowing that... at times [I felt] like going back and wanting to start over, because I didn't see anything wrong with being this cold, miserable teenager and young adult. That kept me alive, kept me here, and in my brain that's how [I imagined] I'm gonna live.

Karl felt from a young age that he was the only person interested in his safety and protection. Thus, it fell to him to protect himself at all times; if he didn't, who would? Keeping others at bay while simultaneously relying only on himself for comfort made it very difficult for Karl to forge meaningful relationships, especially intimate ones. This lonely life was difficult; Karl described his teenaged and young adult self as "cold" and "miserable." While Karl expressed that he still experiences some discomfort allowing himself to be vulnerable, he also described how letting his "walls" down has allowed him to connect with and find support in others.

Jack also protected himself through isolation, but did so in a less conscious and purposeful manner. Like Karl, Jack spoke about feeling an emotional distance between himself and others and experiencing a difficulty in letting his guard down. Jack started using drugs at a young age, and by high school he was selling them. Drugs performed two important functions for Jack; using drugs protected him from uncomfortable feelings at school, while selling drugs contributed to a "tough guy" persona he wore like armour. Jack continued to develop this persona while working physically demanding manual labour jobs. When talking about his time at university, Jack described some possible unintended consequences of this persona that he was not consciously aware of at the time:

At the time I was always on steroids, I was really muscular, I had tattoos, and I was always in a really pissy mood, so I probably projected a really hostile image. I remember thinking to myself, "fuck, why don't I have any university friends?" And then I'd go into class like this, eh?

Similar to Karl, Jack experienced feelings of loneliness that he now attributes to choices he made that kept others at a distance. Like Karl, Jack did not experience protection as a child; he expressed incredulity during our interview that the trichotillomania he experienced as a child, which he now understands as a reaction to abuse, went unnoticed by those around him. Jack also

expressed that he'd experienced very few people over the course of his life that he felt he could trust enough to fully confide in. Unfortunately, like Karl, behaviours that may have served to ward off potential threats likely also impeded the development of positive relationships.

Alex described a few different ways he protected himself from a variety of threats. He spoke about feeling uncomfortable and threatened around gay men, something commonly experienced by male CSA survivors (Public Health Agency of Canada, 2008). Alex described a situation in which he learned that a gay male acquaintance had romantic feelings for him, and how he had dealt with what he had perceived as a threatening situation:

Through church here, I had this guy that I knew he was gay, and I come to learn that he was in love with me. It kinda blew me away, so I cut it right off. I'm sure it hurt him big time, but I just didn't... I just [said] 'Hey buddy, stay away from me.'

Similar to events described by other participants, Alex felt threatened by an individual and proceeded to protect himself in a manner that likely lead to feelings of alienation for both parties. Like Jack, Alex described his drug and alcohol use as a means of protecting himself from thoughts and emotions that threatened from within. While Alex noted many negative effects he felt his drug use may have had on his life and relationships, he also mentioned that he felt it may have protected him from acting on the considerable anger that he felt. In this way, Alex's drug use may have been a method of self-protection that was simultaneously isolating, adding relational barriers between him and the important people in his life.

Lawrence also described an omnipresent wariness of others. Like Karl, he referred to a "wall" that served to protect him from those who might harm him:

I have a hard time making friends. There's always a wall there. If I meet males, I think all they want is sex. If I meet another male as a friend, there's a wall [that] goes up, so I can't say I have any close male friends at all. I have no real close female friends, only my wife.

Lawrence pointed out similarities that he'd noticed between the processes through which individuals build healthy relationships and the processes through which perpetrators of childhood sexual abuse groom their targets:

You tend not to trust anybody; that people always have, even if they're nice to you, an inside motive. When you put things in perspective, it'd be as if you met a child and befriended a child. You buy him candy, you do whatever the child wants and keep the

child happy but eventually down the road you're gonna abuse that child. That's the thought that would be in the adult's mind when I'm looking at this from the child's point of view. You carry that through in your adult situations too, you know? So I would meet a new friend or a very nice person, we get along together, but in the back of your mind you're always thinking "This is not right, this can't be a good friend, I don't trust him, something's gonna happen here."

In this way, Lawrence reminds us that the abuse he endured was not a random act inflicted by a stranger, but a calculated betrayal, escalated over time, by an individual who had earned his trust as well as the trust of his family. This betrayal, in its early stages, looked incredibly similar to the early stages of a healthy friendship. Experiencing the overtures of friendship as the opening stages of an abusive relationship could easily make the pursuit of friendship seem dangerous, as well as complicate the effort when friendship is pursued. In this way, Lawrence offers another means of understanding how a survivor may experience the need to protect themselves in the context of relationships, leading to a fairly isolated state.

Rather than a wall, Patrick described a "shell" that he developed at a younger age to protect himself from the world. He reflected on how that shell may have kept him from respecting the needs of others, something quite important in healthy relationships:

It was almost like if I was a somewhat broken kid, or somewhat broken individual in that sense that really didn't care who I hurt and how I hurt them... I took a lot of growing up. I think it took me ten extra years to grow up, really, and mature in that sense and realize how people should be and think and feel and to get out of that shell.

The shell that protected Patrick from others also distanced him from them emotionally; similar to Karl's statement earlier, Patrick here tells us that he could hurt others without experiencing negative emotions. Similar to other participants, Patrick didn't feel like he could rely on others for protection. This feeling was sustained when he disclosed his abuse to his parents and siblings, only to receive silence in response. Patrick described this dearth of support as "… like being abused all over again." While the initial abuse was unquestionably painful, it seems Patrick considers some consequent events, like his family's reaction to his revelation, as being similarly damaging and closely related to his experience of the abuse itself. It's been some time since Patrick experienced the need for a "shell," though he expressed concern that his preoccupation with protection may have simply shifted from his protection to that of his children:

I think it's owing to that sort of thing happening to me. You know, like always wanting to know where the kids are at all times, I get upset if they hurt themselves or if they're just not in that shell, you know?

Patrick has been trying to fashion the reactive shell he developed for himself into a proactive shell to protect his children from others. Similar to other participants, Patrick described feeling "lots of scepticism... just being more wary of people in general." While Patrick may not feel the need for a shell anymore, it's not because his view of human nature has fundamentally shifted. The shell Patrick tries to keep his kids in serves the same purpose his own shell once did: to protect from harm and those who would bring it. Patrick spoke about the pitfalls of his shell and also acknowledged the negative effects of trying to keep his kids in a shell; it seemed that balancing the need to protect his children with their need to experience the world and people around them is currently an area of great concern and focus for both him and his family.

4. 2. 1. 1. Trust. I started each interview by asking participants how they felt CSA had had an impact on their intimate relationships in adulthood. Karl, Jack, Alex, and Lawrence all answered that question the same way: trust. Patrick spoke first about his issues with control in relationships, but brought up concerns with trust soon after. While trust was clearly an important part of every participant's experience, each participant's experience was unique.

Karl was emphatic on the importance of trust in building relationships, and how he felt being abused had had an impact on how comfortable he was trusting others:

To me I think trust is the underlying one. If you can't trust someone, how do you build on [your relationship with them]? I think, for myself, trust was there but our abusers took that away. Whether they groomed us for it, whether it was our coaches, whoever. They knew what they were doing and we trusted that person with everything. Everything, and they destroyed it... how can I trust another person, that I can open and up and that there's not something that they want?

Karl felt that his ability to trust others had been "[taken] away," and/or "destroyed" by his abuser. Karl experienced issues trusting people in general, but this was understandably pronounced when it came to trusting other men in a sexual setting. This in turn made it difficult for him to pursue relationships, and even presented challenges in established intimate relationships. Karl described how he convinced himself that trusting others was important, even if there's evil in the world:

When I dealt with [my abuse], started working on it and had positive people in my life and allowed the relationship, it gave me the understanding that trust is important and people are good. There was that shit in the world, but there's also all this good. As soon as I was able to even crack that door a bit, it built to where now I have some very good, very strong relationships in my 50's that I never thought I would have with people.

Karl acknowledged the presence of evil in the world, but also found examples of good as well in those that had gathered around him in support and used this to justify widening the "crack in the door" that he'd built into his wall. What's more, he found that exposing himself to the "good," as he called it, benefitted him far more than the new vulnerabilities in his wall cost him. This is not to say that Karl no longer experiences issues with trust that he feels are due to living through sexual abuse in childhood; Karl disclosed that he still "catches himself" doubting the intentions of his partner, but that these doubts are easier to reason with than they may once have been.

Similar to Karl, Jack experienced difficulty trusting others in most areas of his life. He described feeling persistent feelings of reluctance to trust others, even individuals with whom he had built a relationship. Jack offered a lonely description of what relationships with little trust meant for him: "I do have a lot of superficial, surface-level relationships with people and that's ok, but I don't have people I can call up when I'm having a tough time or be like 'this is what's going on." In this way, Jack's issues with trust may be a barrier preventing him from accessing sources of support. For example, Jack disclosed that he had not told his parents or sibling about his experiences with CSA because he didn't trust they would "get it." Jack reported that the only people he had disclosed to (until recently) had been former romantic partners with their own history of sexual abuse, although he acknowledged a desire and described a plan to attempt trusting other individuals with the knowledge of his past:

I thought about doing a survey... pick five or six people and be like 'Hey, what would you think about me if this? Or this?' And try to gauge whether I want to do it or not. Jack's plan appears similar to how Karl developed comfort in trusting others; starting with close individuals one feels most safe with and slowly reaching out from there. His plan to survey people in his life as to how their perception of him may change given a number of hypothetical scenarios (with CSA among them) offers an interesting method of gauging responses to disclosure in a way that does not necessarily commit the survivor to disclosing their history.

Alex was quick to name trust as the "number one" way that CSA had impacted his relationships in adulthood. "I'm very 'keep things to myself.' The only ones I trust in this life are Jesus Christ, the Holy Spirit, and God right now." Alex added his psychiatrist and pastor to that short list later in the interview, but not friends, family, or his partner. Possibly by way of explanation, Alex stated that he generally felt that he couldn't trust people, which prompted him to behave in a manner he described as "standoffish" when in the presence of others. This posed a significant barrier to the formation of new relationships, and affected the growth of those he had. In this way, issues with trust have resulted in a rather isolative environment for Alex; he has very few true confidantes, and even fewer that he can consult earnestly in a non-professional capacity. Alex's partner is proof that he is able to build relationships despite his issues with trust, but the fact that his partner is missing from the list of those he trusts suggests that this is still an issue he struggles with.

Lawrence had a similarly short list of confidantes; early in our interview he disclosed that he didn't have any friends that he would consider close. While he now enjoys an open and trusting relationship with his wife, he described that not always being the case and as being the result of lots of intensive work from both parties. Lawrence drew a direct connection between his abuse, his issues with trust, and his relationships. He explained that because of CSA, he was convinced that anyone who took an interest in him as a person did so because they had an agenda he wasn't aware of, likely one that was not in his best interest. He summed it up like this: "So you as a male friend could me and then, I don't know, say 'Let's go for coffee.' In the back of my mind I'm always thinking 'OK, you want something more than coffee.'" This kept him from feeling comfortable in any situation resembling the beginning stages of a relationship. As previously discussed, Lawrence experienced the grooming process with which a predator may lure a child as extremely similar to the process in which people build a relationship of any kind; both involve discussion as a means to establish rapport and small acts meant to build trust. In a situation similar to what Alex experienced, discomfort in the early stages of potential friendship seems to have resulted in there being few individuals Lawrence can truly trust or confide in.

Trust wasn't the first theme that Patrick brought up, but it was certainly something with which he acknowledged having some difficulties. Similar to other participants, Patrick disclosed a tendency to question the motives of those around him and voiced frustration at this habit: "[It's] not normal, you know, to not be able to trust people and jump to conclusions, suspicions."

Patrick related that he felt this reluctance to trust and tendency for suspicion had made it difficult to form friendships, and had contributed to his unsuccessful intimate relationships.

This section has examined how participants experienced trust in their intimate relationships. While each participants' experience is unique, there are similarities and differences that I believe are worth noting. Karl spoke about how his abuser had "destroyed" his ability to trust, necessitating a long and involved rebuilding process that he is unsure he will ever fully complete. In similar ways, other participants attributed their difficulties with trust to the abuse they'd experienced. Karl and Jack described difficulty trusting others, and described experiencing that difficulty as a handicap they felt had to be overcome in order to form relationships. Alex and Lawrence also described experiencing difficulty trusting others, but seemed to view it as a natural precaution given what they knew some people are capable of. Karl described thinking this way as a younger adult before deciding that, in his case, mistrust as a protective strategy was more harmful than helpful. Patrick also described experiencing a similar thinking pattern as a younger man; this seemed to change in middle age, not because he believed others to be more trustworthy, but because he felt himself to be less vulnerable if this turned out to be the case.

4. 2. 1. 2. Vulnerability. Vulnerability is a subtheme I teased apart from Trust while analyzing my research data. As previously discussed, Vulnerability involves a willingness to expose oneself to or increase one's risk of physical or emotional pain. This section will examine how participants reported experiencing vulnerability during our interviews.

Karl had an interesting story that illustrated the lengths to which he was willing to go to for a time to avoid risking intimacy:

I decided I'd have relationships with no connections, so it was just about sex. That was dangerous in the 80's, HIV was just happening within the community, but it was easy to do because I craved it, and it was something I wanted; I also was a sexual being. So it was "ok, which one of these do you want?" and I thought "well, I'd rather have the physical contact without the intimacy."

At this point in his life, Karl was more comfortable being physically vulnerable in risky sex than he was with the idea of being emotionally vulnerable with a longer-term partner. This gave me some idea of how terrifying the prospect of emotional vulnerability may have been for him. Even once he decided that he wanted to be in a long-term intimate relationship, and that this would

necessitate being vulnerable with another man, it took a great deal of resolution built up over time for Karl to tell his partner about his abuse, what it would mean for them, and what he needed in order to move forward. While this has become easier since his 20's, Karl mentioned that his comfort with exposing vulnerability can still vary at times, even with people he has known and trusted for years.

The way Jack described his issues with vulnerability separate from his issues with trust was what convinced me that trust and vulnerability existed as separate themes. When asked about his close relationships, he said:

...to be perfectly honest I don't have a lot of those, because I have a hard time connecting with people. I've found it hard to be vulnerable and to share who I am as a person. It's getting better now than it was in the past. I have an ex-girlfriend that I'm pretty close with, and I still hang out with her a lot because we have connected on that level... I feel like I can be myself around her, right?

Jack talked about a number of individuals he trusted, but a much smaller number of individuals with whom he felt capable of being vulnerable with. Perhaps this was due to not the presence or absence of trust, but rather the amount? Or perhaps there were more factors influencing comfort in vulnerability than trust alone.

Early in our interview, Alex related that one of his biggest challenges was "definitely intimacy and getting close with others." He described himself as "standoffish," and expressed discomfort with physical expressions of vulnerability, like hugging. This discomfort with physical expressions of vulnerability even extended to his intimate partners. Alex disclosed that while he enjoyed sexual intercourse, it was years and lots of work before he started to be comfortable with the hugging and kissing often desired by his partner(s). Alex also felt uncomfortable expressing vulnerability vocally. He explained that when speaking with his partner, he only shares the positive aspects of his experience: "I don't share very much. I share about how good I'm doing." Alex described this as being a consistent behaviour for him in relationships, not just intimate ones but all of them.

Lawrence disclosed being uncomfortable expressing vulnerability with his wife for a long period of time, but he explained that since the state of communication in their marriage had been revitalized following his wife's discovery of his extra-marital affairs, he felt much more comfortable expressing vulnerability:

I have better sex with my wife now because we're more intimate. I don't feel like I'm hiding something and I've talked about my feelings... My biggest regret is that it happened so late. I think sometimes if this happened when I was thirty, the years we could've had, you know?

Lawrence disclosed that, prior to the affairs and discovery, he hadn't felt comfortable confiding in his wife or discussing his sexual desires. When his wife discovered his infidelities, fear of losing his marriage forced Lawrence to open up to his partner about what he was experiencing. While Lawrence feels more comfortable expressing vulnerability to his wife, his description of his issues with trust and disclosure that he has few close friends gave me cause to wonder if there was anyone else with whom Lawrence could feel comfortable being vulnerable.

Patrick didn't explicitly mention any issues with expressing vulnerability. His previously described issues with trust and suspicious outlook, themes which were experienced by other participants, lead me to believe it is a possibility that he experienced difficulty feeling comfortable expressing vulnerability. When talking about his sex life, Patrick mentioned that he was "…more about the conventional part of being intimate," which later made me wonder if Patrick's experience might be similar to Alex's experience of being comfortable with the physical act of sex, but less comfortable with physical communication of vulnerability or affection, like hugging or kissing. Similar to what Alex described, Patrick mentioned that his wife might prefer a more intimate connection during sex, and that he suspected his preferences were "hard on her," illustrating the long-reaching effects of childhood sexual abuse.

This section has examined how participants described their experiences with vulnerability in our interviews. Something that complicated work on this subtheme was the fact that only one participant actually used the word "vulnerable" in their interview; Jack, saying "I find it hard to be vulnerable and to share who I am as a person" when describing barriers he faces in forming intimate relationships. Jack was emphatic in his interview that he experienced challenges in this area, but initially it didn't seem that this was the case for other participants. That was, until it became clear that other participants were experiencing similar difficulties but using different words to describe their challenges. Karl and Lawrence described issues with "intimacy" that, upon reflection, read similar to what Jack was talking about. Alex and Patrick described having issues feeling "close" with others, and meeting their partners' needs for tenderness and connection during sex. While participants described similar challenges, the decision of what to

name this subtheme was a difficult one. While more participants used the term "intimate" when describing these phenomena, "vulnerability" was chosen as it is a broader term that describes participants' challenges in personal relationships in general, rather than just romantic ones.

4.2.1.3. *Theme One: Conclusion.* This section examined how participants felt the need to protect themselves in intimate relationships as an extension of the effects of childhood sexual abuse. While every participant's experience is unique, all of them experienced a fear that the violence they experienced in childhood could be repeated, and this fear was shown in the difficulties they experienced connecting with others.

4.2.2. Theme Two: Worth of the Self. All of the participants that I spoke with mentioned feeling like they were somehow lesser for having experienced CSA. While each man was quick to emphasize the fact that survivors of childhood sexual abuse have nothing to be ashamed of, they all described personal experiences dealing with low self-worth that they attributed to their abuse. This section will describe each participant's experience with self-worth.

Karl disclosed that his history of CSA made him question whether he deserved to be in a relationship:

The feeling that I hear often when I talk to other survivors, that feeling of [unworthiness]. I wasn't worthy for [the relationship]. You know, 'I shouldn't have let this happen,' all those myths and all that stuff comes back no matter how educated, how much you deal with it... there's always something, you know; 'You don't deserve it, it's not right.' So that fear was just unbearable at times.

Karl's shift from present tense to past tense in this segment suggests that while Karl still experiences doubts and negative thoughts about his self-worth, they are not as debilitating as they may once have been. One aspect of Karl's life that was particularly affected by feelings of self-worth was his sex life. Karl described feeling shame for enjoying sex with a man because of the abuse that he endured:

...coming to terms with the idea that I am a sexual being was very difficult, because I like sex. I like to talk about it, I like erotica, but I also carried a lot of shame with it. Feeling you can't do those things and enjoy them because of what happened. And then it was being able to separate what happened from what I wanted to do, and I think that was the big piece that took a while, to say 'What happened was abuse, now I get to make those choices. They're mine.'

Karl disclosed that this shame can still present itself at times, but that he and his partner meet those challenges as they come through open communication and respect for boundaries.

Jack disclosed that he felt his exposure to CSA contributed to his feelings of low self worth. He shared the following story to illustrate what he'd felt he deserved earlier in his life:

At the time I had this girlfriend and she treated me like crap... I was really into smoking pot and playing [video games] when I had my days off. So I remember one time I was sitting there on the computer playing [an online game] and she chucked a book at me and it hit me. I knew probably two or three months into that relationship that it wasn't going to work out, right? But I stayed with her for maybe two years, and the way I finally left, I got really drunk at the bar one night and came home and was like 'Fuck you, I'm not coming back,' and I just left. I left all my stuff in the apartment, didn't care. Just left. But I remember the reasons why I didn't leave [sooner] were because I thought I wouldn't be good enough to meet another partner. I didn't value myself as a person very much if that makes sense?

Jack spent over a year in a relationship he knew wouldn't last with a partner that treated him poorly because he didn't think he deserved better. Jack consistently protected himself from strangers as discussed in Theme One, but he believed he deserved the way his partner treated him and didn't recognize the behaviour as abusive until years later. It wasn't that he believed that all relationships featured physical abuse; rather, he believed he would have a hard time finding, and was unworthy of, a better relationship that didn't. Jack had to get drunk before declaring his intention to leave, and sacrificing his possessions was preferable to negotiation and/or further contact. I believe this was an incredibly difficult decision for him to make, which may give us some idea of how firmly Jack believed he would have a difficult time finding (and did not deserve) a more healthy relationship. Jack expressed that he now has a healthier view of what is acceptable in a relationship, he still experiences feelings of low-self worth that he attributes to his abuse.

Alex disclosed that he had struggled with feelings of low self-worth throughout his life. His description of how he dealt with past relationships and marriages reminded me of Jack's story of abandoning his possessions to leave his girlfriend:

Another one I lived with farming. I worked on the farm, I put everything into it and ended up walking away with nothing. And that's the way it's always been in my

marriages. I just walk away from everything, I just left, I'm not worth it, I just walked away from it, no use even trying to fight it.

Alex told me how he had walked away from mutual assets at the dissolution of his marriages, such as a large parcel of land that had been in his family for years, because he didn't feel that he deserved to keep any part of them. This reminded me of the breakup Jack described, where he'd walked away from an abusive relationship, his apartment, and his belongings, all at once. Alex disclosed that while he still experiences some difficulties with low self-worth, he has found self-forgiveness in his spiritual study. "I didn't like the person I was," he said, "now I like who I'm becoming."

Lawrence also experienced feelings of low self-worth, which he felt had an impact on his relationship with his wife. He described how a belief that he was somehow lesser for having experienced CSA made it difficult for him to accept affection from his wife:

One of the biggest downfalls too is when you're living in a relationship like I was with my wife, and she's saying she loves me, in the back of my mind I'm saying 'If only you knew the real me, you wouldn't love me.' And you say that all the time.

While Lawrence described this as being an obstacle in their relationship for quite some time, he also disclosed that improved communication between him and his wife had led to vast improvements in the situation: "So when you're not living this secret anymore and you're able to talk about the abuse and the effects and the feelings... it just lightens a load off your shoulders." Once Lawrence let his wife see "the real [him]," he no longer could tell himself that her affection was coming from a place of ignorance of his true character.

Patrick disclosed that he, too, had experienced feelings of low self-worth that had impacted his intimate relationships. He described how he felt his experience of CSA had compromised him in some way:

Insecurity and all that stuff, it took me a while to shake that sort of outlook on life. You know, now [I'm] a bit more free-flowing, passive. I don't sweat the small stuff and I don't think I'm like that anymore. But yeah, that sort of insecure part and I always felt... not good enough. Well, how does an insecure person feel? Basically, you're always afraid to lose somebody because you may not be good enough... and feeling like you're sort of a broken individual, not a perfect or pure soul.

Patrick's description of insecurity read similarly to Karl and Jack's experience of "unworthiness," Alex's struggle with "self-worth," and Lawrence's fear that his wife would discover "the real him." While Patrick did not describe any specific relationship-changing crisis like Lawrence experienced, it seems that this feeling of insecurity does not have the same effect it once did on his relationship with his wife. Patrick explained that group therapy with other survivors helped him shed the feelings of insecurity he struggled with.

4.2.2.1. *Masculinity.* A specific way some participants described their experience of abuse had impacted their self-worth was in their perception of themselves as men. This section will examine participants' experiences with and perceptions of masculinity.

Karl disclosed that his experience of CSA was only one of two big factors that he felt detracted from his masculinity:

I felt like less of a man in saying to my partner, or I think really to anyone, that I wasn't able to protect myself, I wasn't able to do any of that. So I felt like less of a man because of the abuse, less of a man because of being gay, because it wasn't supported in the

community at the time. There wasn't any of that, so self-esteem was just shot to hell.

Karl felt that he was less of a man because he hadn't been able to fend off his step-father's abusive advances. This in turn had a negative impact on his self esteem, which was already negatively effected by mainstream society's negative perception of his sexual orientation. Karl described how he eventually started dealing with these thoughts and feelings:

I felt worthless, useless. I should've been able to protect myself, all of that stuff. I have six brothers, so the idea [was] 'why was it you, you're a wimp.' You know, '[you're] not a man,' that leads into the homophobia, it was just a constant thing and I think that's why I just shut down wanting to connect with any human being, that was just easier to do. But you can only do that so long... I remember one person saying 'Go get a picture of you when you were the age you were abused and look at it, then get a picture if you can of your abuser and look at it.' You know, I was able to do that. I was a scrawny little kid, my abuser was two hundred and thirty pounds, six-foot-two, and then I was able to separate and [say] 'Oh, that little kid couldn't do anything.' That helped to, say, put the blame where it needs to be.

Karl reported that he still experiences shame and feelings of low self-worth that he attributes to his experience of CSA, but also that he does not experience them as frequently or as intensely as he once did.

Jack described being frequently drawn to activities, habits, and professions that he considered masculine or "manly," like smoking and hard labour, and voiced a belief that this may be due to his childhood abuse. He also disclosed feelings of insecurity and low self-worth. While he described a concerted effort to be perceived as masculine, he did not say whether this was due to a self-perceived lack of masculinity on his part, similar to that experienced by Karl.

Alex drew a direct link between feelings of deficient masculinity and low self-esteem: "My self-worth has really been strained with the opposite sex.[I often wonder] whether I'm man enough to be with a woman." He also voiced disappointment at the difficulty he experiences "man[ning] up" to confront issues in his current relationship. While it appeared Alex did not feel secure in his masculinity, it did not seem that he questioned conventional beliefs about what makes one masculine.

Lawrence didn't mention masculinity during our interview, nor did he voice an opinion on the topic.

Patrick disclosed that at one time, a belief in cultural masculine norms kept him from speaking about his abuse: "I think in previous relationships it was a shameful thing to talk about. It wasn't masculine to confess to these sorts of things happening. It was a dirty little secret." Surviving CSA was something that Patrick found shameful for a long time, and while this shame likely had a negative effect on his self-worth, it likely also kept him from speaking about it with individuals who may have been able to have a positive influence on his recovery.

This section has examined participants' experiences and perceptions surrounding masculinity. Karl and Alex both experienced a perception that they were not "man enough," and that this was a direct result of the abuse they'd endured. Jack was drawn to "manly" professions and pastimes that were ultimately not in line with his desires, though he didn't say whether this was due to a self-perceived deficit of masculinity. Patrick felt that being a man meant that he couldn't talk about the abuse. While each participant's experience with masculinity was unique, it was clear masculinity played a part in most participants' experience of self worth.

4. 2. 2. 2. Theme Two: Conclusion. This section examined perceptions of low self-worth experienced by participants, and how these perceptions impacted their ability to form and

maintain intimate relationships as an extension of the effects of childhood sexual abuse. While every participant's experience is unique, all of them experienced a perception that they were somehow "lesser," broken individual[s]" or "not pure soul[s]" for having survived childhood sexual abuse.

4. 2. 3. Theme Three: Healing the Self. This section will examine behaviours and supports that participants felt helped them reduce the effects of CSA on their ability to form and maintain intimate relationships.

The first support Karl talked about during our interview was his circle of friends. Karl related that he "had a couple of really close women that [he] could talk to that were also survivors." Karl credited the work he did with these fellow survivors with helping him wrestle with perceptions of low self-worth. Karl further described that this de facto group therapy helped him talk about and feel comfortable being vulnerable and physically intimate with men, a difficulty he reported his female survivor supports could relate with.

Karl also reported that his partner had been a large part of his support since they met over twenty years ago. Karl recounted that his struggles with trust, low self-worth, and other scars had often impacted his partner, directly or indirectly.

He could have found someone else where he could've had a very robust sex life and intimacy, and he didn't get that from me... He's had to be able to deal with that, and not have someone there at times who maybe should've been... But he gave me the space to deal with it.

Certainly Karl's history of abuse had an effect on Karl's partner as well as Karl. Despite this being the case, Karl said that his partner's patience, communication, and dedication were instrumental in helping him face those struggles; he described his partner as "someone who would just not give up." Karl also told me that his partner's long-standing friendships and strong family relationships served as a model as he learned to allow people into his life.

The first support Jack talked about was therapy. In particular, he said that cognitivebehavioural therapy had been extremely useful, helping him to identify the emotions behind his actions. Jack also reported that somatic experiencing therapy had helped him identify the emotional correlates of physiological sensations, aiding his overall awareness of his mental state. Overall, individual therapy with a mental health professional was the primary support Jack spoke of, though he also participated in group therapy sessions with other male survivors.

Alex was quick to talk about his spirituality when asked about supports that had had a positive impact. Alex was very clear that he did not align himself with any one sect of Christianity, but that he read the bible and found it both enlightening and comforting. Alex reported that learning to forgive himself for the decisions he'd made, many of which he felt were influenced by the abuse he experienced in childhood, was a large part of why he found himself in a much more positive position than he had previously.

Something else Alex found helpful was doing his own research into abuse and addiction. Alex listed Dr Gabor Mate, Dr Carolyn Leaf, Theo Fleury, and Kim Barthel as writers whose works he felt had contributed to a better sense of self-understanding. Alex referenced Dr. Mate's description of attunement, the process in which a newborn child bonds with its caregivers, and what can happen if that process is interrupted:

"That's our bonding... and if we don't get it, that can really screw us up apparently... and I didn't get that. So it was easy for me to be led to someone who would perpetrate me, because I was looking for that bonding. Perpetrators, they see that."

Alex's personal research helped him see what had happened to him as the case of a "perpetrator" preying on his childhood desire of adult attention, not something shameful or in which he was culpable.

The first support Lawrence mentioned in our interview was psychotherapy. While his first experience with a therapist was unsatisfactory, Lawrence found a therapist with experience helping survivors of abuse and reported that therapy helped him understand the emotions behind his actions. Lawrence also attended a group for male survivors, and found that speaking with his groupmates about his childhood abuse was surprisingly easy, both because he knew they understood his experience and because he knew he wouldn't be encountering group members in his personal life. Prior to therapy, Lawrence said that he hadn't thought that his history of sexual abuse was affecting his life: "Because you think you're dealing with it, you know? You think it's done, it's gone, just suck it up and get on with life. You don't realize the impact it's had on you until your relationship starts to fall apart." Lawrence reported that therapy helped him work on his issues with trust. When asked what he'd recommend to other male survivors of CSA, he said he'd advise them to speak with a qualified mental health professional, and with other survivors.

In terms of ongoing support, Lawrence was unequivocal: "the main support I got was from my wife." For a very long time, she was the only person he was willing to speak to about

his abuse, although even then it was extremely rarely. After their marital crisis, in which Lawrence's partner discovered he was conducting anonymous affairs with men and it seemed they might separate, their communication became open, honest, and non-judgmental. Lawrence told me this helped him work on his issues with trust and vulnerability, and led to a stronger bond between him and his partner.

Patrick was quick to name the support group for male survivors of CSA as the resource he'd found the most helpful, calling it "a godsend." Patrick said the group "took a huge weight off [his] shoulders," and helped him work on his issues with self-worth. Patrick also reported that he attended counselling sessions, and that the skills he learned in counselling helped him work on his issues with trust and improve his relationships with his wife and children. While Patrick was pleased with the ways group and one-on-one therapy had ameliorated his life, he voiced displeasure that such programs were not more widely-known: "I can't say enough about it… they should have posters to say there are groups, there is help available for men who've gone through this, for women who've gone through this... Nobody knows."

4.2.3.1. *Theme Three: Conclusion.* This section examined how participants felt they'd healed or otherwise negated the long-term effects of CSA. Every participant found their own way of working to overcome the relationship obstacles CSA had placed in their path, though all reported that it was likely to be a life-long effort. While many individual differences existed here between participants, all felt that they had benefitted from support groups for male survivors, as well as from learning more about the phenomenon of CSA.

4.3. The Experience of Male Survivors of CSA in Intimate Relationships in Adulthood

Research suggests that male survivors of CSA face unique challenges in intimate relationships in adulthood, such as issues with intimacy, sexual dysfunction, anger, and alienation (Gill & Tutty, 1999; Kia-Keating, Sorsoli, & Grossman, 2010; Public Health Agency of Canada, 2008). With this in mind, I questioned my participants about how they experienced intimate relationships in adulthood.

As detailed in Theme One, participants described a perpetual state of vigilance, keeping their guard up in anticipation of possible or perceived threats. While this preoccupation with selfprotection took many and varied forms, all participants reported experiencing issues trusting others and discomfort in intimacy. When trusting others, participants reported experiencing a profound fear that their trust would be betrayed, much like their trust had been betrayed by their

abusers in childhood. Similarly, participants reported that this fear of betrayal kept them from feeling comfortable exposing vulnerability in intimate relationships. This perceived need for selfprotection had a variety of negative effects on participants' ability to create and form intimate relationships. Additionally, some participants sought to protect themselves from negative emotions and cognitions via self-medication with street drugs, a situation which brought its own consequences and difficulties with regards to both intimate relationships and global functioning.

Theme Two described participants' issues with self-worth. Each participant described experiencing pervasive cognitions of low self-worth. These had a variety of effects, such as leading participants they weren't deserving of a loving, respectful relationship, or that they had to keep their true selves hidden behind a strong, inscrutable veneer. Many participants reported experiencing a perception that surviving CSA had left them lacking in masculinity; this perception lead some participants to act in ways they felt were "manly," even if these actions were destructive or not in line with their own goals and desires.

Theme Three detailed the ways participants sought to face the challenges described in Themes One and Two. Participants used a combination of professional and personal resources in order to improve their lives and limit the negative effects of the abuse they had survived. Most participants reported experiencing relief from one-on-one psychotherapy with a mental health professional, though it's important to note that participants who participated in counselling with professionals unfamiliar with male survivors of CSA reported negative experiences, suggesting professionals working with male survivors may benefit from training specific to this population. Participants also described a variety of personal resources, such as romantic partners, close friends, and spiritual/scientific studies, as resources that had helped provide psychological relief from distress associated with CSA. Interestingly, some participants described a phenomenon where professional therapy increased one's ability to access personal resources, which were then able to provide increased benefits. While no participant voiced the opinion that they no longer experienced after-effects from surviving CSA, every participant described having benefitted from some combination of healing resources.

Certain themes that did not relate directly to intimate relationships or that lacked sufficient transcript data to examine in depth still bear mentioning here. One of these is parental/family disclosure and relationship. It is worth noting that neither Karl, Alex, or Patrick experienced a caring or compassionate response from their parents when they chose to disclose

their abuse. Lawrence disclosed to his sibling and received such a hurtful response that he decided not to tell any more family. Jack decided not to disclose to his family at all. While this is not directly related to survivors' experiences in intimate relationships, Alex's insightful comment that children with weaker parental relationships are easier targets for predators made participants' family relationships feel relevant. It's also worth noting that as of this writing and to the best of my knowledge, none of them men I spoke to have seen their perpetrator formally charged by law enforcement.

4.4. Summary

This chapter analyzed and explore the lived experiences of male survivors of CSA in intimate relationships. These men had all survived sexual abuse in childhood, and they described how they felt this experience may have impacted their intimate relationships over the course of their lifetimes.

In keeping with the Interpersonal Phenomenological Analysis methodology, individuals who had direct contact with a phenomenon were asked to recount their experiences, which were then analyzed by the researcher. The division of data into themes and subthemes facilitated this analysis. Protection of the Self emerged as a theme that represented participants' need to avoid future victimization, with subthemes trust and vulnerability representing avenues for future hurt that participants closed off, perhaps at great expense. Worth of the Self emerged as a theme describing participants' feelings of negative self-worth, while the subtheme masculinity examined a possible factor contributing to these feelings. Participants felt that the trauma they'd experienced had somehow made them "lesser" as men and as human beings, which had an impact on what they felt they had a right to expect from intimate relationships and life in general. Finally, Healing of the Self emerged as a theme describing the resources participants accessed in order to address the difficulties they'd discussed in the first two themes. Participants accessed a variety of professional and personal resources, and experienced differing levels of relief and quality-of-life improvements as a result of their efforts.

The chapter to follow will address these results in the context of the existing literature, and identify opportunities for further research.

5. Discussion

The purpose of this study was to explore how male survivors of CSA experience intimate relationships in adulthood. The existing literature suggests that male survivors of CSA are more likely to experience difficulty forming and maintaining intimate relationships in adulthood (Gill & Tutty, 1999; Jacob & Veach, 2005; Kia-Keating, Sorsoli, & Grossman, 2010; Larson, Newell, Holman, & Feinauer, 2007; Lisak & Luster, 1994). However, the majority of the literature examining this phenomenon do so in a quantitative manner; this yields useful statistical information but does little to give the reader an impression of how a man who has experienced sexual abuse in childhood may experience intimate relationships (Grossman, Sorsoli, & Kia-Keating, 2006). This study explored the experiences of five male survivors of CSA who offered their participation with hope that their efforts might help inform those seeking to understand this phenomenon, from health professionals and service providers to survivors themselves and those supporting them. This chapter will discuss the findings described in Chapter 4 in the context of the current literature. An examination of the study's strengths and weaknesses, as well as implications for mental health professionals, will follow.

5.1. Integrating Findings with the Literature

5.1.1. Attachment Theory. As noted in Chapter 4, Alex reported experiencing increased understanding of his situation after reading *In The Realm of Hungry Ghosts* (Maté, 2008) and *Conversations with a Rattlesnake* (Fleury & Barthel, 2014), books which explore the influence attachment, abuse, and early adversity can play on long term development, especially with regard to relationships and susceptibility to addiction. Alex felt that insecure attachment between him and his parents had made him a viable target for a predator, and that the abuse he experienced exacerbated this insecure attachment. This synergistic relationship has been described in the literature (Alexander, 1992; Bacon & Richardson, 2001). Generally speaking, IPA is an inductive research method (Larkin, Watts, & Clifton, 2006; Smith, 2004; Smith, Flowers, & Larkin, 2009). This means that most often, researchers using this methodology do not attempt to approach their query through the lens of a pre-determined theory but rather attempt to report phenomena with as little bias as possible. However, participant experience or collaboration, such as Alex's experience noted above, may lead the researcher to dialogue with existing psychological theories (Flowers, Smith, Sheeran, & Beail, 1997).

Interpretative Phenomenological Analysis assumes that the participant, not the researcher, is the expert on the topic under investigation (Smith, 2004; Smith, Flowers, & Larkin, 2009). As such, the connection of the current study to Attachment Theory is unique in that it was suggested by a participant, who is to be considered an expert on his own experience, and not by the researcher. Inductive analysis is important because it allows participants to relate aspects of their experience that are relevant to the research question, but that researchers may not have thought to ask about (Smith, 2004; Smith, 2011). In this case, it allowed Alex to suggest a point of view that had not yet been considered in this study. I believe this serves as an excellent example of the strength of qualitative research methods; they can allow a participant to dialogue directly with an established psychological theory and relate that experience to the researcher, potentially granting the researcher an increased understanding of the participants' experience but also an understanding of how a phenomenon described in a psychological theory may appear in the field.

Attachment Theory is a psychological premise first developed by Mary Ainsworth and John Bowlby, which holds that an individual's sense of safety and trust in infancy can influence relational and emotional development in adulthood (Bretherton, 1992). The original tenets of Attachment Theory held that a child's relationship or attachment with their mother formed the blueprint or style of future relationships. The literature supports both the existence of various styles of attachment, typically classified into secure and insecure attachment styles, and the idea that these styles are established early in life; however literature suggests that a whole host of factors and not just maternal relationships are likely to influence attachment style (Bolen, 2002; Olafson, 2002), and that attachment style can change over one's lifetime, especially as a consequence of trauma like CSA (Waters, Merrick, Treboux, Crowell, & Albersheim, 2000). Notably, previous studies suggest that the experience of CSA is negatively correlated with secure attachment and positively correlated with various styles of insecure attachment (Bacon & Richardson, 2001; Erozkan, 2016; Muller, Sicoli, & Lemieux, 2005). Given that the literature suggests a connection between the experience of CSA and insecure attachment, as well as a connection between insecure attachment and difficulty with intimate relationships in adulthood (Feeny & Noller, 1990; Simpson, 1990), the discussion of results below will examine the current findings in the context of Attachment Theory.

5.1.2. Protection of self. This theme emerged as participants reported experiencing persistent fears of being hurt by others, both strangers and those known to them. Participants described keeping others at a distance, worrying that allowing someone closer would be to invite physical or emotional injury. I believe this is consistent with literature suggesting male survivors of CSA experience higher incidence of anxiety symptoms (Briere et al., 1998; Spataro et al., 2004). Jack and Alex described using substances to protect themselves from painful thoughts and emotions, these accounts were also included under this theme. I believe Jack and Alex's experiences are consistent with literature suggesting male survivors of CSA experience higher levels of substance use than the general population (Hussey, Strom, & Singer, 1992; Schraufnagel, Davis, George, & Norris, 2010). Finally, participants reported issues concerning trust and vulnerability in their intimate relationships; these were examined in the subthemes that follow.

5.1.2.1. Trust. Participants all reported experiencing difficulty trusting partners in intimate relationships. This difficulty was not just an issue in their intimate relationships; they reported experiencing difficulty trusting anybody, including family members. Male CSA survivors in previous studies have similarly reported experiencing difficulty with trust (Crete, & Singh, 2015; Kia-Keating, Sorsoli, & Grossman, 2010; Larson, Newell, Holman, & Feinauer, 2007). Literature examining the characteristics of individuals exhibiting insecure attachment styles has also described similar difficulties with trust (Liem & Boudewyn, 1999; Mikulincer, 1998), which may support the use of Attachment Theory models in conceptualizing relational effects of CSA, and in working with survivors of CSA, as well as their partners, in helping capacities.

5.1.2.2. Vulnerability. Participants all reported experiencing an intense discomfort when exposing vulnerability to their intimate partners, which is consistent with the literature (Crete & Singh, 2015; Gill & Tutty, 1998; Jacob & Veach, 2005; Larson, Newell, Holman, & Feinauer, 2007). I also believe this is consistent with literature suggesting similar difficulties with vulnerability exist in those exhibiting insecure attachment styles (Liem & Boudewyn, 1999), further supporting the idea that Attachment Theory may offer useful tools for working with male survivors of CSA.

5.1.3. Worth of the self. This theme emerged as participants reported experiencing the persistent belief that they were somehow lesser for having experienced CSA. The precise nature

of the perceived inadequacy seemed to vary slightly between individuals, as well as over time, however participants seemed to universally struggle, at one point or another, with the cruel notion that they may have been to blame for their abuse due to perceived weakness, perceived impurity, or sexual orientation. This finding supports past literature suggesting male survivors are more likely than the general population to struggle with depressive symptoms and feelings of low self-worth (Brown & Anderson, 1991; Dhaliwal et al., 1996, Lisak, 1994; Romano & DeLuca, 2001). Many participants' feelings of low self worth centred on themes relating to masculinity, which were further examined in the following subtheme.

5.1.3.1. Masculinity. All participants reported experiences of negative perceived selfworth with regards to their masculinity (e.g. being "man enough") and dissonance between their experience of having survived CSA and a perceived cultural expectation of males as non-victims. Existing literature suggests that male survivors commonly experience difficulty consolidating their experience as CSA survivors with societal expectations of masculinity, many of which are unhealthy to begin with (Diamanduros, Cosentino, Tysinger, & Tysinger, 2012; Gill & Tutty, 1999; Gruenfeld, Willis, & Easton, 2017; Spencer & Tan, 1999). Some participants reported times when they had acted in ways they felt were excessively masculine or "manly" in order to compensate for their perceived deficit in masculinity, generally with less than positive results; literature suggests this is a common experience among male survivors of CSA (Easton, Renner, & O'Leary, 2013).

5.1.4. Healing the self. Participants all reported different paths as they worked towards healing, and these fell under this theme. Participants all reported waiting several years before telling anyone about their abuse; this is consistent with the literature, which suggests male survivors typically wait decades prior to disclosure (Edelson & Joa, 2010; O'Leary & Barber, 2008). When participants did disclose most reported doing so first to an intimate partner, though Karl first disclosed to close friends. Some participants reported that a committed intimate partner had been a beneficial source of significant support while they processed and made meaning out of their experience of CSA. The existing literature supports the idea that a supportive romantic partner can be a beneficial resource to male CSA survivors; however it should be noted that this support can take a toll on the partner (Jacob & Veach, 2005). Participants also reported having experienced support and relief from learning more about the phenomenon of childhood sexual abuse, both generally and specifically against boys. Literature supports the idea that education

and self-guided study in this area can be beneficial for male survivors of CSA (Easton, Coohey, Rhodes, & Moorthy, 2013). While all participants had encountered their own unique supports and difficulties through the course of their lives, all participants agreed that the difficulties they attributed to having survived CSA became less so as time progressed; this, too, is supported by the literature (Grossman, Sorsoli, & Kia-Keating, 2006; Kia-Keating, Sorsoli, & Grossman, 2010).

5.2. Strengths of the Study

This study has many strengths to contribute to the existing literature on male CSA survivors. First and foremost, this study contributes data describing male survivors making sense of their experiences, of which there are little (Diamanduros, Cosentino, Tysinger, & Tysinger, 2012; Grossman, Sorsoli, & Kia-Keating, 2006; Kia-Keating, Grossman, Sorsoli, & Epstein, 2005). One's method of "making sense" of what has happened to oneself is both a very personal and very important part of recovering from a traumatic event; it is also a very difficult process to capture using more quantitative research methods (Grossman, Sorsoli, & Kia-Keating, 2006). To that end, this study provides an important and unique analysis of how five male survivors of CSA made meaning of the difficulties they experienced in intimate relationships in adulthood. This data may not be generalizable, but there may be little of this process that is.

Another significant contribution this study makes to the existing literature is that it offers support for possible links between the experiences of male survivors of CSA in intimate relationships and attachment theory, a framework which could potentially help practitioners, survivors, and their supporters understand and conceptualize difficulties male CSA survivors may experience in intimate relationships (Liem & Boudewyn, 1999). While literature exists supporting this link with female survivors of CSA (Bifulco et al., 2006), considerably less literature exists for male survivors. This is significant, as literature suggests attachment style may have a moderating effect on trauma experienced by survivors of CSA (Lowell, Renk, & Adgate, 2014). A further strength of this study is that this connection is not the result of a conscious effort to tie these phenomena together, but rather was brought to the researcher's attention through the experiences and suggestion of a participant.

5.3. Limitations and Directions for Future Research

Given that this study was undertaken to satisfy the necessary requirements for obtaining a master's degree, it was conducted with minimal resources and contains many limitations that must be taken into account when weighing its merits.

The first limitation is the study's small sample size. The phenomena under analysis here is incredibly personal and unique, and while the five accounts presented here are certainly enlightening, they cannot be said to represent the entirety of experiences lived by male survivors. The experiences recounted and analyzed in this study serve as an example of difficulties experienced by male CSA survivors in intimate relationships, not an exhaustive catalog.

A limitation that must be taken into account with regards to analyses is that the researcher had only a single interview with each participant. While this decision was made out of necessity given the difficulty experienced in recruiting participants, it meant that participants did not get a chance to offer feedback on the researcher's analyses. These analyses are extremely exploratory in nature, and are meant to offer perspective, not to dictate principles. This is to say that while they certainly offer value to the reader, an opportunity for participant input may have provided additional refinement to study findings.

While literature supports the idea that Attachment Theory may offer insights into the treatment and experiences of male CSA survivors, the exact nature of this relationship requires further examination. For example, none of the men who participated in this study described what could be called a close or open relationship with their parents, and some described the abuse they experienced as a reason for this estrangement. Given the connections between parental relationships and attachment style (Bolen, 2002; Olafson, 2002), this is a phenomenon that could certainly bear further exploration.

Finally, the sampling method used in this study was a limitation when considering the generalizability of the results. As previously noted, available literature suggests that male survivors of CSA are typically reluctant to disclose their experiences of abuse, reluctant to seek treatment, and typically experience difficulty trusting others. This being the case, it is possible that participants who were recruited based on their participation in a group therapy program and who were willing to discuss their experiences with a stranger may not be the most representative sample of male CSA survivors. While this limitation certainly merits consideration when contemplating the implications of the data, the ethical consideration of participants must take precedence in sampling and recruiting (and, indeed, at every stage of research); therefore it is

difficult to say how this limitation may be addressed in future research. Future research could attempt to make the most of this issue by adapting a resiliency perspective, and seek to identify what makes some male CSA survivors disclose their abuse, seek treatment, and address difficulties in intimate relationships.

5.4. Implications for Helping Professionals

This study contains plenty of information that could be used to inform helping professionals working with male survivors of CSA.

Karl and Lawrence both reported experiencing pain and self-doubt as a result of interactions with healthcare professionals. Their accounts suggest that these professionals were not acting maliciously, and were in fact attempting to be helpful. Nevertheless, statements made to these participants by these professionals caused no small amount of emotional pain and made both participants reluctant to trust health professionals. This is consistent with the literature (Alaggia & Millington, 2008; Easton, Saltzman, & Willis, 2014; Gruenfeld, Willis, & Easton, 2017; Hovey et al., 2011), which suggests healthcare professionals may inadvertently sustain or even foster shame and an unwillingness to disclose in male CSA survivors. Given the alarming prevalence of CSA against males (Briere & Elliott, 2003; MacMillan et al., 2013; Stoltenborgh et al., 2011), education concerning male survivors of CSA may be beneficial for healthcare professionals working with male populations, especially those providing mental health services (Alaggia & Millington, 2008; Hovey et al., 2011). It should be noted that Jack and Alex both reported attending counselling sessions to address issues they felt were related to the abuse they experienced long before they told a counsellor about the abuse itself. This suggests helping professionals working directly with male survivors on the outcomes or sequelae of CSA may not be aware that the individual engaging their services is a survivor.

As previously mentioned, this study offers potential ties between attachment theory, insecure attachment, and male CSA survivors' experiences of difficulty in intimate relationships, which may help practitioners working with male survivors of CSA conceptualize their clients' experiences (Bacon & Richardson, 2001; Erozkan, 2016; Muller, Sicoli, & Lemieux, 2005). This may also provide practitioners with effective resources to offer their clients in the form of psychosocial education, as literature suggests an enhanced understanding of the phenomena of CSA can be beneficial for survivors (Easton, Coohey, Rhodes, & Moorthy, 2013).

Finally, the research cited in Chapter 2 suggests that male survivors of CSA may be more likely to experience negative social and psychological sequelae depending on their endorsement of certain societal masculine values (Easton, Renner, & O'Leary, 2013; Gill & Tutty, 1999; Jacob & Veach, 2005). Professionals working with male survivors of CSA may wish to assess their clients` endorsement of stereotypical North American heterosexual masculine norms, especially those relating to toxic masculinity, if for no other reason than endorsement of these norms is correlated with a significant increase in the incidence of suicide among male survivors (Easton, Renner, & O'Leary, 2013). Male clients who strongly adhere to these norms, particularly those relating to toxic masculinity, may benefit from an examination of these norms to determine their benefit to clients` psychological and social functioning.

5.5. Researcher Experience

When I initially started this project, I thought that I would be finished in roughly a year. Approximately six years later, I can say that many of my expectations going in to this study were perhaps less than accurate. This section will examine some of the challenges and experiences encountered in the completion of this study.

I mentioned in the first chapter that, prior to the start of this study, that I was not aware that I knew any male survivors of CSA in my personal acquaintance. However, given even the admittedly conservative expectation that 8% of North American men may have experienced CSA in their lifetime (Briere & Elliott, 2003; MacMillan et al., 2013; Stoltenborgh et al., 2011), it would have been naïve to assume that none of the men in my life were survivors. This project took up a huge amount of my time and energy, and lead to conversations with friends and acquaintances that likely wouldn't have taken place otherwise. I can say now that if it weren't for the fact that it would've been horrendously unethical (Haverkamp, 2005), I could have recruited my entire sample using only survivors I know personally. I personally know more than five men who have grappled with CSA for most of their lives; men who learned what I was working on and felt comfortable confiding in me. Given how selective male survivors can be in disclosing their abuse and how long they may wait to do so (Edelson & Joa, 2010; O'Leary & Barber, 2008), it is likely that there are even more men that I know who have survived CSA. The revelation that I knew men personally who had experienced CSA quickly made this project more personal than I had originally bargained for. I think this helped immerse me in the topic and contributed to my understanding, but it also made work on this project far more emotionally

taxing than I'd anticipated. Journaling and personal counselling were extremely valuable tools for keeping myself healthy and in a state to make a positive contribution to this study. Still, I find myself at a complete loss trying to comprehend how so many people experienced such horrendous sexual violence as children. I have never been a father, but I believe that if I ever become one there are aspects of this study that will haunt me. This project has brought me a sense of accomplishment and purpose, but I can't help but wish research such as this were wholly unnecessary.

5.6. Conclusion

This study sought to analyze how five male CSA survivors experienced and made sense of their intimate relationships in adulthood. Each participant navigated an intensely personal journey through struggles with low self-worth and preoccupations with self-protection as they sought to heal from the wounds of CSA. Each participant's account is a contribution to the existing literature, and has plenty to offer practitioners, other survivors, and those seeking to broaden their understanding of this phenomenon. While the sexual abuse of boys seems to be an under-reported, under-investigated, and incredibly damaging phenomenon (Gill & Tutty, 1999; Grossman, Sorsoli, & Kia-Keating, 2006; Jacob & Veach, 2005; Kia-Keating, Sorsoli, & Grossman, 2010; Larson, Newell, Holman, & Feinauer, 2007; Lisak & Luster, 1994), studies such as this offer potential assessment and intervention considerations for survivors while informing everyone else of their needs, experiences, and existence.

References

- Alaggia, R., & Millington, P. (2008). Male child sexual abuse: A phenomenology of betrayal. *Clinical Social Work Journal*, *36*, 265-275. doi: 10.1007/s10615-007-0144-y
- Alexander, P. C. (1992). Application of attachment theory to the study of sexual abuse. *Journal of Consulting and Clinical Psychology*, *60*(2), 185-195.
- Bacon, H., & Richardson, S. (2001). Attachment theory and child abuse: an overview of the literature for practitioners. *Child Abuse Review*, 10, 377-397. doi: 10.1002/car.718
- Berg, B. L. (2009). *Qualitative research methods for the social sciences*. Boston, MA: Allyn & Bacon.
- Bifulco, A., Kwon, J., Jacobs, C., Moran, P. M., Bunn, A., & Beer, N. (2006). Adult attachment style as mediator between childhood neglect/abuse and adult depression and anxiety. *Social Psychiatry and Psychiatric Epidemiology*, 41(10), 796-805. doi: 10.1007/s00127-006-0101-z
- Bolen, R. (2002). Child sexual abuse and attachment theory: are we rushing headlong into another controversy? *Journal of Child Sexual Abuse*, 11(1), 95-124. doi: 10.1300/J070v11n01_05
- Bretherton, I. (1992). The origins of attachment theory: John Bowlby and Mary Ainsworth. *Developmental Psychology*, 28(5), 759-775.
- Briere, J., & Elliott, D. M. (2003). Prevalence and psychological sequelae of self-reported childhood physical and sexual abuse in a general population sample of men and women. *Child Abuse & Neglect*, 27, 1205-1222. doi: 10.1016/j.chiabu.2003.09.008
- Briere, J., Evans, D., Runtz, M., & Wall, T. (1988). Symptomology in men who were molested as children: A comparison study. *American Journal of Orthopsychiatry*, 58, 457-461. doi: 10.1111/j.1939-0025.1988.tb01606.x
- Brown, G. R., & Anderson, B. (1991). Psychiatric morbidity in adult inpatients with childhood histories of sexual and physical abuse. *The American Journal of Psychiatry*, 148, 55-61. Retrieved from PsycINFO.
- Canadian Institutes of Health Research, Natural Sciences and Engineering Research Council of Canada, and Social Sciences and Humanities Research Council of Canada. (2010). *Tri-Council Policy Statement: Ethical Conduct for Research*

Involving Humans. Retrieved from:

http://www.pre.ethics.gc.ca/pdf/eng/tcps2/TCPS_2_FINAL_Web.pdf

- Creswell, J.W. (2007). *Qualitative Inquiry and Research Design: Choosing among five approaches*. Thousand Oaks, CA: Sage Publications.
- Cresswell, J. W. (2003). *Research design: Qualitative, quantitative, and mixed methods approaches* (2nd ed.). Thousand Oaks, CA: Sage Publications.
- Creswell, J. W. & Miller, D. L. (2000). Determining validity in qualitative inquiry. *Theory into Practice*, *3*, 124-130. doi: 10.1207/s15430421tip3903_2
- Crete, G. K. & Singh, A. A. (2015). Resilience strategies of male survivors of childhood sexual abuse and their female partners: A phenomenological inquiry. *Journal of Mental Health Counselling*, 37(4), 341-354. doi: 10.17744/mehc.37.4.05
- Cross, T. P., Walsh, W. A., Simone, M., & Jones, L. M. (2003). Prosecution of child abuse: A meta-analysis of rates of criminal justice decisions. *Trauma, Violence, & Abuse, 4*(4), 323-340. doi: 10.1177/1524838003256561
- Deering, R. & Mellor, D. (2011). An exploratory qualitative study of the self-reported impact of female-perpetrated childhood sexual abuse. *Journal of Child Sexual Abuse*, 20, 58-76. doi: 10.1080/10538712.2011.539964
- Dhaliwal, G. K., Gauzas, L., Antonowicz, D. H., & Ross, R. R. (1996). Adult male survivors of childhood sexual abuse: prevalence, sexual abuse characteristics, & longterm effects. *Clinical Psychology Review*, *16*, 619-639. doi: 10.1016/S0272-7358(96)00018-9
- Diamanduros, T., Cosentino, C. E., Tysinger, P. D., & Tysinger, J. A. (2012). Theoretical perspectives of male sexual abuse: Conceptualization of a case study. *Journal of Childhood Sexual Abuse*, 21, 131-154. doi: 10.1080/10538712.2012.659804
- Easton, S. D., Coohey, C., Rhodes, A. M., & Moorthy, M. V. (2013). Posttraumatic growth among men with histories of childhood sexual abuse. *Child Maltreatment*, 18(4), 211-220. doi: 10.1177/1077559513503037
- Easton, S. D., Renner, L. M., & O'Leary, P. (2013). Suicide attempts among men with histories of child sexual abuse: Examining abuse severity, mental health, and masculine norms. *Child Abuse & Neglect*, *37*, 380-387. doi: 10.1016/j.chiabu.2012.11.007

- Easton, S. D., Saltzman, L. Y. & Willis, D. G. (2014). "Would you tell under circumstances like that?": barriers to disclosure of child sexual abuse for men. *Psychology of Men & Masculinity*, 15(4), 460-469. doi: 10.1037/a0034223
- Edelson, M. G., & Joa, D. (2010). Differences in legal outcomes for male and female children who have been sexually abused. *Sexual Abuse: A Journal of Research and Treatment, 22, 427-442. doi: 10.1177/1079063210375973*
- Erozkan, A. (2016). The link between types of attachment and childhood trauma. *Universal Journal of Educational Research*, *4*(5), 1071-1079. doi: 10.13189/ujer.2016.040517
- Feeny, J. A., & Noller, P. (1990). Attachment style as a predictor of adult romantic relationships. *Journal of Personality and Social Psychology*, 58(2), 281-295. doi: 10.1037/0022-3514.58.2.281
- Fleury, T. & McLellan Day, K. (2009). *Playing with fire*. Chicago, IL: Triumph Books.
- Flowers, P., Smith, J. A., Sheeran, P., & Beail, N. (1997). Health and romance: Understanding unprotected sex in relationships between gay men. *British Journal of Health Psychology*, 2, 73-86. doi: 10.1111/j.2044-8287.1997.tb00524.x
- Gill, M., & Tutty, L. M. (1998). Sexual Identity Issues for Male Survivors of Childhood Sexual Abuse: A Qualitative Study. *Journal of Childhood Sexual Abuse*, 6(3), 31-47. doi: 10.1300/J070v06n03_03
- Gill, M., & Tutty, L. M. (1999). Male survivors of childhood sexual abuse: A qualitative study and issues for clinical consideration. *Journal of Childhood Sexual Abuse*, 7(3), 19-33. doi: 10.1300/J070v07n03_02
- Grossman, F. K., Sorsoli, L., & Kia-Keating, M. (2006) A gale force wind: meaning making by male survivors of childhood sexual abuse. *American Journal of Orthopsychiatry*, 76(4), 434-443. doi: 10.1037/0002-9432.76.4.434
- Gruenfeld, E., Willis, D. G., & Easton, S. D. (2017) A very steep climb: therapists' perspectives on barriers to disclosure of child sexual abuse experiences for men. *Journal of Child Sexual Abuse* 26(6), 731-751. doi: 10.1080/10538712.2017.1332704
- Grundy, A. L., Pollon, D. E., & McGinn, M. K. (2003). The participant as transcriptionist: Methodological advantages of a collaborative and inclusive research practice.

International Journal of Qualitative Methods, 2, 23-32. Retrieved from http://ejournals.library.ualberta.ca/index.php/IJQM/article/view/4523/3784

- Haverkamp, B. E. (2005). Ethical perspectives on qualitative research in applied psychology. *Journal of Counseling Psychology*, 52(2), 146-155. doi: 0.1037/0022-0167.52.2.146
- Hickman, S. E., & Muehlenhard, C. L. (1999). "By the semi-mystical appearance of a condom": How young women and men communicate sexual consent in heterosexual situations. *The Journal of Sex Research*, *36*(3), 258-272. doi: 10.1080/00224499909551996
- Holmes, G. R., Offen, L., & Walker, G. (1997). See no evil, hear no evil, speak no evil: why do relatively few male victims of childhood sexual abuse receive help for abuse-related issues in adulthood? *Clinical Psychology Review*, 17, 69-88.
- Holmes, W. C. (2007). Men's childhood sexual abuse histories by one-parent versus two- parent status of childhood home. *Journal of Epidemiology & Community Health*, 61, 319-325. doi: 10.1136/jech.2005.040188
- Hovey, A., Stalker, C. A., Schachter, C. L., Teram, E., & Lasiuk, G. (2011). Practical ways psychotherapy can support physical healthcare experiences for male survivors of childhood sexual abuse. *Journal of Child Sexual Abuse*, 20, 37-57. doi: 10.1080/10538712.2011.539963
- Hussey, D. L., Strom, G., & Singer, M. (1992). Male victims of sexual abuse: An analysis of adolescent psychiatric inpatients. *Child & Adolescent Social Work Journal*, 9, 491-503. doi: 10.1007/BF00845410
- Ivey, A. E., Ivey, M. B., & Zalaquett, C. P. (2010). Intentional counseling: Facilitating client development in a multicultural society (7th ed.). Belmont, CA: Brooks/Cole.
- Jacob, C. M. A. & Veach, P. M. (2005). Intrapersonal effects of child sexual abuse on female partners of male survivors. *Journal of Counseling Psychology*, 52, 284-297. doi: 10.1037/0022-0167.52.3.284

Kennedy, S. (2007). Why I didn't say anything. London, ON: Insomniac Press.

Kia-Keating, , M., Grossman, F. K., Sorsoli, L., & Epstein, M. (2005). Containing and resisting masculinity: Narratives of renegotiation among resilient male survivors of childhood sexual abuse. *Psychology of Men & Masculinity*, 6, 169-185. doi: 10.1037/1524-9220.6.3.169

- Kia-Keating, M., Sorsoli, L., & Grossman, M. (2010). Relational challenges and recovery processes in male survivors of childhood sexual abuse. *Journal of Interpersonal Violence*, 25, 666-683. doi: 10.1177/0886260509334411
- La Greca, A. M., & Harrison, H. M. (2005). Adolescent peer relations, friendships, and romantic relationships: Do they predict social anxiety and depression? *Journal of Clinical Child and Adolescent Psychology*, 34(1), 49-61. doi: 10.1207/s15374424jccp3401_5
- Langevin, R., Wright, P., & Handy, L. (1989). Characteristics of sex offenders who were sexually victimized as children. *Sexual Abuse: A Journal of Research and Treatment*, 2, 227-253. Retrieved from PsycINFO.
- Larkin, M. & Thompson, A. (2012). Interpretative phenomenological analysis. In A.
 Thompson & D. Harper (eds), *Qualitative research methods in mental health and psychotherapy: A guide for students and practitioners* (pp. 99-116). Oxford, UK: John Wiley & Sons.
- Larkin, M., Watts, S., & Clifton, E. (2006). Giving voice and making sense in interpretative phenomenological analysis. *Qualitative Research in Psychology*, *3*, 102-120. doi: 10.1191/1478088706qp062oa
- Larson, J. H., Newell, K. E., Holman, T. B., & Feinauer, I. D. (2007). The role of family environment in the dating relationships and readiness for marriage of young adult male survivors of non-familial childhood sexual abuse. *The American Journal of Family Therapy*, 35, 173-186. doi: 10.1080/01926180600968423
- Liem, J. H., & Boudewyn, A. C. (1999). Contextualizing the effects of childhood sexual abuse on adult self- and social functioning: An attachment theory perspective. *Child Abuse & Neglect*, 23(11), 1141-1157. doi: 0145-2134/99/\$
- Lisak, D. (1994). The Psychological impact of sexual abuse: Content analysis of interviews with male survivors. *Journal of Traumatic Stress*, 7, 525-548. doi: 10.1002/jts.2490070403
- Lisak, D., & Luster, L. (1994). Educational, occupational, and relationship histories of men who were sexually and/or physically abused as children. *Journal of Traumatic Stress*, 7, 507-523. doi: 10.1007/BF02103004

- Lowell, A., Renk, K., & Adgate, A. H. (2014). The role of attachment in the relationship between child maltreatment and later emotional functioning. *Child Abuse & Neglect, 38*, 1436-1449. doi: 10.1016/j.chiabu.2014.02.006
- MacMillan, H. L., Tanaka, M., Duku, E., Vaillancourt, T., & Boyle, M. H. (2013). Child physical and sexual abuse in a community sample of young adults: Results from the Ontario child health study. *Child Abuse & Neglect*, *37*, 14-31. doi: 10.1016/j.chiabu.2012.06.005
- Maté, G. (2008). *In the realm of hungry ghosts: Close encounters with addiction*. Toronto: Knopf Canada.
- Merriam, S. B. (2002). *Qualitative Research in Practice*. San Francisco: John Wiley & Sons, Inc.
- Mikulincer, M. (1998). Attachment working models and the sense of trust: An exploration of interaction goals and affect regulation. *Journal of Personality and Social Psychology*, 74(5), 1209-1224.
- Muller, R. T., Sicoli, L. A., & Lemieux, K. E. (2005). Relationship between attachment style and posttraumatic stress symptomology among adults who report the experience of childhood abuse. *Journal of Traumatic Stress*, 13(2), 321-332. doi: 10.1023/A:1007752719557
- Nieder, T., & Seiffge-Krenke, I. (2001). Coping with stress in different phases of romantic development. *Journal of Adolescence*, *24*, 297-311. doi: 10.1006/jado.2001.0407
- O'Leary, P. J. (2009). Men who were sexually abused in childhood: Coping strategies and comparisons in psychological functioning. *Child Abuse & Neglect*, *33*, 471-479. doi: 10.1016/j.chiabu.2009.02.004
- O'Leary, P., & Barber, J. (2006). Gender differences in silence following childhood sexual abuse. *Journal of Child Sexual Abuse*, *17*(2), 133-143. doi: 10.1080/10538710801916416
- O'Leary, P. J., & Gould, N. (2010). Exploring Coping Factors amongst Men Who Were Sexually Abused in Childhood. *British Journal of Social Work, 40*, 2669-2686. doi: 10.1093/bjsw/bcq098
- Olafson, E. (2002). Attachment theory and child abuse: some cautions. *Journal of Child Sexual Abuse*, *11*(1), 125-129.

- Parent, M. C., Gobble, T. D., & Rochlen, A. (2018, April 23). Social media behavior, toxic masculinity, and depression. *Psychology of Men & Masculinity*. Advance online publication. doi: 10.1037/men0000156
- Parent, M. C., & Moradi, B. (2011). An abbreviated tool for assessing conformity to masculine norms: Psychometric properties of the Conformity to Masculine Norms Inventory-46. *Psychology of Men and Masculinity*, *12*, 339-353. doi: 10.1037/a0021904
- Pringle, J., Drummond, J., McLafferty, E., & Hendry, C. (2011). Interpretative phenomenological analysis: A discussion and critique. *Nurse Researcher*, 18, 20-24. doi: 10.7748/nr2011.04.18.3.20.c8459
- Romano, E. & De Luca, R. V. (2001). Male sexual abuse: a review of effects, abuse characteristics, and links with later psychological functioning. *Aggression and Violent Behavior*, 6, 55-78. doi: 10.1016/S1359-1789(99)00011-7
- Red Cross Canada (n.d.). Definitions of child abuse and neglect. Retrieved from http://www.redcross.ca/what-we-do/violence-bullying-and-abuseprevention/educators/child-abuse-and-neglect-prevention/definitions-of-child-abuse-andneglect
- Schraufnagel, T. J., Davis, K. C., George, W. H., & Norris, J. (2010). Child sexual abuse in males and subsequent risky sexual behavior: A potential alcohol-use pathway. *Child Abuse & Neglect, 34*, 369-378. doi: 10.1016/j.chiabu.2009.08.013
- Senn, T. E., Carey, M. P., Vanable, P. A., Coury-Doniger, P., & Urban, M. A. (2006).
 Childhood sexual abuse and sexual risk behavior among men and women attending a sexually transmitted disease clinic. *Journal of Consulting and Clinical Psychology*, 74, 720-731. doi: 10.1037/0022-006X.74.4.720
- Simpson, J. A. (1990). Influence of attachment styles on romantic relationships. *Journal of Personality and Social Psychology*, *59*(5), 971-980. doi: 10.1037/0022-3514.59.5.971
- Smith, J. A. (2004). Reflecting on the development of interpretative phenomenological analysis and its contribution to qualitative research in psychology. *Qualitative Research in Psychology*, 1, 39-54. doi: 10.1191/1478088704qp004oa
- Smith, J. A. (2011). Evaluating the contribution of interpretative phenomenological analysis. *Health Psychology Review*, *5*, 9-27. doi: 10.1080/17437199.2010.510659

- Smith, J. A., Flowers, P., & Larkin, M. (2009). Interpretative Phenomenological Analysis. London: SAGE Publications Ltd.
- Smith, J. A., & Osborn, M. (2008). Interpretative phenomenological analysis. In G. M. Breakwell (ed), *Doing social psychology research* (pp. 229-254). doi: 10.1002/9780470776278.ch10
- Sorsoli, L., Kia-Keating, M., & Grossman, F. K. (2008). "I keep that hush-hush": Male survivors of sexual abuse and the challenges of disclosure. *Journal of Counselling Psychology*, 55, 333-345. doi: 10.1037/0022-0167.55.3.333
- Spataro, J., Mullen, P. E., Burgess, P. M., Wells, D. L., & Moss, S. A. (2004). Impact of child sexual abuse on mental health: prospective study in males and females. *British Journal of Psychiatry*, 184, 416-421. doi: 10.1192/bjp.184.5.416
- Spencer, T. D. & Tan, J. C. H. (1999). Undergraduate students' reactions to analogue male disclosure of sexual abuse. *Journal of Child Sexual Abuse*, *8*, 73-90. doi: 10.1300/J070v08n04_05
- Statistics Canada. (2013). *Population by sex and age group, by province and territory* Retrieved February 6, 2014 from Statistics Canada: http://www.statcan.gc.ca/tablestableaux/sum-som/l01/cst01/demo31b-eng.htm
- Stoltenborgh, M., van Ijzendoorn, M. H., Euser, E. M., & Bakermans-Kranenberg, M. J. (2011).
 A global perspective on child sexual abuse: Meta-analysis of prevalence around the world. *Child Maltreatment*, *16*, 79-101. doi: 10.1177/1077559511403920
- Thorpe, A. (2010). *Experiencing the Impact of Child Sexual Abuse within Intimate Partner Relationships*. Retrieved from http://library.usask.ca/theses/available/etd-03292011-174437/unrestricted/Thorpe_Angela_2011.pdf
- Tracy, S. J. (2010). Qualitative quality: Eight "big-tent" criteria for excellent qualitative research. *Qualitative Inquiry*, *16*(10), 837-851. doi: 10.1177/1077800410383121
- Waters, E., Merrick, S., Treboux, D., Crowell, J., & Albersheim, L. (2000). Attachment security in infancy and early adulthood: a twenty-year longitudinal study. *Child Development*, 71(3), 684-689.
- Weibe, A. D. (2011). *The Experience of Spiritual Coping Among Adult Women Survivors* of Child Sexual Abuse. Retrieved from

http://ecommons.usask.ca/bitstream/handle/10388/ETD-2011-11-196/WIEBE-THESIS.pdf?sequence=3

Whisman, M. A. & Baucom, D. H. (2012). Intimate relationships and psychopathology. *Clinical Child and Family Psychology Review*, 15, 4-13. doi: 10.1007/s10567-011-0107-2

APPENDIX A: INVITATION TO PARTICIPATE Call for Male Participants

If you have experienced sexual abuse and identify as male, you are invited to participate in a research study examining the impact of childhood sexual abuse on the intimate relationships of adult men.

I am a University of Saskatchewan graduate student in the School and Counselling Psychology program looking for participants who meet the following criteria:

- Are over 18 years of age
- Have participated in some form of counselling with a counsellor, psychologist, pastoral counsellor, or support group
- Not currently in a state of crisis
- Able to commit 1-2 hours of their time to participate in an interview, and to review the initial interview transcript by correspondence afterwards

If you are interested, please contact Dylan Stansfield by email at csaproject.2014@usask.ca

To thank you for your participation, each participant will receive a **\$20 honorarium** at the end of the interview. This honorarium is to help cover any childcare and/or transportation costs you may have incurred as a result of your participation.

APPENDIX B: TELEPHONE SCREENING GUIDE

R: Thank you for expressing interest in the research study. I would just like to confirm that you meet the participation criteria for the study. First, I need to confirm that you are willing to participate in the study and able to commit to an interview that will last no longer than 1 to 2 hours?

R: Are you willing to correspond with me by postal mail or email after the interview to review the transcript?

R: Did you experience sexual abuse as a child?

R: Have you accessed any form of counseling with regards to the impact of child sexual abuse on your life?

R: Do you consider yourself to be in a period of emotional, professional, or relational crisis? R: Great, now that we covered the participation criteria, I would like to set up a time to meet

with you and hear about your experiences.

APPENDIX C: INTERVIEW SCHEDULE

General question asked to all participants:

1. Please share with me how you've experienced the impact of CSA in your intimate relationships in adulthood.

Guiding questions (used only if the participants have difficulty articulating their experiences):

1. How comfortable have you been discussing your history of abuse with past and/or current partner(s)?

Probe: When you've chosen to disclose that you are a survivor of CSA, what are some reactions that you've heard?

2. I'm wondering if you could share with me how you feel the impact of CSA on your relationships has changed throughout your life?

Probe: How has the experience of CSA impacted your ability to initiate an intimate relationship?

Probe: Are there any consistent problems you've faced in intimate relationships that you feel may have been caused by your experience of CSA?

Probe: How has the experience of CSA impacted your sexual intimacy?

Probe: How has your experience of CSA affected how you feel about your sexual orientation?

3. How have you made sense of these experiences and moved forward?

Probe: Are there any events in your life that you feel were particularly helpful or harmful to your healing process?

Probes that may be needed throughout the interview:

1. What was that like for you?

- 2. Can you tell me more about that?
- 3. Can you give me an example?
- 4. What do you mean?



APPENDIX D: TRANSCRIPT RELEASE FORM

Transcript Release Form

I, ______, have reviewed the complete transcript of my personal interview in this study, and have been provided with the opportunity to add, alter, and delete information from the transcript as appropriate. I acknowledge that the transcript accurately reflects what I said in my personal interview with Dylan Stansfield. I hereby authorize the release of this transcript to Dylan Stansfield to be used in the manner described in the Consent Form. I have received a copy of this Transcript Release Form for my own records.

Name of Participant

Date

Signature of Participant

Signature of Researcher

APPENDIX E: INFORMED CONSENT FORM

You are invited to participate in a research study entitled Primary and Secondary Survivors: The Impact of Child Sexual Abuse on Intimate Partner Relationships. Please read this form carefully, and feel free to ask any questions you might have about the study. **Researcher:** Dylan Stansfield, M.Ed Candidate, Department of Educational Psychology and Special Education (Email: csaproject.2014@usask.ca)

Supervisor: Dr. Stephanie Martin, Department of Educational Psychology and Special Education (Email: Stephanie.Martin@usask.ca; Phone: 306. 966.5259)

Purpose and Procedure: The purpose of this study is to understand how men who were sexually abused as children experience intimate relationships. Emphasis will be placed on how your experience of sexual abuse has impacted your relationships. I am asking you to take part in a audio recorded interview that will be approximately 60 to 120 minutes in length.

The structure of the interview will be open-ended; meaning, I will not have a detailed list of questions for you to answer. Rather, I would like you to talk openly about the experience of child sexual abuse within the context of your relationships. I am not looking for a detailed account of your abuse. Rather, I would like for you to discuss how you feel the sexual abuse has impacted your experiences in forming and maintaining intimate relationships. I realize that you may have experienced its impact in unique ways at different times in your life; if so please describe how the impact of sexual abuse on your intimate relationships has fluctuated during your life.

The interviews will take place at your convenience and will be held at the offices of HIV/AIDS Regional Services in Kingston, ON. With your permission, the interviews will be audio-recorded and will then be transcribed. You will be mailed a copy of the transcript of the initial interview and given the opportunity to review the transcript of your interview, and to add, alter, or delete information from the transcript as you see fit prior to the second interview.

Potential Benefits: Talking about the impact of child sexual abuse and how you have experienced it in your relationships may be beneficial for you and may cause you to gain a more

in-depth understanding of your experience. In addition, participating in this study will help provide understanding of the extent of the impact of child sexual abuse on intimate relationships later in life and help inform those in the helping profession who work with individuals and couples in similar situations.

Potential Risks: Risks associated with this study are minimal. However, you may experience some discomfort discussing how your experiences of how child sexual abuse has impacted your intimate partner relationship. In addition, it may also cause negative memories to surface. You have the right to determine what we discuss and may refuse to answer any question. Further, should you wish, you have the right to request we turn off the audio recorder at any time. If your discomfort increases during the interview, you have the right to end the session. I will provide a list of counselors that you may contact should you experience discomfort as a result of the interview. If you have questions regarding these agencies, I would be happy to provide with any information you may need.

Confidentiality: To ensure your privacy, the audio recordings will be kept completely confidential and personally identifying information will be removed when reporting your data. Although I may report direct quotations from the interview, you will be given a pseudonym, and all identifying information will be removed from my report.

Storage of Data: At the end of the research project, the results and associated material such as audio recordings and transcripts will be safeguarded and securely stored on campus at the University of Saskatchewan by my supervisor, Dr. Stephanie Martin, for a minimum of five years. To protect your anonymity your signed consent form will be stored in a separate location from the data records. When the data is no longer required, it will be appropriately destroyed.

Dissemination: The data from this research project will be used for the purposes of my thesis. The findings may be published and may be presented at conferences; however, your identity will be kept completely confidential.

Right to withdraw: Your participation is voluntary and you may withdraw from the study for

any reason, at any time, without penalty of any kind. You do not have to answer questions with which you are not comfortable. If you choose to withdraw from the study, any data that you have contributed will be destroyed.

Questions: If you have any questions concerning the study, please feel free to ask at any point. You are also free to contact the researcher at the email provided above if you have questions at a later time. Any questions regarding your rights as a participant may be addressed to the Behavioural Research Ethics Board through the Ethics Office (966-2084). Out of town participants may call collect. You may obtain a copy of the results of the study by contacting myself by email at csaproject2014@gmail.com or by calling my thesis supervisor, Dr. Stephanie Martin at 966-5259.

Consent to Participate: I have read and understand the description of the research study provided above. I have been provided with an opportunity to ask questions and my questions have been answered satisfactorily. I agree to participate in the study described above, understanding that I may withdraw my consent to participate at any time. A copy of this consent form has been given to me for my records.

(Signature of Participant)

(Date)

(Signature of Researcher)

(Date)